Mihaela Robila Editor

Handbook of Family Policies Across the Globe



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Contents

Part I Introduction Family Policies Across the Globe: Development, Implementation, and Assessment 3 Mihaela Robila Part II Family Policies in Africa Toward Sustainable Family Policies in Sierra Leone: Developments and Recommendations..... 15 Adeyinka M. Akinsulure-Smith and Hawthorne E. Smith 3 Public Policy and Families in Kenya..... 31 Dorothy O. Rombo, Stephan M. Wilson, and Lauren M. Oseland 4 Child- and Family-Focused Policy in Botswana 47 Randy Leite Family Policy in South Africa 59 Zitha Mokomane Part III Family Policies in Europe 6 Family Policies in Norway..... 77 Mette L. Baran, Evan E. Diehnelt, and Janice E. Jones 7 Families and Family Policies in Sweden 91 Michael B. Wells and Disa Bergnehr 8 Family Policies: The Case of Iceland..... 109 Guðný Björk Eydal and Ingólfur V. Gíslason Tony Fahey and Elizabeth Nixon

Eileen Trzcinski and Jessica K. Camp

vi

11	Family Patterns of Change in Italy: Challenges, Conflicts, Policies, and Practices	155
12	Family Policies in Spain. Antía Pérez-Caramés	175
13	Family Policies in Portugal	195
14	Family Policies in Moldova	211
15	Family Policy in Russia: Folkways Versus Stateways Revisited	223
16	For Whose Sake Is It Anyway? Evaluation of Explicit Family Policies in Turkey Aslı Çarkoğlu and Nilüfer Kafescioğlu	239
Par	t IV Family Policies in Asia	
17	Family Policy in China: A Snapshot of 1950–2010	257
18	Family Policies in Taiwan: Development, Implementation, and Assessment	273
19	Family in India: Problems and Policies	289
20	Family Policy in South Korea: Development, Implementation, and Evaluation	305
21	Policy Responses to Population-Declining Society: Development and Challenges of Family Policies in Japan	319
Par	t V Family Policies in Australia	
22	Reform, (R)evolution and Lingering Effects: Family Policies in Australia Daryl J. Higgins	335
Par	t VI Family Policies in North America	
23	Canada's Patchwork Policy: Family Policy in the Canadian Context	357
24	Romantic/Marital, Parental, and Familial Relationship Policies in the US Jacki Fitzpatrick and Erin Kostina-Ritchey	373
25	Families and Policies in Mexico	389

Contents

26 The Commonwealth Caribbean: Family Policy in the Caribbean Community (CARICOM) Allison Y. Gibbons		405
Par	t VII Family Policies in South America	
27	Family Policies in Colombia: A Focus on Policies for Vulnerable Families	425
28	Family Policy Initiatives in Ecuador: A Call for Explicit Family Policies Paul L. Schvaneveldt	445
29	Family Policies in Brazil Bila Sorj and Andréa Gama	459
Ind	ex	473

Part I Introduction

Chapter 1 Family Policies Across the Globe: Development, Implementation, and Assessment

Mihaela Robila

Abstract The goal of this book is to provide a comprehensive analysis of family policies across the globe. The volume includes 29 chapters each focusing on family policies in countries from all around the world. Family policies are defined as government activities that are designed to support families and enhance family members' well-being. Each chapter provides an overview of the impact of the historical, cultural, and socioeconomic context on families and family policy development. The chapters also provide a review of family policies in different countries, with a focus on family policies targeting marriage (e.g., family code, domestic violence), child-rearing, and work-family balance (e.g., parental, maternity, and paternity leaves; child support) and family policies supporting families at risk (e.g., support for families in poverty, for family members with disabilities, for elderly family members). Family policy implementation and assessment are also discussed, along with recommendations for further improvements. The first chapter sets the stage for the book, providing a justification for the volume and an overview of the included chapters.

Keywords Family policies • International • Socioeconomic context

Family policies are addressing the problems of families in relation to society with the goal of advancing family well-being (Zimmerman, 2001). Family policy can be defined as government activities that are designed intentionally to support families, enhance family members' well-being, and strengthen family relationships (Bogenschneider, 2006). Given the central role families play in societies, family policy development, implementation, and assessment should be a major point on the policymaking agenda of any state. This is a complex process that requires a coordination and integration of multi-disciplinary teams of different stakeholders, such as governments, policy experts, academic scholars, nongovernmental organizations, and families themselves, among others.

Family policies may be explicit or implicit (Bogenschneider, 2006). Explicit family policies include those deliberately designed to achieve specific objectives regarding the family unit and its members (e.g., parental leave, domestic violence), while implicit family policies are policies not specifically intended to affect families but that have indirect consequences on them (e.g., policies regarding international migration). Developing explicit family policies provides recognition of the importance families have in the society (Bogenschneider; Zimmerman, 2001). Bogenschneider et al. (2012) recommend

M. Robila

using a family impact lenses approach in policy development which includes as guiding principles family responsibility, family stability, family relationships, family diversity, and family engagement.

The increased knowledge base on family issues and functioning provides the opportunity for family policies to be evidence based and to be rooted in scientific data (Nutley & Webb, 2000). Evidence-based policy is an approach that helps decision makers develop policies by putting the evidence (obtained through research and data) at the center of the policymaking process (Segone, 2008). Developing family policies needs also to be supported by sound theoretical frameworks, for example, family systems theory or ecological theory (e.g., Jenson & Fraser, 2011).

Family policy implementation involves also a coordination of multiple actors. While sometimes good policies have been developed, there are difficulties with their implementation. Lack of information about the newly developed policies might prevent people from benefiting from them. For example, there are instances where domestic violence policies are developed but not well advertised and thus the victims might not be aware of their rights and available resources. Lack of resources might also prevent the implementation of certain policies and the provision of family social services. As such, a thorough integration and coordination is necessary to assure policy implementation.

Family policy monitoring and assessment identifies the most effective use of resources and identifies practices that are not performing (Mackay, 2008). In the current global economic situation, it is important to efficiently use the limited resources in promoting high-quality family policies and services. The transitions from the traditional implementation-based approaches to the results-based approaches allow for an examination of the governments' capacity to implement policies but also of the policies' effectiveness and whether they reach the desired results (Kusek & Rist, 2008).

The purpose of this book is to provide a comprehensive coverage of the different types of explicit and implicit family policies around the world, addressing family policy development, implementation, and evaluation. Various areas of explicit and implicit family policy are examined, such as marriage, family-friendly work practices, work-life balance, childcare, poverty, domestic violence, social exclusion/inclusion, and immigration, from an international perspective. The chapters explore what types of family policies exist in different countries or geographical areas and what are some of the challenges encountered in developing, implementing, and evaluating them and provide recommendations for the policymaking process.

Each chapter starts with an analysis of the impact of sociohistoric, economic, and political context on families and the policymaking process in the country, and it continues with a description of family characteristics and the state of research on families as background for evidence-based policy development. The chapters provide a discussion of the family policy framework developments targeting different family functions such as marriage (e.g., family code, domestic violence), child-rearing, and work-family balance (e.g., parental leaves), as well as family policies supporting families at risk (e.g., support for families in poverty or for families with members with disabilities). Family policy implementation and assessment are also examined, and in the concluding part recommendations for family policy development, implementation, and assessment for policymakers are provided.

Family Policies on the International Arena

The importance of family policies has been more prevalent on the international arena in the recent years, through scholarship and high-level meetings. The *Journal of Child and Family Studies* published by Springer sponsored a *Special Section* in 2012 on "*International Perspectives on Family Policies*" (Robila, 2012a) which included 13 peer-reviewed articles on family policies in different countries and regions, such as Sweden (Wells & Sarkadi, 2012), Canada (Rose, 2012), Eastern Europe (Robila, 2012b), Turkey (Çarkoğlu, Kafescioğlu, & Mitrani, 2012), Colombia and Ecuador (Carrillo, Ripoll-Nunez, & Schvaneveldt, 2012), and Kenya (Rombo & Njue, 2012). The issue constituted the springboard for this volume.

The United Nations Department of Economic and Social Affairs (UNDESA) organized several Expert Group Meetings on family policy development (UN EGM Report, 2009), on assessing family policies (UN EGM Report, 2011), and on good practices in family policies (UN EGM Report, 2012). The objective of the meetings was to provide UN Member States and other stakeholders with expert opinion and recommendations regarding family policy development, implementation, and assessment.

The 20th Anniversary of the International Year of the Family (IYF) in 2014 is a great opportunity to focus again on family issues worldwide. In line with the globalization of the study of the family, a significant advancement has been the proclamation of the International Year of the Family by the United Nations General Assembly in 1994 in order to bring attention on the importance of families in societies. The objectives of the 10th Anniversary of the Year of the Family in 2004 were, among others, to "increase awareness of family issues among Governments as well as in the private sector, to strengthen the capacity of national institutions to formulate, implement and monitor policies in respect of families, and to undertake at all levels reviews and assessments of the situation and needs of families, identifying specific issues and problems" (UN Programme on the Family, 2004). The upcoming 20th Anniversary of IYF in 2014 provides an opportunity for the world to foster the advancement of family research, family policy, and family science as a whole. The United Nations Secretary General Report (2011) - Preparations for and observance of the twentieth anniversary of the International Year of the Family in 2014 - recommends that preparations for the observance "focus on developing and implementing policies in the following areas: confronting family poverty and social exclusion; ensuring work-family balance; and advancing social integration and intergenerational solidarity" (p. 1). Bringing family policies on the international arena is thus an opportunity to underline the importance of their development, implementation, and evaluation, in supporting families fulfill their functions.

Family Policies Across the Globe

The purpose of this book is to provide a comprehensive overview of the state of family policymaking field across the globe. The following section presents a synthetic summary of the chapters included in the book grouped based on geographical location. Chapters have been included from a wide variety of countries, with diverse sizes and socioeconomic and policy developments.

Family Policies in Africa

Family issues in Africa are complex and challenging, with poverty and the HIV/AIDS epidemic being very significant. Several chapters covered family policies in African countries: Sierra Leone (Adeyinka M. Akinsulure-Smith and Hawthorne E. Smith), Kenya (Dorothy O. Rombo, Stephan M. Wilson, Lauren M. Oseland), Botswana (Randy Leite), and South Africa (Zitha Mokomane). The chapter on *Toward Sustainable Family Policies in Sierra Leone: Developments and Recommendations* coauthored by Adeyinka M. Akinsulure-Smith and Hawthorne E. Smith illustrated the powerful influence that the historical and current societal events have on the development of family polices, along with cultural, religious, and social traditions. The political and military instability in this small western African country contributed to the decrease of quality of daily life for many people. The authors examined the policies aimed at supporting families highlighting the challenges that the post-conflict context brings for their development and implementation.

The chapter by Dorothy O. Rombo, Stephan M. Wilson, and Lauren M. Oseland on *Public Policy and Families in Kenya* presented a review of the characteristics of contemporary Kenyan families, discussing also the processes of mate selection, marriage, cohabitation, and divorce. Policies related

6 M. Robila

to families raising children and the ones targeting families at risk were reviewed. A range of social policies addressing poverty, gender discrimination, public health, and HIV/AIDS were addressed. The chapter concluded with a set of recommendations for further policy development and implementation, encouraging the "modeling of a family policy framework that suits the Kenyan family's needs and that takes into account diversity to sustain useful and harmless cultural practices."

In the chapter on *Child and Family-Focused Policy in Botswana*, Randy Leite presented the macrolevel policy approaches to addressing issues impacting child and family well-being with a focus on those targeting achieving the Millennium Developmental Goals (e.g., eradicate extreme poverty and hunger, promote gender equality, improve maternal health). While the country has experienced significant economic growth in the recent years, several issues are still of high concern, among them being the HIV/AIDS epidemic and high rates of poverty, with children being deprived in many areas such as housing, access to sanitation, and communication systems.

Family Policy in South Africa reflected the areas' socioeconomic and political context. Zitha Mokomane discussed the family policies during the apartheid and post-apartheid eras and underlined the detrimental effects that the apartheid policies had on families and how they are associated with many of the socioeconomic problems facing contemporary families. The post-apartheid government developed various policies in order to transform the South African society, and while there has been more interest in families' well-being, family policies are still implicit rather than explicit.

Family Policies in Europe

Family policies in Europe are discussed in several chapters. Family policies in the Nordic countries, such as Norway (Mette L. Baran, Evan E. Diehnelt and Janice E. Jones), Sweden (Michael B. Wells and Disa Bergnehr), and Iceland (Guðný Björk Eydal and Ingólfur V. Gíslason), were offered as examples of good practices in the field. Chapters were included on family policies in Ireland (Nixon & Fahey), Germany (Eileen Trzcinski), Italy (Giovanna Gianesini), Spain (Antía Pérez-Caramés) Portugal (Maria das Dores Guerreiro); Moldova (Valentina Bodrug-Lungu and Mihaela Robila), Russia (Zhanna Kravchenko and Irina Grigorieva) and Turkey (Aslı Çarkoğlu and Nilüfer Kafescioğlu).

The chapter on *Family Policies in Norway* by Mette L. Baran, Evan E. Diehnelt, and Janice E. Jones presented the policies targeting families in one of the less populated (with almost five million people) but also one of the richest countries of Europe (gross domestic product per capita of \$53,300 in 2012). In 1993 a new law on registration of partners of the same sex made Norway the second country in the world (after Denmark) to recognize same-sex partnerships. Another significant progress is represented by the 10-week paid paternity leave which is taken by 85 % of fathers.

Michael B. Wells and Disa Bergnehr presented in *Families and Family Policies in Sweden* an overview of this country's family policies which have supported equality that allowed for a sense of individuality encouraging people to choose the family lifestyle they want. Sweden has a generous parental leave package, free education and health care, and has also created similar rights for cohabiters and married couples as well as for same-sex and opposite-sex couples. Many countries are using Sweden's policies as models for their own policymaking process.

The chapter on *Family Policies: The Case of Iceland* (Guðný Björk Eydal and Ingólfur V. Gíslason) illustrated that Iceland's explicit family policies were enacted by a parliamentary resolution in 1997 which emphasized the need to strengthen the position of family (regardless of family type) and to base the welfare of the family on equality between men and women in all aspects of life. To support this perspective and to ensure children's access to both mothers and fathers and to enable both men and women to coordinate work and family life, a 2000 Icelandic law offers each parent three non-transferable months of paid parental leave, plus three more months that they can share (more than 90 % of fathers are using their paternity leave).

In *Family Policy in Ireland*, Elizabeth Nixon and Tony Fahey discussed the evolutions of policies focused on family issues and the controversies around the ones on contraception, divorce, and abortion, while gender equality and children's rights also emerged as policy issues. The legislation on poverty alleviation and women participation in the workforce remains at the forefront of policymaking agenda in Ireland.

Family Policy in Germany by Eileen Trzcinski and Jessica K. Camp illustrated the major directional changes in policies regarding family, labor market and social assistance, the factors that determined them (e.g., low fertility rates, aging of the population), and their impact on families. Examples of these changes included expansions of parental leave and benefits and increase of availability of childcare. The authors also discussed the policies regarding the retrenchments in the generosity of unemployment benefits and social assistance.

Family Policies in Italy (Giovanna Gianesini), Spain (Antía Pérez Caramés), and Portugal (Maria das Dores Guerreiro) indicated the characteristics of Southern European families and their countries legislation. The chapter on Family Patterns of Change in Italy: Challenges, Conflicts, Policies, and Practices (Giovanna Gianesini) shows that the cultural and political resistance to change, the conservative gender-specific division of labor within the family, and a familialism ideology in which the male breadwinner is primarily responsible for the well-being of all family members have made the welfare state reforms hard to implement. The intergenerational family networks fill the gaps of the welfare system and are among the most important sources of economic and care support. However, due to European Union initiatives, changes to the work-family policy area have been made.

Family Policies in Spain by Antía Pérez-Caramés underlined the factors impacting family policies in this country, such as the Spanish welfare system and the role of families in social care, and presented an overview of the policies supporting families. Among author's policy recommendations are developing policies that encourage the joint responsibility of men and women when sharing housework and family care (e.g., increasing the paternity leave), establishing a systematic assessment system, and increasing the statistical information on family policies.

Family Policies in Portugal by Maria das Dores Guerreiro analyzed family policies in Portugal, beginning with a brief historical and political presentation of the country's situation. Several family characteristics of Portuguese families are discussed, for example, a large number (15 % of 30–34 years old) of adult children living in their parents' home. In 2009 the Labour Code was revised to reflect more involvement of the father in child-rearing and shared parenthood. The provisions of childcare are relatively good, Portugal having a childcare system that covers more than 35 % of children between 0 and 2 and preschools for about 85 % of 3–5-year-olds.

The chapter on *Family Policies in Moldova* (Valentina Bodrug-Lungu and Mihaela Robila) presented an overview of the regulations regarding families in Moldova, organized in three main groups, those regarding marriage (e.g., family code, domestic violence), child-rearing (e.g., parental leaves), and those supporting families at risk (e.g., families with members with disabilities). The chapter also presented how the socioeconomic context influences family life and discussed few of Moldova's main contemporary challenges, such as the low fertility rate (one of the lowest in Europe) and increased economic outmigration.

Family Policy in Russia: Folkways Versus Stateways Revisited (Zhanna Kravchenko and Irina Grigorieva) examined the interplay of family autonomy with the state intervention. During the Soviet era social policies offered extensive institutional childcare and job protection in order to increase fertility and female employment. After the 1990s, the impact of earlier policies is still visible, with women being expected to perform the double duty of work and family care and men staying removed from the family domain. The authors discussed the consequences of the political and socioeconomic changes on families and family policy development and provided recommendations for further improvements.

At the confluence of Europe with Asia, Turkey is undergoing interesting policy changes. The chapter on For Whose Sake Is It Anyway? Evaluation of Explicit Family Policies in Turkey by Aslı Çarkoğlu and Nilüfer Kafescioğlu presented the recent legislative changes that took place to accommodate the needs of the contemporary Turkish families. The authors discussed in detail the family policies

8 M. Robila

explicitly linked to the formation and daily life of families, such as the Civil Code, the Labor and Social Security Laws, as well as the regulations concerning family violence.

Family Policies in Asia

With an increasingly large population, Asia has some specific characteristics, such as strong economic development of its countries and families, but also some challenges. Family policies in Asia were discussed in several chapters, specifically on India (JP Singh), China (Yan Ruth Xia, Haiping Wang, Anh Do, and Shen Qin), Taiwan (Shann Hwa Hwang), South Korea (Meejung Chin, Jaerim Lee, Soyoung Lee, Seohee Son, and Miai Sung), and Japan (Yoshie Sano and Saori Yasumoto). The chapter on *Family Policy in China: A Snapshot of 1950–2010* by Yan Ruth Xia, Haiping Wang, Anh Do, and Shen Qin examines how Chinese policies have been influenced by the political, socioeconomic, and cultural context over the years. Specific policies regarding marriage; child-rearing; child, women, and elderly protection; family planning; and health care in the past 60 years are discussed in depth, followed by an analysis of policy implementation and evaluation. With family stability at the core of a functioning society, China developed regulation aimed at supporting family functioning and stability while also responding to demographic and socio-ecological context need. For example, the One-Child Policy helped the country control its population increase while also raised challenges such as imbalanced sex ratio and higher elderly dependency ratio.

Family Policy in Taiwan: Development, Implementation, and Assessment by Shann Hwa Hwang presented, besides an overview of family policies in this country, a comprehensive analysis of three important policies: Divorce Law, Domestic Violence Prevention Act, and Family Education Act. Taiwan is the first country in the world that enacted a Family Education Law (2003), involving several aspects, such as developing family life education curriculum and introducing it at different educational levels, setting aside funding for it, and developing coordinating mechanisms between central government agencies and family education centers at local levels to promote, deliver, and evaluate family education programs.

Family in India: Problems and Policies by J. P. Singh reviews the conditions of families in this country and the transformations they experienced. The Indian family system has changed significantly from the traditional to a more nuclear and modern one. The government developed several legislative measures addressing a variety of spheres, among which are widow remarriage, women's right to property, practice of child marriage, child labor, succession, adoption and maintenance, dowry, family court, dissolution of marriage, and domestic violence.

The chapter on Family Policy in South Korea: Development, Implementation, and Evaluation by Meejung Chin and her colleagues reviewed the recent demographic changes such as low fertility, increase of aging population, decrease in marriage, increase in divorce and transnational marriages, and the policy responses to them, such as the Marriage Law and Civil Law, the Framework Act on Healthy Families, and the Multi-Cultural Family Support Act. These policy responses eliminated the traditional patriarchal headship system of the family, provided equal opportunity for male and female household headship, and developed strength-based and preventive family programs and services.

Policy Responses to Population Declining Society: Development and Challenges of Family Policies in Japan by Yoshie Sano and Saori Yasumoto examined the impact of demographic changes such as decline in fertility rate, increasing of aging population and economic stagnation, on family issues and policies. Government initiatives aimed at increasing total fertility rate and overall family well-being in order to secure a more robust labor force have been also presented.

Family Policies in Australia

The chapter on *Reform*, (*R*)evolution, and Lingering Effects: Family Policies in Australia by Daryl J. Higgins presented the policy restructurings that have occurred in different areas such as income, work and family life, childcare and support, as well as family violence. Some of these policy revisions were provoked by social changes in Australia like increased cohabitation and divorce rates. The author also presented the mechanisms for evaluating the effectiveness of policies (e.g., large-scale longitudinal surveys, analysis of administrative data by governments departments) and examples of revisions to policies following evaluation.

Family Policies in North America

Family policies in North America were examined through chapters on Canada (Hilary A. Rose and Áine M. Humble), the United States (Jacki Fitzpatrick and Erin Kostina-Ritchey), Mexico (Cristina Gomes), and the English-speaking Caribbean (Allison Y. Gibbons). The chapter on *Canada's Patchwork Policy: Family Policy in the Canadian Context* (Hilary A. Rose and Áine M. Humble) used a lifespan development perspective while addressing policy related to family formation and maintenance, family dissolution, and family succession.

Jacki Fitzpatrick and Erin Kostina-Ritchey provided in their chapter on *Romantic/Marital*, *Parental*, and Familial Relationship Policies in the United States a comprehensive review of policies impacting families. The authors noted that the United States is a country with a history of values and policies that have not been fully integrated into a single coherent approach. The fragmented and fluid nature of family policy would allow for flexibility in adapting to the contemporary family trends.

Cristina Gomes' chapter on *Families and Policies in Mexico* indicated that families in Mexico had historically been influenced by socioeconomic, political, and institutional fragmentation and inequalities in policy coverage and quality, changing from an agrarian and rural to an industrialized and urban society, reproducing the historical exclusion of the majority of poor and ethnic groups in both rural and urban areas. Poverty reduction strategies, such as the *Oportunidades*, have contributed effectively to achieve their main objectives, such as increasing the level of income, nutrition, education, and health access for poor families; however, other institutions and programs continue operating in all these areas, and it is difficult to assess that the effects and results found are related exclusively to the program.

The Commonwealth Caribbean: Family Policy in the Caribbean Community (CARICOM) by Allison Y. Gibbons illustrated the diversity of family policies in the Caribbean region. While there are some identifiable practices and traditions that unify the region as a single geographic entity, the social complexities are significant determining the process of policymaking in the area to be overwhelming. The author underlined the strides made regarding some policies initiatives such as domestic violence, education, equal employment opportunities, maternal and child health, and gaps existent in other areas (e.g., for low-income families, for indigenous groups).

Family Policies in South America

Family diversity in South America is reflected in three chapters focused on family policies in this area: Family Policy in Colombia (Karen Ripoll-Núñez and Sonia Carrillo), Family Policies in Ecuador (Paul Schvaneveldt), and Family Policies in Brazil (Bila Sorj and Andréa Gama). Family Policy in Colombia: A Focus on Policies for Vulnerable Families (Karen Ripoll-Núñez and Sonia Carrillo) targeted primarily families living under vulnerable conditions, such as poverty and forced displacement.

10 M. Robila

The economic crisis of the last decade increased unemployment and poverty rates in Colombia, and the internal armed conflict forced families in rural areas to migrate to safer territories (forced displacement). This chapter presented an overview of family policies in Colombia and described two programs targeting poor families and displaced families.

Family Policies in Ecuador: A Call for Explicit Family Policies (Paul Schvaneveldt) addressed the major policies initiatives designed to improve quality of life for Ecuadorian families, which targeted especially poor families. The author argued that although the government recognized the importance of family policies, existing policies and programs do not directly focus on family issues, being more implicit than explicit. Political and economic instability and demographic changes along with challenges in coordinating the different policymaking agencies might hinder the development, implementation, evaluation of family policies in Ecuador.

Bila Sorj and Andréa Gama noted in their chapter on *Family Policies in Brazil* that the country is confronted with high levels of poverty and social inequality, which in turn affect families and family policies. In Brazil, the recognition of the importance of balance between the work sphere and family responsibilities is still incipient, although the last decades have been marked by changes in the structure of families and the labor market. The Civil Law Code of 2003 recognized the equality of rights and obligations for men and women and broadened the concept of family to include single-parent families and "stable unions" (non-matrimonial) as family entities recognized by the state. The authors recommended that the fragmentation of the Brazilian social policies be overcome through integration of initiatives that combat social inequality among families in all respects.

Conclusions

Developing effective family policies needs to be a priority on the policymaking agenda for every government. With family as base of society, states cannot afford not to pay attention to family needs and functioning. The main goal of family policy is to support families fulfill their functions. There is information now, more than ever before, on how to develop, implement, and asses family policies. By creating multidisciplinary teams and by using research as base for policymaking, effective family legislation can be developed. Assuring that the regulations are implemented necessitates again collaborations across different stakeholders. Finally, assessing and using the policy evaluation results to further revise and improve family policies is an absolutely necessary step. Along the way, not to be missed is the role and involvement of families in this process. In order to be effective, the family policymaking process must ask and receive families' inputs at all the levels. Moreover, public education on family policies is an integral part of the policy implementation and assessment procedure. Without the population being informed about the policies, it is impossible for them to be implemented and assessed.

Family policymaking process has its own challenges, among which some of the most prevalent are the bureaucracy of some stakeholders or the limited ability to work with colleagues from different fields (e.g., governments, academia, NGOs). As such, flexibility and openness in working with others need to be encouraged. The diverse roles that different stakeholders can play need to be recognized. For example, it is well known the very active role that NGOs could play in advocacy campaigns for different causes (e.g., in developing domestic violence laws).

While the world is confronted with many challenges, economic, political, or otherwise, families demonstrate incredible resilience and renewal capacities. Family policies have the opportunity to tap into these resources and supplement them. The chapters of this book illustrate that there has been significant progress in family policies worldwide and that there are still ahead many opportunities for advancements.

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Part II Family Policies in Africa

Chapter 2

Toward Sustainable Family Policies in Sierra Leone: Developments and Recommendations

Adeyinka M. Akinsulure-Smith and Hawthorne E. Smith

Abstract Sierra Leone is a small, developing country in West Africa with a complex mix of ethnicities and religions. The country is just now emerging from a period of brutal violence and social upheaval that has placed extreme burdens on existing familial structures and functioning. In this context, the creation, promotion, and implementation of effective family policies are of crucial importance to Sierra Leone's sustained economic, social, and political development. This chapter will explore the cultural underpinnings of what "family" means in Sierra Leone. It will also look at the political history of family policy making in Sierra Leone and provide recommendations for future directions that will enable this post-conflict society to continue moving forward in a constructive way.

Keywords Sierra Leone • Family policies • Post-conflict societies • Political development

By exploring the concept of family within the Sierra Leonean context, this chapter will examine the influence of historical, cultural, social, and current events on the development of family policy in a complex, post-conflict scenario. We will identify current and emerging policies aimed at supporting families and enhancing the well-being of family members. We will highlight challenges faced by Sierra Leonean families and make recommendations regarding future directions to achieve sustainable family policy in Sierra Leone. While the Sierra Leonean context is uniquely complex, we are confident that the lessons we learn from this particular situation will prove illustrative for other societies that are emerging from conflict and for other developing nations that are striving to create family policies and bridge complex social, cultural, and religious diversity.

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The Impact of Sociohistoric, Economic, and Political Context on Families and the Policy-Making Process in the Sierra Leone

Historical Background

To understand the challenges and processes involved in setting effective family policies in Sierra Leone, it is important to have some notion of the country's political and legal history, its cultural influences, and its current economic and public health statuses. Sierra Leone is a small country, situated on the west coast of Africa, with an area of 71,740 sq km (27,699 sq mi), extending 338 km (210 mi) from north to south and 304 km (189 mi) from east to west. Sierra Leone shares a border with Guinea on the north and east, Liberia on the southeast, and the Atlantic Ocean on the south and southwest. Sierra Leone has a population of approximately 5.2 million, comprised of more than 18 different ethnic groups, such as the Mende, Temne, and Fulani (*Encyclopedia of the Nations*, 2010). Sierra Leone has four provinces, divided into 12 districts. There are also approximately 150 traditional chiefdoms, which still wield significant legal and political power, particularly in rural areas (U.S. Department of State, 2012). While the majority of Sierra Leoneans are Muslim (60 %), 30 % follow primarily indigenous belief systems, and 10 % are Christian. Despite vast natural resources, such as diamonds, bauxite, rutile, iron ore, timber, coffee, cocoa, and gold, Sierra Leone consistently ranks near the bottom of the United Nations' Human Development Index, with an annual per capita income of roughly \$209 (Kallon & Dundes, 2010; Kposowa, 2006; U.S. Department of State, 2006).

Slavery plays a significant role in Sierra Leone's history. There are reports of Spanish slavers bringing Sierra Leoneans to St. Augustine, Florida, as early as the sixteenth century. Sierra Leoneans were reportedly among those taken in bondage to Jamestown, Virginia, in 1619. Beginning in 1652, large numbers of Sierra Leoneans were enslaved and taken to the Sea Isles off the coast of South Carolina and Georgia, where they were highly valued for their rice farming skills. In fact, the Geechie and Gullah languages spoken in the Sea Isle region bear a striking resemblance to Krio, Sierra Leone's lingua franca. Some Americans may be aware of the role Sierra Leone played in the history of the slavery in the United States due to the Amistad revolt in 1839. The leaders of that seaborne rebellion were members of the Mende ethnic group from Sierra Leone. Sierra Leoneans have figured prominently from the earliest periods of the English-speaking North American slave trade (Kallon & Dundes, 2010; Leigh, 1998; U.S. Department of State, 2012).

In 1787, the Sierra Leone Company repatriated 400 slaves from Nova Scotia, the United States, and Great Britain. The freed slaves started a new colony at a settlement known as the "Province of Freedom." By 1792, "Freetown" had become one of England's first colonies in Africa. When England outlawed the transatlantic slave trade in 1807, Freetown became an embarkation point for liberated slaves. Some slaves were recaptured on the high seas by Britain's West African Fleet, while others emigrated from maroon communities in Nova Scotia and Jamaica (Mannix & Cowley, 1962). A new group, the Krios, descended from these returnees. The Krios have formed a relatively privileged, Western-assimilated group that practices Western modes of marriage and familial norms. Indigenous groups have expressed resentment toward the Krios at times (Harrell-Bond, 1976; Human Rights Watch [HRW], 2003). Numerous, unsuccessful revolt attempts against British rule and Krio domination occurred during the early days of colonization (U.S. Department of State, 2012).

In 1896, Britain claimed Sierra Leone as a protectorate and took control of the extraction and sale of Sierra Leone's raw resources, including agricultural products, timber, iron, and diamonds. Sierra Leone's eventual transition from British rule to independence occurred in largely peaceful increments. Throughout the 1950s, British-style parliamentary institutions were introduced; on April 25, 1961, Sierra Leone became an independent state within the British Commonwealth. In 1971 Sierra Leone became a republic under the leadership of democratically elected Prime Minister Siaka Stevens.

Sierra Leone's post-independence political history has been marked by instability and widespread corruption. From the beginning, political leaders, scrambling to legitimize their power in a culturally diverse and economically poor country, turned to authoritarian patterns in order to suppress all opposition. Stevens survived a failed coup attempt in 1967 and by 1978 had turned his country into a one-party state (Keen, 2005; Kposowa, 2006). New democratic institutions, formed in the shadow of oppressive, undemocratic colonial institutions, did not make for a government that adequately addressed Sierra Leone's problems. Cynicism and youth alienation grew during the rule of Stevens' successor, Joseph Momoh, as the perceptions of corruption and other abuses of power increased (Maxted, 2003). In 1992, Captain Valentine Strasser seized power; however, his regime proved ineffectual as well. Patterns of unequal economic development that began in colonial times continued in the independent Republic of Sierra Leone (Kposowa, 2006; U.S. Department of State, 2012).

Outside powers also took advantage of this societal disaffection and disorder to dominate and control the diamond-producing areas of the country. The ranks of the Revolutionary United Front (RUF) swelled with Burkinabe and Liberian allies and mercenaries (Keen, 2005). The International Court of Justice in The Hague subsequently convicted ex-Liberian president, Charles Taylor, for crimes against humanity in the Sierra Leonean conflict.

This volatile mix of political and military instability played a large role in the social degradation in the daily life of Sierra Leoneans (Amowitz et al. 2002; Baker & May, 2004; Gberie, 2005; Kposowa, 2006, Ndumbe, 2001). Associated factors, such as youth alienation, political corruption, and a lack of societal solidarity, also contributed to the catastrophe that was the "Rebel War" (Baker & May, 2004).

The "Rebel War"

The "Rebel War" would be waged for more than a decade, from 1991 to 2002. The war exacted a devastating human toll, leaving 50,000 dead and two million more (roughly half the population) displaced (Denov, 2010; Kallon & Dundes, 2010). Extensive horrific violence, trauma, and suffering characterized this conflict. The rebels routinely engaged in mutilation, amputation, and wanton killing of civilians. They committed widespread acts of sexual violence toward approximately 215,000 women and girls. An unknown number of girls still remain with their captors as "rebel wives," dislocated from their families of origin. As a matter of policy, the rebels forcibly recruited children; sources estimate that approximately half of the rebel forces were comprised of children between the ages of 8 and 14 (Amowitz et al., 2002; Gberie, 2005; HRW, 2003; Kposowa, 2006; Maxted, 2003; Medeiros, 2007).

The war also severely impacted the country's infrastructure. The war exacted a devastating human toll and severely crippled the country's infrastructure. The rebels destroyed 300 towns and villages and 340,000 houses. Eighty percent of health-care posts required reconstruction, while the country's schools were left grossly understaffed, with more than half of all teachers absent. The country lost 85 % of its livestock (Baker & May, 2004). It is difficult to overstate the profoundly negative effect of the civil war on the social and economic functioning of families and communities in Sierra Leone. The number of victims extends far beyond those who were killed, injured, and displaced. As Baker and May point out, many Sierra Leoneans lost their businesses and life's savings. Students were forced to discontinue their studies. People experienced the decimation of their social networks. Still others suffered related health problems.

The Meaning of "Family" in Sierra Leone

Sierra Leone has a complex mixture of deep-rooted traditions and cultural conceptions of what it means to be a family. We realize that the notion of what constitutes "family" varies across groups and

societies. Sierra Leone may not fit the formal definitions of family that are restricted to blood relations and direct marriage affiliation (Tillman & Nam, 2008). Sierra Leone is an example of a country where the understanding of family and kinship is fluid and encompassing. The Sierra Leonean conceptualization of family is more inclusive than exclusive (Spencer-Walters, 2008). In extended kinship or family networks, members are interdependent and may share financial and childrearing responsibilities out of mutual need. These families may include fictive family members who have no direct biological link. Sierra Leoneans often call respected elders "uncle" or "auntie," whether or not a blood connection exists (Stewart, 2007).

The rebel war experience reinforced the informal familial arrangements frequently seen in modern Sierra Leonean society. With such large numbers of displaced people and orphaned children and with many traditional familial structures compromised or even destroyed, informal or nontraditional familial configurations have become even more common. One must consider this complex mix of the traditional cultural norms and the dynamic current realities when addressing family policy in Sierra Leone. The 2009 Demographic and Health Survey reflects these realities:

The average household size in Sierra Leone is 5.9 persons...Over all, one in six households (16 percent) have nine or more members. Almost four in ten households (39 percent) include children whose mother and father are not present (foster children), and 43 percent of the households include foster children and/or orphans. Urban households are more likely than rural households to have foster children (45 and 36 percent respectively). Consequently, urban households are more likely than rural households to have foster children and/or orphans (49 and 41 percent, respectively). (p. 14)

During the civil war, the institution of family suffered assaults on many fronts (Baker & May, 2004; Gberie, 2005; HRW, 2003). Nearly 10 years since the official end of the civil war, individuals, families, and communities still struggle to recover from these devastating events (Spencer-Walters, 2008). Post-conflict, families face new demands, such as economic disempowerment, substance abuse, and the breakdown and loss of familial and communal support networks. Other challenges include parenting problems, marital conflict, and familial violence (Baker & May, 2004; International Rescue Committee [IRC], 2009; Smits, n.d.). Numerous aspects of reconstruction have yet to be addressed.

Of particular concern are issues associated with marginalized and war-affected youth. Roughly 35 % of Sierra Leoneans ages 15–24 have never attended school. Frequently, children are forced into exploitative labor, particularly in the realms of prostitution, street hawking, diamond mining, deep-sea fishing, and stone breaking (IRC, 2009). Given these oppressive conditions for young people and the key role of child soldiers in the civil war, much of the emphasis during reconstruction has focused on Sierra Leonean adolescents and youth (Akinsulure-Smith & Smith, 2012; Women's Commission for Refugee Women and Children, 2002).

Sierra Leone's Legal Framework

One factor that complicates an application of uniform family policies in Sierra Leone is the country's complex combination of legal traditions. Historically, Sierra Leone has blended Western cultural values, inherited from Britain, with traditional indigenous African norms. Sierra Leonean family law reflects this blend. There are three legal systems that govern the population: (i) statutory law, which includes the inherited English common and statutory laws; (ii) customary law, largely unwritten and based on the customs and traditions of the various tribes; and (iii) Islamic law, typically considered part of customary law (Saunders, 2007; Thompson, 1991).

In rural Sierra Leone, where the majority of the population resides, only customary law is recognized (HRW, 2003). Customary law is applied by the local courts to all domestic and land disputes, family matters, and minor criminal and civil matters. Village chiefs, learned tribal elders proficient in

customary law, typically preside over such proceedings. These courts are generally the preferred forums for resolving disputes among the rural and tribal peoples, especially when such disputes revolve around the culture and customs of the indigenous tribes. Conversely, the state law is often viewed as an oppressive imposition from outside (Chanock, 1989).

It has been frequently noted that these three separate legal structures do not always operate in the interests of vulnerable groups such as children, women, and those living in rural areas (Saunders, 2007; Smits, n.d.). The city courts, which administer general or Western law, are often inaccessible to a large portion of the population. Thus, those who live in rural areas often experience a different legal system from those who live in urban areas. The government's reluctance to interfere with customary law in the rural regions of the country has further reinforced the belief that the state has no business in family and community affairs. In fact, some women may face negative repercussions within their communities for bringing domestic violence charges to the police. There has been some movement on this front, spurred by Sierra Leone's first widespread local elections in 2004 and a subsequent round of local elections in 2008. Now there are 12 district councils and five town councils outside of the Western area. Local chiefs now work more closely with these bodies to apply local justice, collect taxes, and engage in other communal functions (U.S. Department of State, 2012).

Under customary laws, women and children have few rights and little access to the justice system. In addition to lacking inheritance rights, a widow used to be expected to marry her husband's brother – perhaps as a junior wife (Roseveare, 2010; Thompson, 1991). Even small policies within civic institutions highlight a hierarchy in which girls and women are devalued. At certain clinics, expectant mothers are charged more to deliver boys than girls. Certain schools require "virginity checks" before admitting girls (IRC, 2010). Furthermore, Sierra Leone's customary law subjects the rights and privileges of children to the absolute and exclusive authority of their parents. Children are viewed as the property of their parents or guardians (Thompson, 1991).

Another challenge for the judicial system in the post-conflict context is an entrenched "culture of impunity" (Sierra Leone National Action Plan, 2009, p. 3). Although there is a significant amount of intimate partner violence in Sierra Leone, it often goes unreported. Many members of society believe that a husband has the right to beat his wife for disobedience and that a woman has no right to refuse her husband sex, even if she does not desire sexual contact (Kallon & Dundes, 2010). The Krio phrase "Bad man betteh pass empty bed," which, translated, means "It is better to have an abusive spouse than have an empty bed," captures this deeply rooted notion. Women are often encouraged by members of their local communities to stay in abusive relationships due to fear and stigma. Sensitization of community members around these issues can create more support for women, empowering them to seek the protection and services they warrant (IRC, 2012).

Local police forces often lack the resources to enforce the laws effectively, while other barriers such as hefty legal fees may discourage people from pursuing legal claims (IRC, 2009). In some areas, perpetrators of sexual violence during the war have been made to pay the medical costs for their victims, but only if the victims agree never to bring charges (IRC, 2010). Only 8 % of the 1,121 cases of sexual abuse have actually made it to court, and there were only 17 convictions for sexual crimes during all of 2009 in Sierra Leone (IRC).

Family Policy Framework Developments Targeting Different Family Functions: A Review of Family Policies in Sierra Leone

Bogenschneider (2006) has argued that family policy is organized around four main functions of the family: marriage, childrearing, financial support, and family care. This section examines current Sierra Leonean family policies regarding each of the following areas. Family policy has never been formally coordinated or given unique focus in Sierra Leone. Instead, specific policies have targeted

various components of the family, i.e., children or women, instead of the family as a whole. As a result, no clear system of explicit, institutionalized family policy has been developed. In an effort to improve the lives of women, Sierra Leone embraced the mandate of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in 1979, eventually ratifying it in 1998; however, no legislation was passed to domesticate the rights contained in the convention (Roseveare, 2010). While a 1993 National Population policy made several recommendations that directly addressed the need for family-related programming in the country, nothing was ever enacted to make those recommendations national law (Sierra Leone Gazette, 1993). In recent years, specific policies to address certain areas of family have been given a key focus.

Family Policies Targeting Marriage

In Sierra Leone, there are different types of marriage. These include the traditional or customary arranged marriage, "tap-to-me" marriage (cohabitation), bush wife marriage (during the war), and religion-based Christian and Muslim marriages. Only the last two types have any solid legal foundation (Smits, n.d.; Spencer-Walters, 2008).

As noted earlier, Sierra Leone's legal system has historically afforded women and children fewer rights; however, there has been a significant post-conflict movement toward change. On June 14, 2007, Sierra Leone passed three "gender bills" into law: the Domestic Violence Act, the Registration of Customary Marriage and Divorce Act, and the Devolution of Estates Act. These acts are especially notable because they provide protection to women under all three types of law: statutory, customary, and Muslim.

The Domestic Violence Act is the first formal law to make domestic violence a criminal offense. This act empowers authorities to intercede and strengthens protection from domestic violence through enhanced police responses, protection orders, and victim support (IRC, 2012; Saunders, 2007). This act also establishes basic rights for women in the home as well as entitlements, such as free medical care, for victims of domestic violence (IRC, 2012).

The Registration of Customary Marriage and Divorce Act is designed to put an end to child brides and forced marriage. As a direct result of this act, the marriageable age has been set at 18, and all marriages require the consent of both parties. In addition, all marriages must be officially recorded, thereby providing proof to wives who previously had little legal recourse if their husbands decided to annul the marriage. A mother can now apply for child support if a man does not provide for his children. Finally, this act also gives women the right to own property and to buy, sell, or trade as they wish (Saunders, 2007).

Under the Devolution of Estates Act, the property of a man who dies without a will now goes to his wife and children, rather than to his parents or brothers as was customary. The law also prohibits the practice of wife inheritance, in which a widow, considered the property of her dead husband, is inherited and forced into marriage with her brother-in-law (Saunders, 2007; Spencer-Walters, 2008).

Before the passage of these bills, married women were considered minors under customary law and needed a husband's permission to work outside the home or to visit family members. Legislation in these areas plays a major role in the development of sustainable family policy. Today, with many African countries struggling to recognize and deal with issues such as domestic violence and gender equality, Sierra Leone's legal stance on these issues places it in a unique position.

These new laws not only improve the position of women and children in Sierra Leone, but they also improve family well-being. Each of these gender bills has overt and covert implications for family policies. In terms of actual implementation of these bills, however, progress has been slow. There exist several difficulties, such as the need to bridge the gap between formal and customary laws and beliefs.

Unfortunately, the legislation contains no clear guidelines for prioritizing the enactment of the legislation's 90 different components. Responsibility for implementation is diffuse; it is not always clear who is responsible for what. In this context, if governmental and civil society resources are not structurally altered in an effective and sustainable way, there may be too much reliance on nongovernmental organizations (NGOs) to effect change on the ground (Akinsulure-Smith & Smith, 2012; IRC, 2012; Roseveare, 2010).

Despite this significant movement in attending to the needs of women and children, the number of educational programs and services focused specifically on families in Sierra Leone is very limited (Akinsulure-Smith & Smith, 2012). A few universities have introduced social work programs, a psychiatric nursing program has been instituted, and a strong mental health coalition advocating for improved mental health services has been formed; however, programs focused on families (e.g., family counseling) are not present and there is a dearth of local family scholars and practitioners.

Family Policies Regarding Childrearing and Family-Work Balance

Another important function of families is childrearing, through the provision of a safe and thriving environment for children. Family policies contribute to the maintenance of family values by creating a healthy environment for children. As stated earlier, the concept of family in Sierra Leone is inclusive. The large number of orphans created by the civil war has also added to the number of families raising children who are not biologically related. In Sierra Leone, mothers take the primary role in rearing children. Historically customary law gives parents "absolute and exclusive authority" over their children (Thompson, 1991); however, in the post-conflict era, there has been increasing recognition of the need to enact legislation that protects children.

With the passage of the Child Rights Act in 2007, Sierra Leonean children are no longer viewed merely as the property of their parents or guardians. The act bans exploitative labor, forced marriage of girls, and other harmful practices. The act also seeks to establish national and local government entities to enforce children's rights (Akinsulure-Smith & Smith, 2012; IRC, 2009). However, various NGOs (e.g., Defence for Children International, ChildFund, UNICEF Sierra Leone) and faith-based organizations (e.g., Don Bosco Fambul) have been at the forefront in working to ensure that the rights of children are maintained.

Finally, there is no legal provision regarding paternity/maternity leave. It is typically left to the discretion of various organizations or employment agencies to make some provision for nursing mothers within their internal management policies.

Family Policies Supporting Families at Risk

An important function of the family is family care. Family care refers to the ability of the family to care for members with varying degrees of disability and chronic illness, as well as for elderly members. In an effort to address disability issues and develop national policy and interventions for the disabled, on March 10, 2011, the government of Sierra Leone (GOSL) ratified the Disability Act. However, in Sierra Leone, the very limited number of services supporting these at-risk families are provided by local and international NGOs and local faith-based organizations (e.g., City of Rest). Because nursing homes are virtually nonexistent in Sierra Leone, the care of the elderly inevitably becomes the responsibility of younger family members (Kallon & Dundes, 2010; Spencer-Walters, 2008).

Family Policy Implementation and Assessment

While there are implicit activities in place and no clearly organized explicit family policies in place in Sierra Leone, there have been a number of efforts by the GOSL, local and international NGOs, and faith-based organizations to bridge these gaps (Akinsulure-Smith & Smith, 2012).

In recent years, the Ministry of Social Welfare, Gender and Children's Affairs (MSWGCA) has been working to ensure service provision to socially marginalized and disadvantaged groups, particularly children, women, the aged, and the physically disabled. To this end, MSWGCA has created five directorates: Gender Affairs Directorate, Children's Affairs Directorate, Social Welfare Directorate, Planning and Strategic Policy Directorate, and the Human Resource/Finance/Administration Directorate. In 2002, MSWGCA developed a partnership with the Sierra Leone Police to establish the Family Support Units Program (FSU). The FSUs are attached to police stations across Sierra Leone. Their mandate is (i) the investigation of all forms of child abuse, including sexual abuse and violence, physical abuse, exploitation, and internal and cross-border trafficking, and (ii) the investigation of allegations of sexual and domestic violence and commercial and other forms of exploitation against women and other vulnerable members of society, such as the aged and infirm (Akinsulure-Smith & Smith, 2012).

While in theory the FSU program could successfully provide needed services to these marginalized groups, the unfortunate reality is that progress has been severely hampered by weak police forces, deeply ingrained belief systems, and a lack of financial and institutional resources. Other barriers include poorly coordinated services that lack understanding of their roles and a judicial infrastructure whose hefty fees and limited reach outside the main cities render it inaccessible to most (Akinsulure-Smith & Smith, 2012; IRC, 2012). Additional problems that have been noted include "... poor infrastructure, low capacity, youth unemployment, high maternal and infant mortality, widespread rural impoverishment, impact of global economic downturns, and lapses in public financial management" (World Bank, Country Brief, 2012).

In Sierra Leone, as in many other countries, there are international, national, and local NGOs from a wide range of political, social, cultural, religious, and financial environments. NGOs and faith-based organizations continue to play an important role in the growth and development of Sierra Leonean civil society. Their diverse responsibilities include monitoring human rights violations, public education and information sharing, technical training and analysis, lobbying and advocacy, service and humanitarian relief, and litigation. Years of civil war and entrenched cultural patterns have delayed the development of comprehensive, explicit family policies in Sierra Leone; however, post-conflict, there has been a growing societal recognition of the importance of addressing the needs of the family unit. The push from various NGOs, including children's and women's rights advocates, has led to a deeper level of commitment by the GOSL to address these challenges.

For example, in 2006, WEC International/Rainbows of Hope of Sierra Leone, Evangelical Fellowship of Sierra Leone, and World Relief developed a "Parental Training Manual," a handbook for churches and communities to use in working with parents (van den Brink, 2006). The limited counseling services that do exist directly support women and children, e.g., faith-based organizations such as Echoes of Mercy, Graceland Counseling Services, Center for Victims of Torture, and Community Advocates and Psychosocial Services. Other programs such as Defence for Children International offer few supports to troubled youth and at risk children. NGOs created all of these services.

Although the increased involvement of NGOs brings new resources and energy to these ongoing struggles, it also brings new challenges. The sheer number of NGOs in operation can sometimes hinder their coordination; some NGOs may even end up working at cross-purposes. Working within an already fragmented legal framework, NGOs governed by international norms add another layer of complexity to the strata of statutory, traditional, and Islamic norms that already exist. Some people in the provinces and villages may even equate NGO activity with the imposition of "foreign norms" seen as even more intrusive than interventions by the federal government.

Most recently, NGOs and faith-based organizations have developed a range of research, programs, and activities aimed at understanding the needs of and supporting families. Many of these efforts are related to service provision for individual family members, with recognition of the dependency aspect of family relationships. For example, City of Rest, a local Christian rehabilitation center, received funding from Cordaid, a Catholic organization for development cooperation, to conduct a study entitled "The Scale and Impact of Substance Abuse Among School Children and Youth in Freetown/ Western Area, Sierra Leone in 2009." This study addressed the growing problem of substance abuse and mental health problems among children and youth in Sierra Leone. Based on the study's findings, City of Rest made key recommendations to the GOSL regarding legislation, policies, and service provision that directly and indirectly impact children and families (City of Rest, 2009). New policies based on these initiatives tend to focus on social welfare, health services, and the protection of children and women, thereby influencing family law.

Recent government policy initiatives have targeted a wide variety of family issues, including the promotion of family life, the protection of children's rights, marriage and relationship support, domestic violence prevention, and child abuse prevention. These efforts by GOSL, in concert with the initiatives undertaken by local and international NGOs and faith-based organizations, represent a significant overall shift toward the provision of family-related programs and services that support both individual members and the family as a whole.

Recommendations for Family Policy Development, Implementation, and Assessment for Policy Makers

Sierra Leone presents a unique opportunity for the world community to learn about the nuances of developing family policies against a backdrop of ethnic and cultural diversity, economic underdevelopment and mismanagement, and horrific human rights abuses and social dislocation. The challenges are immense. Considerations are many, including understanding how the emotional and physical traumas of the war affected families and family structure, how logistical limitations and budgetary constraints compromise the ability to put effective policies into practice, and what will happen in circumstances where the new provisions contradict or challenge customary law. Policy makers must give serious consideration to the development of both explicit and implicit family policies that are culturally syntonic, that provide realistic access to the services and protections created, and that are subject to quality control and oversight.

The following recommendations focus broadly on the ways in which we can address the issues surrounding family policy in post-conflict Sierra Leone. Extending across the domains of good governance, family practice, field research, and education and policy, these recommendations require further communication, transparency, and interdisciplinary collaboration between these domains as well as the different levels of intervention that are involved in the care of children and families.

Good Governance

In a very large sense, change must begin at the highest level of governmental structures. In many ways, the Sierra Leonean government can be lauded for developing some of the initiatives described earlier in this chapter. For example, the government put forth legislation protecting against domestic violence, whereas neighboring countries like Liberia and Cote d'Ivoire have not. However, the reality persists that after many years of government mismanagement and alienation, many Sierra Leoneans

cite lack of faith in governmental institutions as one of the catalysts for the catastrophic violence the country has experienced.

Initiatives like the Anti-Corruption Act of 2008 and the creation of the Anti-Corruption Commission are steps in the right direction. Dozens of officials, including those at the ministerial level, have been removed from office and criminal investigations are under way (U.S. Department of State, 2012). Nevertheless, questions about the government's ability to police itself effectively may lead to ongoing skepticism by the population. Critics such as Baker and May (2004) also point out that while the Special Court for Sierra Leone and the Truth and Reconciliation Commission were, in theory, positive initiatives, the fact that the perpetrators of most of the heinous crimes committed during the war ultimately went unpunished begs the question, "Can there be ongoing peace without justice?"

Marginalized Populations

Now so more than ever, there is a need for social services and programs to address the needs of poor families in a competent and systematic fashion (e.g., income support schemes, income maintenance programs, and food provision, as well as adequate health care and access to accurate health-related information). Fostering economic growth and opportunities for marginalized members of the population is one way of facilitating social engagement and true reconciliation. This is true for Sierra Leonean youth, underprivileged families, and the elderly. Currently there are no formal services for the elderly in Sierra Leone; thus, younger family members must care for elderly relatives (Kallon & Dundes, 2010). The importance of putting effective structures in place to support the economic empowerment of women should not be underestimated, especially as women have seen their economic roles expand out of necessity during the conflict period (Baker & May, 2004; IRC, 2012). These structures should include increased access to infant and maternal health resources as well as childcare provisions for women entering the workforce.

While there is a focus on youth, women, and the elderly, pains must be taken not to neglect the challenges facing Sierra Leonean men. Chronic unemployment and underemployment persist; men must be engaged and activated if any of the initiatives regarding domestic violence, substance abuse, and effective parenting are to be successful.

Implementation Strategies

One promising development for a cohesive implementation strategy is the increased centrality of the MSWGCA. This ministry is charged with overseeing the provision of services to a broad swath of socially marginalized and disadvantaged groups. The establishment of a single governmental entity whose jurisdiction is family well-being in its most global interpretation may result in better coordination of services for family health, social, educational, and legal issues. The concentration of family issues may help to bridge the gap between "macro" policy formations and "micro" service provision issues. Such a concentration may also potentially facilitate more effective referrals and information transfers among its directorates, service providers, advocates, and community members. It may also help policy makers to prioritize initiatives and better plan data collection and monitoring.

Ironically, a more centralized chain of communication and oversight may allow the central government to delegate more of the responsibilities for implementing laws to members of civil society, as

well as to provincial or local authorities. A functional decentralization of government may help people to engage more fully in governmental programs (especially those who live away from the Freetown area). It may also be a way to address some of the challenges between general law and local implementation, including community and family training and sensitization to issues.

Sierra Leone's police force does not possess adequate resources to protect vulnerable citizens in rural areas effectively. The elevated legal fees and the limited scope of power of the judicial system in the provinces also serve to make the pursuit of legal cases in instances of domestic abuse, especially daunting (IRC, 2012). Were these local functions to fall under the control of one central ministry, there would be increased communication and oversight. Hopefully such centralization will lead to more consistent application of laws already in existence. Bringing more governmental operations to the provinces, and engaging civil society in proactive and culturally syntonic ways, may help to make interventions more effective (Baker & May, 2004).

To this end, we also recommend prioritization of increased funding and coordination of governmental efforts to create and implement a coherent family policy. Presently, the MSWGCA receives just 1 % of Sierra Leone's government budget (IRC, 2012). We believe that a new commitment to family issues is not just an additional expense placed on the government ledger. We see it as an investment, as well as an act of prevention, since many of the same currents that fueled the rebel conflict still lurk under the surface (Baker & May, 2004).

Family practitioners will continue to play a major role in how Sierra Leonean families meet their multifaceted needs. The good news in this is that there are many different means by which to effect tangible progress. These services must address a broad range of needs, including basic daily living, education, and physical and mental health. They must effectively reach a diversity of family types within an equally diverse number of contexts. At the same time, these services must be accessible, affordable, and culturally appropriate.

Family practitioners are not only providers of direct services but also the best-placed professionals to advocate for effective structural and policy changes. Practitioners can use their theoretical expertise, as well as their hands-on experience, to advocate for governmental initiatives that assist and support families, as well as social and mental health supports at the education level. Practitioners can draw on the best practices from both Western and traditional contexts to create working structures that fit the challenges facing families in current day Sierra Leone.

Research Needs

There is also an ongoing need for research into population attitudes and the realities facing Sierra Leonean families. Research may enable service providers to hone their services and facilitate increased understanding so that (i) the interventions in place are reflective of the cultural realities and (ii) further adjustments in family policy are based on an accurate assessment of the situation and needs. For example, the work of Newnham, Akinsulure-Smith, Hansen, and Betancourt (2012) highlights the potential for positive outcomes for war-affected Sierra Leonean youth regarding their adjustment into post-conflict society. An evidence-based, group mental health intervention for war-affected youth developed through close cultural study and validation shows early signs of helping young Sierra Leoneans to adapt to the challenging circumstances they still face.

A closer examination of the ways in which culture moderates how members of a society understand and respond to trauma can lead to the creation of more effective mental health interventions. What constitutes reconciliation may differ between Western societies and those in Africa (Rasmussen, Smith, & Keller, 2007). As such, generic conceptualizations of mental health and trauma and healing may not be effective without careful consideration of cultural nuance and practice. The realities will

also differ among post-conflict African societies such as Burundi, South Africa, and Rwanda (Baker & May, 2004). As conceptions of how trauma is understood and expressed differ from culture to culture, so too will conceptions of trauma itself. More detailed, local research on the emotional reactions and needs of family members in the challenging post-conflict context is warranted.

Outstanding Needs

There is a critical shortage of practitioners to provide effective services for Sierra Leonean families. Significant "brain drain" during the war and its aftermath severely compromised many of the structures of civil society. There are needs for teachers, medical staff, and other professionals trained in family relations, parenting issues, premarital and marital counseling, and the provision of concrete social support (Health Matters, 2009; IRC, 2009). The development of a cadre of trained professionals to assess, promote, and enforce the family policies is of the utmost importance if these policies are to take root.

There is obviously a great need to promote the training of Sierra Leonean mental health professionals with a background in family systems work, trauma counseling, substance abuse, and development work. Steps are being taken to address this need. The University of Sierra Leone's College of Medicine and Allied Health Sciences has instituted a program for psychiatric nurses. Efforts are being made to create accreditation for the community level counselors who were trained in counseling and crisis intervention in the context of the war. Training these paraprofessionals, as well as others in civil society, to provide psycho-education about emotional stress and to recognize those who may be in need of more in-depth intervention, would be an important step forward in terms of Sierra Leone's significant mental health challenges.

To develop this new generation of service providers, we recommend a combination of top-down and bottom-up approaches. In terms of the top-down approach, the appropriate ministries should work in conjunction with the institutions of higher education in Sierra Leone to develop specialized degree, diploma, and certificate programs in the identified areas of need. The work of making connections with outside universities for support in these endeavors has already begun. Innovative practices such as distance learning and virtual classrooms may help to reduce the costs for academic exchanges and ongoing consultations. There seems to be an enthusiastic willingness on the part of Sierra Leone's institutions of higher learning to undertake this important task. The University of Sierra Leone and the University of Makeni have both expressed interest in developing academic programs in counseling psychology. Appropriate and sustainable partnerships are being explored with local and international NGOs to facilitate this development.

Concurrent with the development of this new cadre of professionals and academics, a bottom-up or grassroots approach should be employed. There is a growing body of literature that speaks of "task shifting" as a way not only to bypass the extreme shortage of trained mental health professionals but also to tailor more effective and culturally nuanced interventions. Vikram Patel (2008) states that the role of the mental health professional should be focused on "Designing mental health care programs that can be delivered by non-specialists; building their health system's capacity for delivering care, particularly by supporting front-line health workers; raising awareness of mental disorders and patients' rights; and essential research." This is particularly crucial in a country that has had one practicing psychiatrist for the better part of two decades and where the number of doctoral level Sierra Leonean mental health professionals can be counted on one hand (including one of the authors of this chapter).

It is important to reach out to members of civil society, including community, religious, and cultural leaders. With regard to the new policies and services, sensitizing and training for community members should focus on service providers at the community level, i.e., teachers, midwives, pastors,

nurses, imams, police officers, lawyers, and counselors. One of the objectives of these trainings should be to engage these providers in the dissemination of pertinent information and provision of services informed by the new policies. Such an approach would also afford the opportunity to obtain feedback from these community stakeholders as to whether these new provisions are culturally viable or appropriate for their populations. Finally, this approach would help to delineate areas of overlap and balance between existing cultural beliefs and the developing sense of a general Sierra Leonean cultural identity (Akinsulure-Smith & Smith, 2012).

As previously stated, emphasis must be placed on an ongoing, systematic, and collaborative process that will enable practitioners and researchers to communicate and share findings within and among disciplines. Healers, educators, governing officials, and providers of legal and social services must be linked in a holistic, integrative approach that enhances the effectiveness and relevance of interventions. We can gain a great deal of insight from each discipline, as well as from traditional and academic approaches to service provision. The daunting news is that the learning curve is so steep; however, the good news is that there is much room for creativity and innovation. A small step forward in a particular domain must be communicated to enhance the effective of interventions in other domains.

Ultimately, the success of an increasingly centralized approach hinges largely on successful communication and adaptability. An example of this is the challenge of enhancing the coordination between the government and the numerous international NGOs and advocates that operate within the country (IRC, 2012). An overreliance on NGOs will only serve to disempower the government and inhibit the development of viable, sustainable structures to drive initiatives forward. This is particularly pertinent in terms of informing women of their rights and empowering them to act on those rights. This task has largely fallen to women's groups and international human rights organizations, as these groups have the outreach resources that the government lacks. This is another example of an area where increased centralization can lead to effective delegation of duties that would fall under a single, consistent structure to ensure oversight and consistency.

Communication and clarity also must be enhanced in terms of Sierra Leone's complex legal structures. This is especially true in rural areas, where customary law still has a tight hold on the majority of Sierra Leoneans. Clear guidance as to how the customary law, Islamic law, and statutory law interface must be established to determine jurisdiction and expectations in many family-related legal matters. Again, an increased presence of formalized governmental structures in the provincial and local areas will help to bridge the existing gaps between general legal mandates and local practices.

The crisis intervention model no longer seems to fit the scenario in Sierra Leone. The country has moved past the days of the demobilization, disarmament, and reintegration phase and is now in a phase that is much more concerned with sustainable development (U.S. Department of State, 2012). Questions about the viability of the educational structures and resources, the possibilities for young girls and other marginalized youth to pursue their studies and a career, and the feeling of being protected under the law are more pressing concerns than the mere fact that the country has experienced violence in the recent past (Baker & May, 2004). Development efforts must be long range and sustainable, with a focus on accountability. The fact that the war is over does not lessen the needs of Sierra Leoneans. This is not the time to look away from Sierra Leone. The united voices of the academic, governmental, civil society, and NGO domains can help to make this argument in a more cogent and effective manner.

Conclusions

Developing family policies in Sierra Leone is challenging on many levels. Sierra Leone's complex ethnic, cultural, and religious diversity, coupled with its economic underdevelopment, makes the country's recovery from a devastating conflict all the more difficult. An ongoing "multi-logue" with community leaders and stakeholders is needed to develop and practice family policy that incorporates

all of the cultural nuances that constitute the complex makeup of Sierra Leone. Increased coordination by the Ministry of Social Welfare, Gender and Children's Affairs will allow for more consistency, even as there is more decentralization in the application and implementation of family law. It is hoped that centralized communication structures and information will be adapted to local norms through stakeholders within civil society to facilitate the spread and acceptance of information at the local level.

Clearly, family policy is not a single concept, but rather comprises a variety of concepts that can be defined in numerous ways. The components of family policy include laws, regulations, programs, and benefits, each of which supports both individuals and the family unit as a whole. In a country recovering from a devastating period of warfare, approaches to family policy must address social and economic changes, as well as the trauma endured by the family unit, within that particular cultural context. In Sierra Leone, the government must work together with international and local grassroots organizations. These efforts will impact not only the status of women and children but also the standing of the elderly and infirm and will strengthen families as a whole.

While the list of significant changes to be effected is long, the situation is not wholly disheartening. Just as the challenges are multifaceted, so too are the ways in which one can intervene. Initiatives, big and small, are currently taking root. There is a growing sense that people view the post-conflict era as an opportunity to "get things right" and to build effective, sustainable legal, and social institutions. The lessons we can glean from this living, vibrant laboratory for family policies may help to inform us how to proceed in other post-conflict societies around the world.

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Chapter 3 Public Policy and Families in Kenya

Dorothy O. Rombo, Stephan M. Wilson, and Lauren M. Oseland

Abstract The purpose of this chapter is to (1) describe Kenyan families in context, (2) identify several public policies most related to family creation and functions such as child rearing, and (3) evaluate the implementation of policies both for intended and unintended consequences. This was achieved by reviewing legal documents, demographic surveys, national and international conference proceedings, as well as scholarly literature and presentations. Despite the diversity that exists regarding family structure, lifestyle, and outcomes, in modern times, a national constitution has always existed in Kenya. The three iterations of the national constitution have had implications for family creation and child rearing as examples of explicit family policies, as well as a range of social policies aimed at addressing issues such as poverty, gender discrimination, public health, education, and HIV/AIDS. However, the conceptualization, formulation, and implementation of policies often have not taken into account their impact on families. Subsequently the policies display a disconnection between family members as a unit but seek to uphold individual rights. Also, there are several child protection policies but far fewer for women. This is counterproductive since when mothers are unprotected, so too are their children. Policies are formulated within the complexity of competing goals from local to international interests and a backdrop of limited resources and inadequate understanding of family diversity. These circumstances often lead to policies that are strong on rhetoric but do not deliver the intended outcomes or that produce unintended consequences. Despite these realities, it is imperative that Kenya formulates a national family model that reflects a balance of fairness to all family members. Such a model could be used to evaluate the effectiveness of policy that has consequences for families and used to determine intended and unintended impact on families.

Keywords Kenya • Families • Explicit family policy • Social policy • Marriage • Child rearing • Caregiving • Diversity

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D.O. Rombo et al.

There is great diversity of customs surrounding family formation and structure across distinct ethnolinguistic groups in Kenya (Leeder, 2004). Because there are more than 40 contemporary ethnic groups as well as minority groups of nonindigenous immigrants from Europe, Asia, the Middle East, and the rest of the world, there are often differences in how families operate (Ngige, Ondigi, & Wilson, 2008; Republic of Kenya [Kenya], 2002a – I; Wilson, Ngige, & Trollinger, 2003). The diverse ethnic communities were introduced to central governance by British colonists who deliberately avoided codifying customary laws. However, the colonial government used some of the customary laws in courts as a way of introducing Kenyans to a national central authority (Shadle, 1999). At independence in 1963, Kenya created the first constitution that heavily borrowed from the British Common Law. In 2010, after a couple of iterations on the original constitution, Kenya passed a new constitution which includes a Bill of Rights and other sections relevant to family creation, child rearing, caregiving, and economic support. The purpose of this chapter is to (1) describe Kenyan families in context, (2) identify some public policy most related to family creation and functions such as child rearing, and (3) evaluate the implementation of policies both for intended and unintended consequences.

Contemporary Kenyan Families

The majority of contemporary Kenyan families are undergoing a social-cultural transformation from a relatively rigid and basically collectivistic family system to more flexible and individualistic family systems. This has resulted in divergent family patterns both emergent and extending across generations with variations related to ethnicity, rural—urban residence, religious affiliation, age and generation, education and social-economic status, and legislation or formal systems ranging from traditional customary law to secular codified law.

Creating Families

Marriage, birth, and adoption are the fundamental means of family creation. Family forms and structures vary by culture, and there are often both contemporary and traditional families within the same groups. Families are characterized by extended patterns with an average of four children per woman (Population Reference Bureau, 2011) and relatives across several generations who live in close proximity. Patriarchal kinship is dominant with the eldest male as head of the extended household. Ikenye (1996) argues that within these systems, the primary purpose of marriage is to preserve and perpetuate kinship and mutuality.

The extended family serves as an informal welfare system that extends support to members. This is advantageous since currently there is no well-developed government welfare system. Among extended families are stem and composite families. The former are either female or male headed households with relatives by birth or marriage. Composite extended families, particularly in Western Kenya, consist of at least two nuclear families where a man inherits his deceased brother's household (Kilbride & Kilbride, 1997).

The nuclear family, composed of a monogamous couple and their children, is the emerging dominant family form (58 %), while one parent and his or her children are also common (another 26 %) (Kenya, 2003). The nuclear family is common among contemporary, educated, and young Kenyans as well as among Hindu, European, and American immigrants and is more typical than the extended family. The classical polygynous extended family consisting of one man, multiple wives, and children (16 %) is commonly found among indigenous older Kenyans particularly in rural areas (Kenya National Bureau of Statistics (KNBS) and ICF Macro (2010).

Mate Selection. Kenyans practice various kinds of mate selection. In traditional communities, mate selection was predominantly a parental activity. Parents arranged their children's marriages based on similar socioeconomic status, personal character, and family background rather than mutual attraction and love (Wilson et al., 2003). Customarily (e.g., Kikuyu), a daughter was given in marriage as compensation for a debt (Ngige et al., 2008), as a substitute for a barren wife (e.g., Luo) (Ngige et al., 2008), or to reduce the stigma of an aged unmarried daughter (e.g., Kisii). There is evidence that non-enrollment in school, emotional attraction, and independence from parental support were predictors for young people making personal choices on mate selection (Clark, Kabiru, & Mathur, 2010). Despite the divergent trends in mate selection across communities, it is widely held that the purpose of marriage is to bear children. Failure to have children is a stressor to the family so much so that cultures hold that polygyny is justifiable when a wife does not give birth (Nwoye, 2007).

Parental mate selection is still common among the Maasai, as demonstrated in child betrothal practices (Ngige et al., 2008; Sharman, 1979). Early marriage for girls is often arranged by parents. It is estimated that 25 % of Kenyan adolescent girls marry before 18 and 5 % marry during early adolescence (Erulkar & Ayuka, 2007). This example demonstrates clashes of customary with statutory law where the minimum age to marry is 18 and free consent is required (The Kenya Constitution, 2010). Research shows that early marriages for girls increase chances for HIV infection (Clark, 2004), higher fertility, and poor maternal and child health (Zabin & Kiragu, 1998). When girls marry young, they are less likely to have sufficient education to give them the skills or other resources, including money, to support their children. There is a correlation between girls' education and nutritional (health) status of their children (Kabubo-Mariara, Ndenge, & Mwabu, 2009).

Marriage. Marriage in East Africa is a mixture of the ancient and modern and, like all cultures, continues to change. Educated and westernized youth believe that romantic love is necessary for a companionable marriage regardless of the level of parent influences (Wilson et al., 2003). However, under customary practices, marriage was a major transition for two families, and it was important, therefore, to not leave selection to young adult children (Wilson & Ngige, 2005).

Although missionaries and colonial rulers introduced various "religious" and "legal" ways of transitioning from singlehood to marriage based on Western traditions, each ethnic community also had their own traditions for marking the occurrence of marriage (Rombo, 2009). Traditional cultural practices as well as the colonial/missionary practices all continue to play a part in marriage today. Nontraditional marriages include civil (legal) and religious marriages. Traditional marriages involve ethno-cultural processes, such as marriage negotiation visits which included the groom's family payment of bridewealth to the bride's family. Traditional marriages take many forms, including monogamy (one husband, one wife), polygyny (one husband, more than one wife), and gynaegamy (woman to woman not lesbians). According to Schafer (1997), traditional marriages were practiced with a lot of flexibility in partner choice and all marriages were treated equal.

In practice, the line between traditional and nontraditional marriage is blurred. The introduction and recognition of central governments and religious groups have influenced the social meaning, rituals, expectations, and relational aspects of marriages in Kenya, making them more diverse in both structure/formation and in subsequent relationships (Rombo, 2009). It is common to find couples who go through traditional marriage rituals, including payment of a bridewealth, and then hold either a church wedding or a civil ceremony at the office of the Registrar of Marriage, where they get a certificate. Such marriages, it could be argued, have elements that are both traditional and nontraditional.

Section 45 (1) of the 2010 Constitution states that the government recognizes and protects the family and that marriage is between two people of the opposite sex who have given their free consent to marry. However, the constitution requires the parliament to enact laws that recognize marriages that are concluded under traditional, religious system, or civil law. Other requirements include being 18 years old, residency in the area, and non-consanguine relations between the two. While marital stability might not be easily regulated by law and/or policy, longevity of marriages is somewhat regulated by the customary and statutory laws of divorce and other situational circumstances.

D.O. Rombo et al.

Cohabitation. The latest shift in creating adult unions is the more visible increase in cohabiting unions or trial marriages. Often referred to as "come-we-stay unions," these begin with cohabitation, where couples live together in a relationship lacking both traditional and nontraditional legal commitment. Some cohabiters progress to marriage through a civil, religious, or traditional ceremony. In an attempt to be inclusive of such complex structures, policy makers tend to embrace both traditional and nontraditional forms of marriages. When children are involved, the latitude is made broader taking into account the child's best interest in court rulings.

Historically, in most communities, people who cohabited without marriage were believed to have violated cultural norms (Ngige et al., 2008). An increasing number of young people are opting to live together without formalizing their marriage (Bocquier & Khasakhala, 2009). Cohabitation is also widely practiced among adults working in urban centers who are not living with their spouses (Kenya, 1999).

Divorce. Marriage dissolution has been frowned on and discouraged under the statutory law and by traditional communities, especially if children were involved. This provides an example where the two laws are in agreement. Communities had grounds for divorce (e.g., if a woman committed adultery, practiced sorcery or witchcraft or if she threatened her husband's life). These were considered to be unforgivable crimes against the marriage (Wilson & Ngige, 2005). A wife could separate from her husband if abused by him or in-laws.

Marital dissolution was discouraged as it was costly and had negative consequences for the larger family. A man could lose legitimacy rights over his children, and the bridewealth that he and his family provided to her family was not recoverable at marital dissolution in some cultures. A woman could lose all properties acquired during the marriage, and custody of children could be awarded to her husband. Even if she retained custody, divorced wives usually end up raising children single-handedly, living single lives thereafter, or settling for a life as a subsequent wife in a polygynous marriage (Sankan, 1995). The harsh consequences of divorce on women are exacerbated by the gender discrimination that exists prior to marriage.

According to the statutory law, divorce can be granted for failing to consummate a marriage, desertion for at least 3 years prior to the petition, violence, adultery, and being of incurable, unsound mind (The Marriage Act Cap 150, Laws of Kenya). Divorce, therefore, is not easily granted by the courts, for example, a landmark case of an HIV-infected mother of two and her husband who sought divorce for fear that she was a risk to the family was denied by the Kenya high court (Sunday Times of South Africa, 2000). Today, divorce, distribution of property, and child custody are determined by the courts. However, the matrimonial and divorce laws have continued to perpetuate unequal control of property and unequal sharing of the same after divorce for wives (Theano, 2009).

Policies Related to Families Raising Children

Children are valued for their intrinsic as well as extrinsic (instrumental) benefits. Among the most complex yet valued functions of the family are childbearing and child rearing. Other important functions include socializing of children for the norms and values of their society, division of labor and economic cooperation for the good of the family, and regulation of sexual behavior in and outside of marriage (Leeder, 2004). Children, particularly in rural areas, are commonly regarded as economic assets. A woman with more sons gains supremacy over others and is highly respected in her community (Ngige et al., 2008).

Parents have the primary responsibility for nurturing their children. However, in an extended family system, there is also a communal responsibility for socializing children; all adults are responsible for the upbringing of children in their community regardless of biological ties. Discipline is a collective responsibility, where each senior person guides, counsels, and punishes any child when justified.

These understandings of how the community is responsible for nurture and discipline are still intact in some communities though practices are changing as urbanization, distance from extended family, and alternative models of parenting compete with traditions.

Despite the expectations that all children will be provided the necessary care and protection by family, some are not. In such cases, the state is expected to provide care and protection. The Children and Young Person's Act of 1964 gave the state powers to remove children from biological parents or guardians if the children were abused and/or neglected (Law of Kenya, Chap. 141). The theme of protecting children's rights has echoed in every law since this initial Act (i.e., Bill of Rights of the 2010 Constitution; Children's Act, 2001; The Basic Education Act, 2012). Kenya Cash Transfer for Orphans and Vulnerable Children Program which began in 2004 (The Kenya Sexual Offences Act, 2006) Convention on the Right of the Child, (UNICEF, 2013).

Despite the establishment of child care and protection of rights acts by the parliament, the reality of raising children presents many challenges and hardships. For example, a UNESCO report of 2007 shows the challenges of child care and early childhood development. Since 80 % of women in Kenya are employed and child care is seen as largely women's responsibility, children of low-income mothers have poor child care alternatives. Plantation workers leave their toddlers with siblings or older children who may be supervised by an older child who oversees all the child minders. The same report includes a plan by the Ministry of Education to streamline early childhood education. Currently, early childhood education is driven by parents' initiative, and the services are provided by diverse groups with variations in quality and subsequent outcomes for children. The responsible of providing care for children under 2 years old is left to the parents. Specifically, the low-income parents who work in private sectors often have poor child care arrangements as they do not benefit from the 60 days of maternity leave like the government, and other skilled professionals. Neither do they have the means to access quality child care.

Although education is compulsory between ages 6 and 14, free universal primary education only began in 2003. Enrollment in primary school is more than 80 %, but completion of primary school is only a little over 40 %. Enrollment in secondary school is just over 20 %, while the completion rate is much higher at over 75 % (Ouma, Osano, & Mullumba, 2002). Children who enroll in high school are able to meet the costs hence have a higher completion rate. The Basic Education Act 2012 by Kilonzo criminalizes non-enrollment in school.

The girls' reentry program is an initiative that allows girls to continue with education after giving birth (Elimu Yetu Coalition, 2005). It does not include guidelines for schools, and the program is supported by nongovernmental organizations. The school principals and boards use their own discretion to determine the process of school reentry (Mulama, 2006). Very few girls benefit from this policy because parents are either unaware or unwilling to take advantage of it and due to lack of any guidelines for school principals and boards to follow during implementation and no penalties for denying reentry.

Families and Vulnerable Members

As in any society, there are unique as well as more common stressors for families. A few of the issues that create stress for many families in Kenya (e.g., fertility, abortion, dependent elders, and sexual violence) are discussed.

Fertility. Fertility is closely monitored in developing countries because lower birth rates are related to the potential to reduce poverty, hunger, as well as maternal and child deaths (Cleland et al., 2006). Demographers study population trends to inform public policy. The average household size decreased from 5.0 persons in 1989 to 4.4 persons in 1998. In 2001, urban households were, on average, smaller with 3.3 persons compared to rural households with 4.6 persons (Kenya, 2001a). Several factors

D.O. Rombo et al.

contributed to this shift, such as the increasing age at first marriage and increased use of modern contraceptives (United Nations Development Programme [UNDP], 2004).

One effort to control high fertility in Kenya is through family planning. According to Fendall and Gill (1970), family planning was the first national policy introduced to curb the rapid population growth that was realized during the colonial era. Kenya was the first country in sub-Saharan Africa to establish a family planning policy. Family planning is not mandated, but the program encourages having smaller families through planned and spaced-out pregnancies. Despite the existence of family planning services, the country registered a total fertility rate (TFR) of 8.2 children per woman in the 1970s (Bongaarts, 2006). While this rate was reduced to a TFR of 4.4 in the 1990s (Population Reference Bureau, 2011), it is still considered high because resources to provide for the children are inadequate (Cleland et al., 2006) and the negative health consequences of multiple pregnancies on women have been reported (Raikes, 1989).

Abortion. Section 26 (1 and 2) of the Kenya 2010 Constitution declares abortion illegal and that life begins at conception. However, the parliament created a law to broaden the latitude within which abortion is legal besides mothers' health risks based on the opinion of a trained health professional. Despite the change from restrictive abortion laws, the Guttmacher Institute (2012) reports that it is unclear whether this interpretation of the law is clear and is actually being implemented. This could be because sections of the penal code have not been revised to reflect the new abortion laws. Medical practitioners may be reluctant to perform abortions for fear of legal consequences. Providing "unlawful" abortions is a felony punishable by 7–14 years imprisonment. Other factors that hinder the success of this law include stigmatization of abortion and ignorance that make women seek services from unqualified abortion service providers. The outcomes include health complications, infertility, or death.

Elders. Kenya is faced with an increase in the number and a growing proportion of the population who are elderly. Further, the effects of industrialization and urbanization on the care of the aged complicate the face of aging. The elderly are among the poor (i.e., with other risk groups such as pastoralists, physically challenged, female-headed households, and casual laborers) (Waithaka, Anyona, & Koori, 2003). It is typical for people age 50 and older to have little or no education, and this contributes to high levels of poverty, challenging their ability to care for themselves. However, older people who depend on their adult children are advantaged in that they have better health than those who are left to care for themselves (Ethangatta, 1995).

In a complementary manner, it is the duty of adult children to care for their aging parents. The responsibility of taking care of one's parents is rarely evaded because of natural ties of affection and also the potential sanctions (e.g., a possible curse on the children) should they fail in their obligations. In recent times, the economic well-being of the elderly has begun to deteriorate due to de-emphasis of extended family networks and the tradition of mutual obligation across generations (Wilson & Ngige, 2005). In addition, HIV epidemic has led to an increase in the number of deaths among the middle generation, obligating the elderly to take care of their grandchildren whose parent have died due to AIDS (Rombo-Odero & Njue, 2005). The Kenyan parliament has failed so far to pass laws that provide financial support to the elderly. This is important for the elders but also because beyond their own needs, many elders are grandparents providing care for their AIDS orphaned grandchildren.

Sexual Violence. Sexual exploitation and abuse has always existed especially since most communities practiced double standards where boys were allowed sexual liberties but girls were punished for becoming pregnant before marriage (Njue et al., 2010). International tourism and cultural history of Kenya also support sexual exploitation. Kenya attracts sex tourism, and some ethnic groups that include early marriages do not see the practice as sexually exploitative (Njue et al.). Technology has also expanded the avenues for connections for commercial sex. The existence of HIV and AIDS has made it necessary to rethink the punishment of sexual offences. Since the disease has no cure and is largely sexually transmitted, it became necessary to put laws into place that were intended to reduce the occurrence of sexual exploitation especially those that could result in HIV infection. The Kenya

Sexual Offences Act (2006) was put in place to protect vulnerable members of the society such as persons living with physical and mental disabilities, as well as children and women, from sexual exploitation.

The Act criminalizes a wide range of sexual offenses such as rape, incest, sexual trafficking, and sexual exploitation. Specifically, the Act punishes deliberate transmission of HIV or any other life-threatening infection with 15-year imprisonment. The greatest challenge to addressing the issue of sexual exploitation is that implementation of policy has been a challenge for Kenya (Yambi, 2011).

The Role and Influence of Gender

Families largely hold expectations based on generation and gender. Therefore, it would be wise to give careful attention and some sensitivity to these expectations when policy is being formulated or implemented. Gender, a set of characteristics, roles, and behavior patterns, distinguishes women from men socially and culturally. Gender is social and culture specific and defines the ways in which women and men interact. The concept refers not only to the roles and characteristics of women and men but also to the power relations between them. Gender disparities exist in almost all spheres of life. In a comparative evaluation of gender, roles, resources, and responsibilities between Ghana and Kenya, disparities were seen from family formation to all stages of subsequent life (Gage-Brandon, Njogu, & Naguib, 1994). Men had a choice to be in a monogamous or polygamous marriage, while women's choices were affected by bridewealth payments, age at marriage, educational attainment, and acceptance of wife beating. Of the population working for pay in 1999, 71 % were males and 29 % were females; 58 % of women compared with 42 % of men were economically inactive (Kenya, 2002k). Wage employment is still dominated by men both in urban and rural areas. Though there have been efforts to improve gender equality, women still occupy a disadvantaged position socially, economically, and politically inside and outside their families (Kenya).

As family policy is being created, it is important to reflect on how families are constrained by the choices they make for sons versus daughters. School enrollment is comparable up to about age 14. From age 15 upward, the female dropout rate is higher than the male dropout rate (Kenya, 2002h). When income is limited and school fees are high, many families give preference to sons over daughters in school attendance. About 70 % of illiterate persons in Kenya are female (Kenya). Girls drop out of school in search of employment to supplement family income or to assist in caregiving for younger siblings, elderly, and ailing family members. In other cases, girls are expected to marry at an early age for their families to acquire bridewealth (Wilson & Ngige, 2005; Wilson et al., 2003).

Commonly, gender-based division of labor is seen. Thus, some family functions impact men or women more, and policy which does not reflect this is likely to have unintended consequences. Women's workload includes the home, earning an income, and participating in community work. Men normally do outdoor work including clearing places for farming, plowing, fencing, cutting trees, or running businesses. Women are engaged in household chores as well as taking care of children and aging parents. Some have noted that this division of labor has reduced the self-esteem of women, as many perceive themselves as little more than unpaid servants in the extended family (Ngige, 1995; Ondigi, 2003). Along with their role as homemakers, they are the primary managers and users of a variety of natural resources, especially energy and water. They are responsible for most of Kenya's food crop production and a variety of other farming activities, yet their contribution to national development is underappreciated.

Paradoxically, despite the moral thinking that women deserve respect as human beings, violence against women is a serious and more common problem than many in contemporary Kenya would like to believe. The clash of traditional culture with contemporary declarations about equality, protection, and respect continues to exist in a labyrinth of policy silence as well as tolerance for some kinds of

gender-based distinctions. Traditional culture permitted a husband to "discipline" his wife by physical means, which could translate to spouse abuse and assault in the face of the secular law. Traditionally, a wife could not own property or transact any property-related business on her husband's behalf without his consent. Women continue to face both legal and social discrimination in family laws including some aspects of marriage, divorce, child custody, inheritance, and succession. Women experience a range of discriminatory practices, limiting their political, socioeconomic, and cultural rights that relegate women to second-class citizenship. In 1997, a Kenyan constitutional amendment introduced specific prohibition of discrimination based on gender. However, the amendment did not implement international conventions on women's rights as human rights (Ngige, Mburugu, & Nyamu, 2004).

Families and Stress

HIV/AIDS Epidemic

According to the Kenya National Bureau of Statistics and ICF Macro (2010), the prevalence of HIV among the populace ages 15 through 49 has remained above the 5 % threshold used to define an epidemic as set by World Health Organization. Using prenatal clinics, demographic health surveys, and Kenya AIDS Survey Indicator, trends in prevalence have been estimated from 10 % in 1990 to 7 % in 2009. The disease is most common among those of reproductive age and who are sexually active. It has resulted in over one million orphans, a large number of children who are born with HIV; and an increase in the number of elderly providing care for their orphaned grandchildren (Rombo & Njue, 2012). The persistence of this high prevalence shows that a policy framework is still needed to curb the spread of infection.

The impacts of HIV infection are economic, social, and psychological and have been reported in both quantitative and qualitative research. Barnett and Whiteside (2003) have detailed the timing and degree of impact caused by HIV infection from individuals, families, communities, and the nation. HIV/AIDS infection has far-reaching effects that even the most intensive and extensive evaluation designs cannot capture its totality. The impact of HIV and AIDS on families transcends generations. Families bear the greatest and most immediate burden of HIV (Rombo & Njue, 2012). HIV diagnoses lead to decreases in family resources, due to health expenses, lost work hours, and subsequent inability of individuals to play their role in the family system.

HIV compromises many of the gains made in health, education, and other government programs. Similarly, it has reversed economic and social gains that families have made. The Kenya HIV and AIDS Prevention and Control Act of 2006 was directed toward secondary and tertiary prevention of HIV transmission through promotion of public awareness about the causes, modes of transmission, consequences, and means of prevention and to extend the full protection of human rights and civil liberties to every individual with HIV and AIDS (Rombo & Njue, 2012).

Poverty

Over half the population lives below the absolute poverty line (i.e., lives on less than 2 US dollars per day) lacking access to opportunities, services, information, health, education, productive assets, and markets for their goods and/or labor. The number who lives below the poverty level increased substantially in the 1990s and into the twenty-first century. It is still on the rise due to inflation, shortfalls in agricultural production, and constant climatic issues such as droughts and floods (Kenya, 2000).

There is diversity in poverty levels by gender, education, marital status, age of household head, and household size, and some consideration needs to be given to each of these to meet the wider policy needs of a diverse population. The prevalence and intensity of poverty among women is higher in urban (63 %) than in rural (54 %) areas. On the other hand, rural males (53 %) are poorer than their urban (46 %) counterparts. Similarly, lack of education reduces people's ability to find gainful employment and is associated with increased poverty. Household heads with no education have the highest incidence of poverty in both rural (64 %) and urban (66 %) areas. The lowest poverty levels are among people with tertiary education comprising 7 % and 14 % in rural and urban areas, respectively. Even beyond education in relation to poverty, there are important urban-rural considerations for policy development and implementation. In both rural and urban areas, large households have higher rates of poverty (i.e., below the absolute poverty level) than do smaller households. The dependency ratio in Kenya is very high; for every 100 people in the labor force, there are 92 dependents (generally children and elderly family members).

The Government of Kenya has a threefold strategy for poverty reduction. First is redistribution of resources to empower poor households to produce and earn more. This will allow them to fend for themselves, rather than being dependent on others to provide basic life needs. A second strategy is increasing accessibility of resources such as basic health services; safe, clean water; nutrition; education; and extension services to poor households to raise their present and future productive capacities. Third are strategies to stop the intergenerational transmission of poverty to expand productive capacities to ensure self-reliance for poor households (Kenya, 2000).

Role of the Government

Implementing the 2010 Constitution

The 2010 Constitution has a strong Bill of Rights; it offers special protections to children, individuals with disabilities, youth, women, and older members of the society. The two earlier constitutions explicitly recognized and protected customary traditions, unless they were deemed outdated. The 2010 Constitution does this and also recognizes differences rather than inferiority of other legal and cultural traditions. The 2010 Constitution supports customary laws so long as the tradition or culture is consistent with the constitution (Cuskelly, 2010). According to The International Development Law Organization (2010), this has resulted in legal pluralism that makes it difficult to apply the law to the fullest.

In some cases, implementation might be the greatest challenge. Lumumba (2011) at launch of a constitution for civic educators' workshop commented that the controversies about the implementation casts doubt on whether the new constitution would bring meaningful change to ordinary Kenyans. The speaker further observed that when individuals and communities lack fundamentals like food, safe drinking water, and energy resources that sustain daily living, implementing the constitution becomes secondary. In other words, it might be said that having a well-written constitution does not translate to quality living.

Evaluation of Implementation of Policies

Given Kenya's history of being loyal to various economic/international/privileged classes at the expense of others, government corruption, and sometimes divisions by ethnic groups, a parliament with only 9.8 % women representatives, conceptualization, formulation, and implementation of leg-

D.O. Rombo et al.

islation is sometimes a delicate and arduous task. Globalization further exacerbates contemporary family patterns, as well as in colonial and postcolonial secular laws that regulate marriage and family life, alongside Kenyan customary laws. Therefore, policy making and implementation designed to address issues with complex origins may be compromised. When legislators have limited knowledge about the target population or have divided loyalties, they are likely to lead to or to have negative or unintended consequences. This is because issues turn out to be far more complex than anticipated. An example is the HIV and AIDS Prevention Act that was misconstrued to be biased against men, yet research shows that women were more likely to be infected over men in unions that had one spouse infected and the other not infected with HIV.

Crichton (2008) argued that there are often three factors that interact to determine the success or failure of a policy. These are contextual, perceptual, and the degree of controversy or inclusion of all stakeholders. First are the contextual factors such as political, bureaucratic, national, and international influences. The history of activities often follows a succession of events such as a country report to respond to an international convention. This may be followed by ratification of the declaration of the convention. With interest groups pushing for changes, policy makers work on a policy to address the issues. The context of Kenyan policy making so often takes reactionary and passive steps; it often bows to influence from the international community when some may question such wisdom. For example, almost a decade after ratifying the UNCRC in 1990, the parliament passed the Children's Act in 2001. Several other child protection laws have been passed since. Likewise, after the initial documentation of the HIV epidemic (1984), the HIV/AIDS Prevention and Control Act and Sexual Offences Act were not enacted until 2006, and the former is still on hold awaiting the Minister's approval. Second, policy circumstances are shaped by the policy makers' perception of the issue. When policy makers perceive a situation as a crisis, they are likely to enact different policy than when there is time to consider longer-term issues. Gender relations also play a part in policy making. The male-dominated parliament has consistently voted down national policies that have been prepared in line with the international conventions (e.g., African Charter on Human and Peoples Rights and Additional Protocol 1997, Covenant on All Forms of Discrimination against Women 1979, Covenant on Civil and Political Rights 1966, International Covenant on Economic, Social and Cultural Rights 1976). Many of these are more sensitive to gender issues than are reflected in Kenyan legislation or implementation. Despite the ratification, laws that govern marital relationships, including domestic violence, and how to handle matrimonial property are still lacking. The Marriage Bill, Family Protection Bill, and Matrimonial Property Bill all failed to pass in 2007. It is hoped that the influence of global/international human rights will lead to changes in the laws and implementation for policy related to equality in marriages (Baraza, 2009).

Family policies are often controversial when they place expectations on family members as spouses, children, and guardians, ignore gender bias, involve sex, and are inconsistent with customary laws. Such characteristics influence the development of the law into policy and who supports it, as well as who will and how the law is implemented. Family policies have often continued earlier policies or situations that disadvantage some members over others in areas such as privacy and have contributed to oppression of women, children, and the elderly. Such policies prevent protection of families in the larger sense. An example was the Basic Education Act of 2012, which banned holiday tuition for children. This policy was easier to implement in the schools and to punish teachers who violated the policy. On the other hand, a section of the same bill criminalized non-enrollment of children in school with a Kenyan 100,000 shillings of fine or imprisonment of parents is much harder to implement. This criminalized parent's behavior and given that lack of money was the primary reason for noncompliance – this bill confronted families with two bad alternatives. The law has been criticized for being far reaching and unfair to parents who are always assumed to be able to invest in their children's education. Policies intended to promote development, such as those targeting the girl child, receive mixed reaction from the population. The school reentry initiative which allows a pregnant teen to return to school 1 year after having the baby is not well known to students and parents. The policy also lacks guidelines that school principals could follow.

Third are the characteristics of the policies that may be controversial or that do not include engagement of civil society. Policies that generate interests from diverse groups might lead to more negotiations and be more informed and inclusive. For example, sensitive policies such as those related to sex create a great deal of interest and are usually strongly debated.

With the advent of HIV and since the transmission of the virus is through sex, policy makers have made attempts to formulate policies related to sexual behavior. Churches have been the most civically engaged group in this matter. In 1996, the influence of church and politics scuttled a Sex Education Bill that was proposed for high school. Both the HIV/AIDS Prevention and Control Act and the Sexual Offences Act of 2006 were very strongly debated before they were passed into law needing to be implemented. The former has not been implemented, and the latter is in operation. Whether it will bring results is still to be determined since sexual offences happen in the privacy of home, motels, and communities. Responses from authorities often are slow, and traditions and social stigma also discourage victims from using policies that may actually be in place. Corruption also compromises full implementation of the Bill of Rights.

Conclusion

Even before gaining self-governance from British colonial rulers, Kenya had created explicit family policies aimed at influencing functions (e.g., child rearing, caregiving, economic support, family creation and dissolution, socialization). In the most recent constitution, policies are embedded in the Bill of Rights. Both colonial rulers and other international influences have continued to shape policy formulation from that time to the present. Even within the broader set of policy concerns (i.e., beyond family policies), it would appear that there is less attention to family policy compared to other areas (e.g., economic or environmental policies, creation of new political divisions or election law) as evidenced by just counting which areas see policy attention (e.g., legislation, policies, regulations).

There has been an increase in recognition of gender to evaluate the potential impact of policy by women's rights groups such as Forum for African Women Educationist, Kenya Chapter, and the African Women Lawyers Association also abbreviated FIDA. Likewise, several interest groups champion rights and protections for children (e.g., African Network for the Prevention and Protection against Child Abuse and Neglect). As a broad observation, interest groups for families are lacking. Hence, policy makers rarely consider impact that policies may have on families. For example, since the beginning of the millennium, the parliament has passed several bills aimed at protecting children's rights, while those pertaining to women's equality in marriage and policies related to divorce are conspicuously absent from national debate and legislation. While there is little doubt that the number of vulnerable children has increased, child well-being is associated with mothers' ability to provide material and nurturing qualities to the lives of their children. Passing legislation to protect and support children while denying women equal rights is like handing something of value to a blindfolded person - the precious thing being given may miss its intended recipient or fail to benefit the person because they cannot perceive well enough to receive it. Additionally, marriages in Kenya are fluid as they have the potential to become polygynous at any time (Nii-Amoo Dodoo, 1998). This creates a problem for policy making. As a result, children's right for care and protection by parents (i.e., regardless of marital status) is included in the law, but it is far less clear for adults who are cohabiting. In the event of a cohabitation relationship breakdown, women suffer more in property distribution and maintenance (Kamau, 2009). The author advocates for laws that take into account the reality and changing norms of diverse family creation such as cohabitation. This will become increasingly more critical if and as the rate and numbers of nonmarital unions increase.

Just as there are family policies which have direct impact on families, so too are there other "nonfamily" social, educational, health, environmental, and economic policies that have indirect

D.O. Rombo et al.

impact on families. Although social problems affect the general population, families most often bear the brunt when members fall victim. For example, HIV has negatively impacted emotional, health, social, economic, and other areas necessary for children to have secure and meaningful lives that hold promise for their adulthood. Policies have been enacted on HIV/AIDS, poverty, and alcohol abuse. Most of these policies target institutions and/or individuals, but not families, to prevent and reduce occurrence through education, intervention programs, and punishment.

Section 6 of the HIV and AIDS Prevention Act of 2006 specifically influences marriage (family creation). This piece of legislation requires health-care providers to encourage their HIV patients to share their status with their spouses and significant others. When this is not done, the law mandates doctors to disclose and protects physicians against patient-doctor confidentiality law suits. It also criminalizes intentionally infecting a partner with HIV. From a family perspective, both disclosure and demands for appropriate behavior between sexual partners (especially in marriage) are fundamental for protecting all family members. Though disclosure about a stigmatized disease such as HIV may not be easy for the short-term situation of a relationship, the resulting violation of equal protection, the rights of each individual involved, and the intention to protect the larger (family) social unit provide for the good of the group. It is held that disclosure is beneficial (Farquhar et al., 2004) for the greatest number of family members. Women in strong relationships are more likely to voluntarily disclose than are women whose relationships are weak (World Health Organization, 2004). Thus, many feel that legislation that recognizes interdependency among family members should have been supported (Rombo & Njue, 2012). However, this law was strongly opposed by the human rights activists because it seemed to coerce men more than women to disclose; it did pass though it has continued to be resisted. It has not been implemented to date.

Corruption has hindered the success of some of these policies as bribes are paid to avoid following the law (e.g., Partanen, 1993). Many policies have indirect, incomplete, and unintended consequences that turn out to be de facto family policies. Kenya would benefit greatly from establishing a more systematic scan and review process to consider family impacts from the several sorts of public policies (and regulations and actual laws let alone to provide guidance to various sectors including the private sector). Consideration should be given to developing family impact reviews for any laws, policies, and regulations.

Both explicit and implicit family policies have been enacted over time in a backdrop of privilege, unequal power, incomplete understanding of more and less vulnerable populations (or perhaps even without regard to these if they are understood), and sometimes ethically questionable motives. This reality creates disconnection between the law and how people lead their lives. Creation of a national agenda for families would be of benefit to any country; in Kenya, the complexities, lack of clarity about goals and the ways that government can and cannot promote healthy families, and the competitions for resources, time, and attention with other important and compelling needs for policy make such an imperative call for family policy. At times, individuals are discouraged about the law and policies committed to family concerns due to lack of responsiveness by legislators. This results from failure to articulate the implementation.

This chapter provided a review of family policy and a few social and other policies that exacerbate or actually cause stress to families. Policy should include a mechanism both to anticipate likely consequences as well as to review unintended and unwanted consequences. Family policy is, of course, not only about current challenges to family members but about future generation's ability to more effectively or less successfully deal with the same and additional challenges. Policy about the future should account for policy implementation to evaluate the policies that have been passed and subsequently making them even more effective.

This chapter has focused on government policies only. There are other players including nongovernmental organizations, nonprofit organizations, private businesses, philanthropies, etc., whose work focuses, directly or indirectly, on children and families in Kenya. These have not been part of the scope of this chapter.

Measurements of well-being such as rates of mortality, unemployment, life expectancy, HIV prevalence, health and nutrition status, poverty rates, and rural-urban migration all provide important indicators not only of the current status of Kenyan families but also of the effects of policy on the situation of families and individuals. According to UNICEF (2011), life expectancy was 57, and 20 % of the population lived on less than one (US) dollar per day.

Children and many adults are food and nutrition insecure and are in current poor health which makes their future health and productivity vulnerable to many more challenges. The mortality rate for under-five mortality is 85/1,000; 35 % of children have stunted growth. There are also great disparities between regions and ethnic communities/regions (i.e., most Kenyans are from specific regions which are the ancestral homes of different ethnic groups). Some regions such as the semiarid lands of North and North Eastern Provinces experience severe food shortages that lead to severe malnutrition and the cascade of problems related to this circumstance especially among children. Less than half of all children get routine vaccinations.

Some of the vulnerabilities of children and other family members are due to the macro issues (e.g., environmental degradation, poor infrastructure for public health, transportation, education, potable water, safe food supply, poverty, rural-urban migration, and insecurity). For example, environmental degradation leads to scarcity of resources that families need such as firewood, water, and food. Families, especially women, commonly are compelled to spend enormous time searching for these commodities. However, the macro issues are not the only hindrances as less attention is focused on family relations but a range of other opportunity costs (e.g., time, money, other kinds of investments that cannot be spent on businesses, further education, and caretaking).

The connection between application of family policies and family well-being is missing. Research that seeks to answer questions such as the level of awareness about family policy, the kind of families that have benefited, and an evaluation of intended and unintended consequences should be encouraged. Critical thinking about family policy should also be devoted to scanning, forecasting, and anticipating the impact both of policies in general and the consequences of lack of policies. While these issues might appear more pressing than family, it is imperative that the role of family in creating and solving the problems be taken into account. A baseline of understanding prevalence, diversity, and challenges for all types of families and well-being for members as well as studies that track impact that policy has on families would be useful for policy makers.

Modelling a family policy framework that suits the Kenyan family's needs and that takes into account diversity to sustain useful and harmless cultural practice is necessary. The current reality of respecting customary and statutory laws is admirable but strong on rhetoric for individual benefit. The real utility of law on policy is described by action which includes both protection and development. The current reality has failed to meet the goal of improving quality of life at a national scale. Lofty goals such as education for all may be taken as a panacea, yet completing elementary school is a challenge to the families of many poor children. School completion itself may miss the point of if/how education can be improved to meet personal, future family, even national needs. Aside from school completion is the observation of the disproportionate completion rates based on gender. In other ways, gender also is important; gender-based violence occurs regardless of a woman's education (Abuya et al., 2012). Family consideration is crucial to mediating the smallest social unit to the largest national indicators of well-being. A system of family policy should be created to advance well-being of individuals, communities, geopolitical areas, and even national goals for current and future outcomes.

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D.O. Rombo et al.

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Chapter 4 Child- and Family-Focused Policy in Botswana

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Abstract Botswana is a nation in transition, evolving into one of the wealthiest nations in Africa largely as a result of expansion of diamond and copper mining. Despite this growth, the nation also faces a number of serious threats to child and family well-being. The greatest of these is the HIV/AIDS epidemic that has ravished the nation for the past three decades. The nation also exhibits high rates of poverty, lack of access to essential services, and high maternal mortality rates, especially in rural areas. Policy approaches to child and family issues reflect both the considerable threats that the nation faces and the growth in resources and social supports that have accompanied economic growth. This chapter describes examples of macro-level policy approaches to addressing issues impacting child and family well-being and discusses further policy needs in relation to critical national issues impacting children and families.

Keywords Botswana • Family policy • Botswana Children's Act • Millennium Development Goals • Botswana Vision 2016

Botswana is a landlocked nation located in southern Africa, bordered by the nations of South Africa, Namibia, and Zimbabwe. The country occupies an area approximately the size of the state of Texas. There is archaeological evidence that the geographic area that comprises Botswana has been occupied by tribes of hunter-gatherers since as early as 17,000 BC. These tribes eventually evolved into agrarian societies that developed relatively stable communities. The country now known as Botswana became a peripheral protectorate of the British Empire known as Bechuanaland in 1885. Its original and current names derive from its dominant ethnic group, the Tswana or Batswana.

The Republic of Botswana gained its independence from Britain in 1966. Since that time, Botswana has maintained a very stable, democratic government. The years since independence have been characterized by considerable economic growth, especially associated with an expansion of diamond mining over the past 40 years. This growth has contributed to an expansion of social, health, and educational systems of support for children and families.

Botswana is one of the least densely populated nations in the world with a population estimated as being slightly over two million people. Nearly 50 % of the population lives within 100 km of the capital city of Gaborone (Jefferis & Kepaletswe, 2012). Because much of the nation's social, health, and education infrastructure lies in cities, the rural population often lives far from established infrastructure.

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48 R. Leite

While Botswana was one of the poorest countries in the world at the time of its independence, its economic condition has improved dramatically, largely as a result of growing diamond and coppernickel mining. As a result, the nation now stands among the wealthiest in Africa. Despite that wealth, however, poverty and unemployment rates in Botswana remain high. Thus, while the financial resources generated through mining have been directed to the enhancement of various social and educational services, many in Botswana continue to struggle to achieve rudimentary levels of material well-being.

Botswana's relatively considerable economic resources have contributed to high levels of social provision. Over recent decades, substantial improvements have been made to the public education system, the health-care system, roadways, water systems, and other aspects of infrastructure. As a result, literacy rates, education completion rates, access to health care, and life expectancy all climbed through the 1990s. A more recent decline in life expectancy rates is due primarily to the spread of HIV/AIDS (Jefferis & Kepaletswe, 2012).

As described in the 2003 Household Income and Expenditure Survey (HIES) (Botswana Central Statistics Office, 2003), income inequality remains a defining feature of the Botswana population. A national poverty rate of 30.6 % in 2003 reflects a rural poverty rate of 45 % compared with an urban poverty rate of 11 %. Additionally, 32 % of children live in poverty with that figure increasing to nearly 40 % among children under age 5. Not surprisingly, poverty is also much higher among the less educated with 52 % of children living in a household with a head of household who never attended school. This compares to a rate of 21 % for children with heads of household who have attended school.

Along with heightened poverty, rural areas also reflect a comparative lack of access to educational, health, and social supports. Indeed, Botswana remains one of the most unequal countries in the world. As reported in the HIES, children in Botswana experience high rates of various deprivations. The most severe of these is access to adequate sanitation with nearly 30 % of all children lacking access to any toilet facilities. This figure rises to 50 % among rural children. Over 23 % of the children in the survey population had no access to any communication medium including television, radio, newspapers, or computers. Nearly 13 % of all children live in houses with more than five people per room, and 10 % of all children never attend school. Of greatest concern are the slightly over 25 % of all children who suffer from more than one of the above deprivations.

As reported in the United States Central Intelligence Agency World Factbook (2012), children under the age of 15 make up 33.4 % of the total population in Botswana. The family remains a core social institution in Botswana and is generally viewed as holding primary responsibility for the well-being of children. Botswana family structure has evolved from a predominantly two-parent to a predominantly single-parent, female-headed model in the years since independence (Dintwat, 2010). Dintwat's analysis suggests this is due to four primary factors: (1) rising divorce rates, (2) increased mortality associated with HIV/AIDS, (3) migration away from family for occupational opportunities, and (4) children born outside of marriage. In these respects, Botswanan societal patterns are evolving in similar ways to those of many industrialized nations.

The nation faces a number of severe health concerns that impact child and family well-being. The infant mortality rate stands at 11.14 deaths per 1,000 live births, high among developing nations. In 2008, the maternal mortality rate stood at 190 deaths per 100,000 live births. While HIV/AIDS rates have stabilized somewhat, 24.8 % of all adults in Botswana were infected in 2009. Pediatric HIV/AIDS rates spiked in the late 1990s and early 2000s prior to the implementation of the National Strategic Framework for HIV/AIDS that includes strategies to expand antiretroviral treatments and prevent maternal-to-child transmission of the disease. Despite the effectiveness of these programs, both adult and pediatric HIV/AIDS rates remain high. High adult HIV/AIDS rates also result in large numbers of children who are orphaned as a result of the disease. In 2007, nearly 90,000 Botswana youth were orphaned as a result of AIDS-related parental deaths (Botswana National AIDS Coordinating Agency, 2008).

Even with high government investment in health-care programs, some indicators of child health and well-being continue to decline. In 2007, the mortality rate for children under age 5 had increased to 76 per 1,000 live births from 54 per 1,000 live births in 1994. Further, 26 % of children under age 5 had experienced stunted growth as a result of undernutrition (United Nations Children's Fund, 2012).

Beyond the ongoing high incidence of HIV/AIDS, other health concerns impact child and family well-being in Botswana. Maternal and newborn mortality rates remain high, and child malnutrition remains a significant concern. There is also considerable variation in access to health-care services and systems, especially in rural areas of the country (World Health Organization [WHO], 2009).

Examples of National Policy Initiatives

Child and family policy has expanded substantially through the period of dramatic social and economic growth Botswana has experienced over the past three decades. Policy reflects both a traditional view of the centrality of families and the evolving view of children as a national resource. While there are many examples of targeted policy approaches to issues of child and family well-being, the following reflect three broad, national policy initiatives aimed at enhancing the status of children and families in Botswana.

Millennium Development Goals

In 2000, Botswana was one of 189 nations that adopted the United Nations' Millennium Declaration. As a signatory to this declaration, Botswana committed to address the eight Millennium Development Goals that comprise the declaration:

- 1. Eradicate extreme poverty and hunger
- 2. Achieve universal education
- 3. Promote gender equality and empower women
- 4. Reduce child mortality
- 5. Improve maternal health
- 6. Combat HIV/AIDS, malaria, and other diseases
- 7. Ensure environmental sustainability
- 8. Develop a global partnership for development (new technologies)

At least six of these goals directly impact policy and program approaches to various dimensions of family life in Botswana. The commitment to these goals has informed policy and practice associated with various child and family issues. Data reported by the United Nations Development Program (United Nations, 2010) suggests the nation is making progress on several of these goals while lagging behind on others.

Goal 1: Eradicate extreme poverty and hunger. While Botswana made some progress in reducing the prevalence of underweight children under age 5, there has not been meaningful improvement in extreme poverty as reflected in the percent of the total population living in deep poverty. In response to this lack of overall progress, Botswana has developed a number of more focused strategies in recent years. These include a Remote Area Development Programme targeting antipoverty strategies to those living in rural areas where poverty rates are three times of those found in cities. The nation's Destitution Programme provides a welfare floor at a level above the national poverty line, bringing welfare supports to a broader range of the at-risk population. The Old Age Pension program provides

50 R. Leite

a fixed-income grant for all individuals over age 65. The Orphan Programme provides a higher welfare qualification threshold for orphaned children, a growing segment of the population associated with high adult mortality rates due to HIV/AIDS.

Goal 2: Achieve universal primary education. The overall enrollment rate in primary education has not climbed above the 88 % threshold that existed in 1990, and, in fact, it had dropped to 86.9 % in 2007. The rate of completion of primary school had increased from a rate of 76 % of all pupils who started primary school in 1990 to a rate of 86.9 % in 2006. Educational attainment is challenged both by the lack of participation in preschool education and heightened rates of teenage pregnancy that results in increased dropout rates (Botswana Central Statistics Office, 2006).

Over the past decade, the national government has strengthened its ability to regulate education through both the Education Act and the Revised National Policy on Education. These pieces of legislation specify both the regulatory powers of the national government over education and various strategies to increase overall educational quality and attainment. These include attention to areas such as teacher training, acceptable teacher–student ratios, school facilities and equipment, minimum requirements for teaching, and accreditation standards for postsecondary teacher preparation programs.

Goals 3: Promote gender equality and empower women. Botswana has achieved gender parity in the education sector with males and females participating in primary, secondary, and tertiary education at the same rates. Women's participation in employment has also grown. On the other hand, there has been little improvement in patterns of violence against women. Reported and estimated incidences of rape have remained relatively stable over the years since the adoption of the Millennium Development Goals as have reported cases of spousal battering. Such cases are often not reported with many families protecting male relatives who physically abuse women. Additionally, the nation maintains no central repository of information on violence against women or those who perpetrate it (Botswana Ministry of Finance and Development Planning, 2010).

In response, Botswana developed the National Action Plan to End Gender Violence in 2007. The Action Plan identifies a range of legal, social service, educational, economic, political, and cultural interventions aimed at reducing gender violence. Only marginal policy gains have resulted from this plan, however. One such gain is the Domestic Violence Act, which was passed in 2008. This act criminalizes various forms of violence against women and also specifies mechanisms for the receipt of restraining orders in such cases. The government also abolished the Marital Power Act, a step that brings parity in family economic authority to husbands and wives.

Goal 4: Reduce child mortality. The focus of this goal is on reducing the national child mortality rate by two-thirds, but little progress has been made in this direction. From 1990 to 2007, both the infant mortality rate and the under-5 mortality rate rose substantially (Botswana Central Statistics Office, 2007). Infant mortality increased from 48 to 57 deaths per 1,000 births, while the under-5 mortality rate rose from 57 to 76 deaths per 1,000 births. Both increases are primarily attributable to the spread of HIV/AIDS among child populations

There is some hope for improvement, however. Botswana's Prevention of Mother to Child HIV/AIDS transmission program has significantly reduced the number of children born with HIV as nearly 90 % of HIV-positive pregnant women receive antiretroviral therapy. There has also been significant improvement in the number of 1-year-old children who are fully immunized, with over 90 % now being so (Botswana Central Statistics Office, 2007). The government has also developed a national plan of action for nutrition and a program for the integrated management of childhood illnesses. Finally, Botswana continues to invest significant resources toward improving its primary health-care system. This includes attention to enhancing primary care in rural and underserved areas of the nation.

Goal 5: Improve maternal health. Maternal health is strongly associated with family well-being. This is a significant issue in Botswana in light of the high maternal mortality rate that exists there. In 2010,

there were 163 maternal deaths per 100,000 live births. This compares to a peak rate of 310 maternal deaths in 2000. This is a slight increase over the rate of 158 deaths per 100,000 live births reported in 2005 (Botswana Central Statistics Office, 2011). The slight increase in maternal deaths since 2006 suggests this remains a critical health and family well-being factor. This increase also suggests Botswana will fail to achieve the threshold established in the Millennium Development Goal, especially among those who live in poverty and/or who lack access to quality health care.

The primary factor in the ongoing high maternal mortality rate is the incidence of HIV/AIDS among pregnant women. While a segment of maternal deaths are directly attributable to AIDS, the disease also leads to heightened risk of death due to secondary factors such as anemia, tuberculosis, and malaria. A lack of access to health-care providers also contributes to the high maternal mortality rate with only 0.4 physicians and 2.65 nurses and midwives per 1,000 population being available (Botswana Central Statistics Office, 2011).

Because of the high rate of maternal mortality and its dramatic impact on children and families, Botswana has a long history of devoting policy attention to this issue. In 1992, the nation implemented the Safe Motherhood Program. This program includes enhanced screenings for a variety of prenatal risk factors, enhanced treatment of conditions associated with maternal mortality risks, provision of supplemental nutrition and vitamins to pregnant women, provision of contraceptives and family planning services, prepregnancy and post-pregnancy counseling support, and postpartum checkups. Additionally, all new mothers now receive an in-home visit from a health worker within the first week of discharge from a hospital following the birth of a child. Botswana also continues to focus on enhanced preparation of primary care providers, nurses, and nurse midwives through expanded educational programs and the development of a new hospital and medical school in the capital city of Gaborone.

Goal 6: Combat HIV and AIDS, malaria, and other diseases. As is the case in other sub-Saharan nations, Botswana has experienced one of the highest HIV/AIDS rates in the world. For more than 20 years, the spread of HIV and AIDS has represented a defining national crisis impacting all aspects of family well-being. Indeed, the prevalence of the disease offset improvements in other non-health measures of welfare such as per capita income, educational attainment, household income, and access to basic services. The United Nations Development Program's Human Development Index (HDI) is a commonly used measure of human well-being based on a calculation of per capita income, literacy, and life expectancy. Declines in life expectancy in Botswana tied to the spread of HIV and AIDS have left the nation with an HDI score that declined from 1990 through 2005 and that only now has approached the level achieved before that period (United Nations Development Program, 2012).

The prevalence of AIDS in Botswana was estimated at 17.6 % in 2008 with overall prevalence and the onset of new cases of HIV being substantially higher for women than men (Botswana Central Statistics Office, 2008). The estimated rate suggests a generally stabilizing pattern and provides hope that the disease may eventually be largely controlled. This is due to intense national interventions aimed at reducing both transmission of HIV and reducing the likelihood of death as a result of the disease. These include the development and implementation of a National HIV and AIDS Control Strategy through the National AIDS Coordinating Agency (NACA), an entity created in 2000 that reports directly to the President of Botswana. Specific strategies include routine HIV testing throughout the nation, an intensive program aimed at encouraging male circumcision, a sexually transmitted infection control program, and an aggressive antiretroviral therapy program.

Botswana also provides considerable support for children and families impacted by HIV. NACA has developed a Community Home-Based Care Program (CHBC) in response to the large number of terminally ill individuals who could not be accommodated in health-care facilities. Through this program family caregivers receive a range of support services and educational information. NACA also coordinates a range of services focused on orphans and vulnerable children. These include an orphan care program focusing on school attendance, nutrition, and emotional support.

52 R. Leite

Vision 2016

In 1996, the Botswana government undertook development of "Vision 2016," a national manifesto for the people of Botswana as the nation sought to respond to challenges and opportunities that existed for it 30 years after gaining independence. The Vision 2016 plan represented the guiding framework for efforts to enhance individual and collective well-being in the nation until being complemented by the Children's Act of 2009. Vision 2016 remains an active initiative today. The plan included seven pillars of national performance, several of which include components addressing aspects of child and family well-being (Botswana National Vision Council, 2011). The first of these seven pillars is a call for an educated, informed nation. This pillar focuses on improving various educational outcomes among children through enhancement of educational quality, increasing the priority given to early childhood education, and expanding information technology literacy. The second pillar focuses on standing as a prosperous, productive, innovative nation. The one aspect of this pillar that impacts family well-being is a call to achieve gender balance in the workforce.

The third pillar calls for standing as a compassionate, just, and caring nation. The focus here is on greater equality of income distribution, a dramatic reduction in poverty rates, and broadened access to a range of social safety net resources. Health concerns are also included here with a call for universal access to high-quality health-care resources, adequate nutrition for all citizens, expansion of traditional and spiritual healing systems, and ending the spread of HIV.

The fourth pillar, a call for a safe and secure nation, is built on a reduction of violent crime, enhanced road safety, provision of reliable national defense, and improved disaster preparedness. To the degree that family functioning is impacted by crime and disasters, efforts in this area represent approaches to enhancing family life in Botswana.

Botswana Children's Act

As Botswana continued its progress guided by the Vision 2016 document, Parliament passed the Children's Act of 2009; defining legislation focused on promoting the well-being of children and families, providing for protection and care of children when such are not provided by parents, acknowledging the primary responsibility of parents and families to care for and protect children, acknowledging the role of communities in promoting child well-being, protecting children from exploitive labor practices, and assuring appropriate participation of children in decision-making concerning their well-being. While the Vision 2016 plan articulated a set of aspirations for the nation, the Children's Act codified various aspects of child safety and security into law. At its core, the Act builds on four general principles that reflect the evolving view of children in the nation. These include embracing the best interests of the child; a commitment to nondiscrimination; the right to life, survival, and development; and respect for the views of the child (African Child Policy Forum, 2010). The Children's Act reflects an evolving view of children in Botswana and a growing acknowledgement of children as rights-holders.

This view is reflected in the inclusion of a Bill of Child Rights in the Act that provides children with various inherent rights that underlie the provisions of the Act. Among the 17 specific rights that are included are the right to life, a name, nationality, health, shelter, clothing, and education. The list of rights also includes two relating to parent–child relationships: the right to know and be cared for by parents and the right to appropriate parental guidance. Children are also afforded the right to freedom of expression, religion, and association as well as protections against unfair labor practices, sexual abuse/exploitation, and involvement in armed conflict.

Recognizing gaps in the social support network for children and families in need, the Children's Act defines a range of government supports to be made available to parents. These includes defined

obligations for social workers, public health workers, and other service providers to provide advice and advocacy for the needs of children in communities and to be accountable to their communities for the discharge of their duties. The Act also mandates the formation of three national support structures. The first of these is the Children's Consultative Forum so as to provide a means for children aged 10–17 to engage with national issues and decisions that impact them. The forum reflects the strong commitment in the Children's Act to empower children to have active voices in policy discussions around issues of child well-being.

Along with the Children's Consultative Forum, the Children's Act mandates the formation of a National Children's Council, an organization charged with coordinating, monitoring, and supporting activities of the various government ministries that relate to children. The council includes representation from all relevant government ministries and holds authority to guide interventions across ministries while also advocating for a child-centered approach to legislation, policies, and programs.

The third national support structure mandated by the Children's Act is a system of children's courts. These courts hold authority to adjudicate a range of child-focused legal proceedings including child protective orders, foster care, adoption, cases of abuse or neglect, juvenile delinquency cases, and child abduction. Magistrates of children's courts are defined as Commissioners of Child Welfare with authority to order social workers to investigate reports of child abuse or neglect and act on the reports of social workers in such cases. The Act further specifies physical settings for these courts that represent the least intimidating circumstances for a child.

Beyond these government structures, the Children's Act provides an extensive description of children in need of protection and steps to be taken in providing appropriate protection to those children. These include children who have been abandoned or neglected, children who have been abused or exploited, orphaned children, children with parents who are unable to provide care, children whose parents are imprisoned, disabled children who experience discrimination, children who are heads of household, unruly children who cannot be managed by a parent or guardian, children living in circumstances that expose them to prostitution, children who are displaced by war or involved in armed conflict, and children in any situation assessed as likely to adversely affect their well-being. The Act further specifies a mandatory reporting obligation for all citizens who suspect such circumstances and a process to be followed in investigating such reports and/or enacting a protective order or protective services for the child.

The Children's Act also provides guidance and mandates regarding child welfare institutions, schools, and homes that serve children under protective custody. In this respect, the Children's Act represents a significant advance in providing standardization across the nation in terms of approaches taken to addressing child welfare.

The Children's Act specifies the central role of biological parents in the care of a child and grants children the right to know and be cared for by both parents or receive appropriate alternative care when it is in the child's best interest. The Act also describes conditions under which extended family members may be defined as assuming the parental role and provides guidance regarding foster care, adoption, and care of orphans. In this respect, it reinforces the central role of family in Botswana society while also acknowledging the evolving nature of the modern family.

Family Policy Implementation and Assessment

Botswana has implemented a wide range of policies over the past three decades addressing various aspects of child and family life. While the Children's Act, the range of policies developed in response to the Millennium Development Goals, and policy approaches to HIV/AIDS and its resultant outcomes represent key advances, it should be noted that many children in families in Botswana continue to experience deep disparities in terms of access to social supports and in well-being outcomes.

54 R. Leite

Government officials generally acknowledge that there is a need to strengthen implementation of all aspects of the Children's Act and to develop new approaches to speed progress in achieving the various Millennium Development Goals. There is evidence that disabled children, poor children, and children in remote areas of the nation do not receive the level of protection and support received by others.

One issue that contributes to this difficulty is the ongoing presence of a dual legal system in Botswana. This dual system includes common law as reflected in legislation and government policy and customary law as defined in indigenous tribal structures that exist in the country. According to the Botswana government, customary law reflects customs, culture, and the way of life of particular tribes including such practices as domination of women by men and inheritance principles that favor male children. Botswana's Constitution specifies that these customary laws be recognized while not formally incorporated into the common laws of the country. Especially in more remote areas, these customary laws drive approaches to child and family policy issues, and customary law remains the core of personal law, and approximately 80 % of court cases are guided by tenets of customary law (Cailleba & Kumar, 2010). In fact, Botswana's High Court has upheld the authority of customary law courts over cases of traditional marriage.

The practical impact of the continuing embrace of customary laws on Botswana families is its reinforcement of patriarchal definitions of family structure and functioning. In such definitions, women and children often lack power. Women also have fewer choices regarding family arrangements. Further, in cases of child abuse and neglect, it is not uncommon for customary laws to reinforce the authority of fathers over children.

With over 45 years of policymaking having occurred since Botswana was granted independence in 1966, the government has devoted attention to exploring the results of approaches it has undertaken. This includes expanded data collection efforts and monitoring of various child and family outcomes. Various government offices and ministries hold responsibility for data collection related to child and family issues and outcomes.

Extensive data is collected through the Botswana Central Office of Statistics (CSO), the government entity charged with collecting and disseminating data on economic, social, agricultural, and environmental sectors of Botswana society. The CSO also conducts the decennial national census and a number of household surveys reporting data associated with child and family life. Various household surveys have been collected through several data points, allowing for longitudinal assessments of progress associated with a number of key well-being variables. Examples include the Botswana Family Health Survey, the Botswana Literacy Survey, the Botswana AIDS Impact Survey, and the Botswana Demographic Survey. These data are accessible through the CSO website (www.cso.gov.bw). These data are not only used extensively by various government agencies in assessing outcomes associated with various policies but are also utilized by the United Nations, the World Health Organization, and other multinational agencies in exploring national and cross-national statuses associated with various issues of interest.

Both the Ministry of Local Government and the Ministry of Health also conduct research associated with child and family policies. The Ministry of Local Government (www.gov.bw/en/Ministries-Authorities/Ministries/Ministry-of-Local-Government-MLG1) collects and reports data associated with Botswana's policy and programs addressing orphans and vulnerable children, a group of considerable interest in light of the number of children orphaned or otherwise impacted by HIV/AIDS, poverty, and other factors.

Data, analysis, and reporting related to various health issues and interventions are collected through the Department of Health Policy, Development, Monitoring and Evaluation (http://www.gov.bw/en/Ministries--Authorities/Ministries/MinistryofHealth-MOH/Departments-of-MOH1/MOA-Departments/) in the Ministry of Health. This department, established in 2010, conducts, analyzes, and develops national monitoring and evaluation systems and provides information management

system supports for health-focused agencies and organizations in Botswana. Because the department is relatively new, data and evaluation efforts are still growing. Data is also not always readily available to the general public or those outside the Ministry of Health.

The United Nations Children's Fund recently undertook a comprehensive analysis of the situation for children and families in Botswana (United Nations Children's Fund, 2011). This analysis suggested a number of ongoing deficits in Botswana's approach to child and family well-being. Key findings include the following:

- 1. While the basic rights of a child to survival, development, participation, and protection are recognized in the Children's Act, there is a need to more fully operationalize the Act.
- HIV and AIDS remain a significant threat to child survival despite recent decreases in mortality rates associated with the disease.
- There has been no meaningful improvement in child nutrition and educational participation rates have not appreciably improved.
- 4. Children remain exposed to violence, sexual abuse, neglect, poverty, and child labor at high rates. While the legislative environment on child protection has improved somewhat, the child protection system is still in need of strengthening.
- 5. Despite the formation of the Children's Consultative Forum, children remain largely voiceless in Botswana society.
- 6. Households with young children (age 4 and under) experience very elevated poverty rates compared to other households.

In light of these findings, the UNICEF report makes three key recommendations regarding policy approaches to enhancing child and family well-being in Botswana. The first of these is a call for a substantial upgrade in child data, evidence-based research, and advocacy around the Millennium Development Goals and the Vision 2016 plan. This includes more systematic and up-to-date data on all children aged birth to 18 and the families in which they live. This recommendation recognizes that, while Botswana has made progress in collecting data in support of policy making, many gaps in this effort still remain.

A second recommendation includes a call for "3D service delivery," a focus on providing a comprehensive range of services that assure access for all and consistent quality. This includes increased coordination and harmonization of child and family policies and programs. It is suggested that the National Children's Council is positioned to take a lead role in this enhancement. Related to this coordination is a need for capacity building for organizations that deliver services to children and families and an increase in child protection practices and programs.

Finally, the UNICEF report calls for substantial increases in public education about child and family welfare issues, increased education and advocacy on the rights of children, and increased participation of children, especially the most vulnerable. It is suggested that the Children's Consultative Forum should be strengthened and more fully empowered to enhance such participation.

An assessment of family policy in Botswana must also consider the issue of work and family balance in light of the growth in single-parent households and the large number of medically fragile and orphaned children largely as a result of the HIV/AIDS epidemic. In many Botswana families, the demands of family caregiving are often magnified by the degree to which they contribute to family poverty as a result of limiting the ability of a caregiver to work outside the home. Research suggests that over one-third of working adults in Botswana are caring for orphaned children and 82 % of those caregiving adults are living on household incomes of less than 10 US dollars per day (Heymann, Earle, Rajaraman, Miller, & Bogen, 2007).

Various pieces of legislation address issues salient to family caregiving and work-family balance. These include the Employment Act of 2003, the Workers Compensation Act of 1998, the Trade Unions and Employers' Organizations Act of 2003, and the Trade Disputes Act of 2003. The

56 R. Leite

Employment Act, in particular, specifies various thresholds around which worker rights are defined. The Act provides for up to 12 weeks of maternity leave at no less than 25 % of an employee's base pay, a minimum of 15 days of paid leave per year, a minimum of 14 days of paid sick leave per year, a work week that may not exceed 48 h with a maximum of 14 h of overtime in a week, and a requirement that overtime pay be calculated at 1.5–2 times regular pay.

While these mandates provide a baseline of support for workers, it is clear that far more support might be offered for family caregivers who also must work outside the home. Heymann et al. (2007) suggest critical improvements should include enhanced access to quality child care and improvements in working conditions for caregivers. Mokomane (2012) Argues for significant expansion of social protection programs for family caregivers including far more comprehensive, locally focused programs that reflect understanding of and responsiveness to regional issues. Each of these directions, however, raises concerns regarding the degree to which they would create increased costs for the central government and employers. In light of that, it has been suggested that Botswana cannot fully address concerns of family caregivers with its own resources and that true improvements will only be achieved with the support of various international organizations (Miller, Gruskin, Subramanian, Rajaraman, & Heymann, 2006). While international support for drug treatments for HIV-positive individuals has been extensive, far less international attention has been directed toward social supports for orphans and their family caregivers. The Botswana government, too, has dedicated substantially more attention and funding to HIV eradication than forms of family support.

Conclusion

As with many developing nations, Botswana's policy approaches to child and family issues reflect important improvements and ongoing areas of deficit. As the nation grows and modernizes, it continues to explore and refine policies associated with child and family well-being. Despite considerable advances, gaps and deficits exist which might be addressed through further policy approaches and/or strengthening of current policy and practice. Chief among these is the ongoing disparities that exist among children and families in different regions of the country, especially among those living in rural and more remote areas. Improved access to support services should be a focus of future policy enhancements.

Botswana also continues to struggle to balance its approach to child and family issues through common and customary law. Because of the prevalence of customary law courts, especially in regions dominated by tribal governance structures, many family-focused court cases are resolved using traditional viewpoints rather than those codified in legislation comprising Botswana's common law code.

While the nation has made considerable progress in documenting health issues and progress associated with policy and practice strategies, there is room for a more substantial and coordinated approach to data collection and reporting. Relatedly, Botswana would benefit from broadening the key indicators it considers in developing a sense of the degree to which it has achieved the various Millennium Development Goals, its progress toward the goals of the Vision 2016 plan, and the adequacy of its enactment of the Child Protection Act.

Finally, it is clear that various long-standing threats to child and family well-being remain very significant in Botswana. These include the ongoing high prevalence of HIV/AIDS across the population, ongoing concerns about child abuse and neglect, and the number of orphans and vulnerable children who turn to the government for support in the absence of positive family environments. Botswana stands, then, as an example of a developing nation that has made considerable policy progress in enhancing child and family well-being while also representing a fertile opportunity for further policy enhancements.

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Chapter 5 Family Policy in South Africa

Zitha Mokomane

Abstract South Africa, like many other African countries, does not have an explicit family policy. What the country has, though, is an enabling legislative and policy framework. This chapter discusses this framework within three broad categories: that targeting marriage, that related to child-rearing and work-family balance and that aimed at supporting families at risk. It is shown that the latter, provided in the form of social grants, is the government's key initiative in addressing the livelihood challenges of vulnerable family members, specifically older person, children and people with disabilities. The social assistance system is not, however, without weakness and challenges. These are discussed and the recommendations to address them are proposed.

Keywords Apartheid • Family policy • Migrant labour • Social assistance • Social grants • South Africa

Introduction

Family policy broadly construed encompasses any direct and indirect policy that influences the well-being of families (Randolph & Hassan, 1996). Taking cognisance of the broad conceptualisation of family policy, the distribution of family-related services between government departments and the absence of an explicit family policy for South Africa, Harvey (1994, p. 2) described family policy in the country as 'those measures and programmes by the policy makers which are primarily directed at the circumstances of marriage and the family or related factors, as well as other measures and programmes that explicitly influence the family and individuals in their role as family members'.

With the above definitions as the basis, the development of family policy and, indeed, general social policy in South Africa can be traced back to the institutional segregation of population groups that prevailed during the apartheid era (Amoateng & Richter, 2007). Although for a long time South Africa lived 'on the capital of a very strong African family system' (Wilson, 1975 cited by Lund, 2008, p. 2), the apartheid system – from the onset – gave rise to a dualistic family policy whereby a strong differentiation was made between White families and those of the African, Coloured and Indian

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¹This was a system of racial segregation enforced through legislation by the National Party governments, who were the ruling party from 1948 to 1994, of South Africa, under which the rights of the majority Black inhabitants and other groups of South Africa were curtailed and White supremacy was maintained (Gallagher, 2002).

Z. Mokomane

population groups² (Harvey, 1994). Overall, with Whites seen as more superior to the other groups and given the government's view that 'the interests of the black group lay in the reserves, that the Indian group was an exogenous group and that the coloureds should fend for themselves', the Western core family was adopted as the model of family life in the country (Harvey, p. 29).

Family Policy During the Apartheid Era

All in all, the prevailing policy during the era of apartheid did not meet the marital and family life needs of all population groups in the country. While Whites were protected by political franchise, economic power and a range of educational, housing and family policies which assisted the poor, the strong traditional and cultural welfare and education systems in the other groups were intentionally destroyed by the apartheid government (Lund, 2008). Coloured family life in rural areas, for example, was deeply affected by the quasi-feudal system under which workers existed. This included the *dopstelsel* system in which farm workers were remunerated with alcohol rather than money (van der Merwe, 2010) and the *tot* system, whereby a portion of the daily wage was paid in the form of regular amounts of alcohol which were consumed on the spot (South African Government Information, 1996). The supportive extended family system that was characteristic of the Indian population group was likewise severely disrupted, and generations forced apart, due to the combination of the Group Areas Act (which assigned racial groups to different residential and business sections in urban areas), the destruction of old urban settlements and the creation of new township on the periphery of urban centres for those whose homes and communities were destroyed and dismantled (Lund, 2008).

To the extent that the African population bore the brunt of the inequalities created by apartheid, it is the family customs, lifestyles and overall family life and roles of this population group which were most severely affected by apartheid policies, specifically the migrant labour system, the urban influx control policy and the 'separate development' policy. With influx control, measures used to regulate the inflow of Africans into the country's urban areas. The system allowed Africans access to towns only to serve White labour needs. While domestic workers were allowed to live in towns, all other workers were restricted to finding housing in townships on the outskirts. The basic tenet of the 'separate development' policy, on the other hand, was to reserve Africans' rights and freedoms within the confines of the 'homelands', but that outside them, Africans were to be treated as aliens.³ In these homelands, however, there was a systematic dispossession of assets such as land and cattle; there was no deliberate development of towns which would have brought local work opportunities, and education was either lacking or designed to offer African children very limited career options (Amoateng & Richter, 2007; Lund, 2008).

The migrant labour system entailed men contracting to work in major cities and mines while leaving their families and political rights in the African designated 'homelands'. The system ensured a supply of cheap labour to the mining sector and secondary industry where residential places for African workers, especially in the mines, were designed to inhibit the right to live a family life. In addition, employment contracts were often designed to prevent access to contributory retirement schemes (Lund, 2008). The main assumption of both the political establishment and business at the time was that migrant labourers would be guaranteed social protection by their extended families and that they would return to their communities at the end of their employment contracts (Department of Social

²Under apartheid, the South African population was classified into four main 'race groups': African, Coloured, Indian and White. This classification is used in this chapter against this background, with no derogatory intentions.

³Apartheid: Separate Development Policy—Infoplease.comhttp://www.infoplease.com/ce6/history/A0856653. html#ixzz22xV1Drha

Development, 2012). However, this system led to the manifestation of various social problems in the country that had a direct bearing on family life. For example, families in the homelands bore the health costs of diseases such as tuberculosis that were contracted in the mines, as infected workers were sent back to rural areas with no industrial compensation (Lund, 2008). Other key consequences of the migrant labour system and apartheid policies in general include the following:

High Proportion of Female-Headed Households

The migrant labour system left many rural areas with few able-bodied men, and this greatly undermined the African family in many ways and created conditions for its disintegration. It meant, for example, that only women and the elderly were in a position to play vital roles in meeting the needs of the family. This arrangement placed a significant burden on women and contributed to the phenomena of female-headed households (FHHs) and absent fathers and the outflows from this today (Department of Social Development, 2012). Indeed, Demographic and Health Survey (DHS) data show that South Africa has one of the highest proportions of FHHs in Africa, reported to be 41.9 % at the time of the 1998 DHS. This situation seems to persist with 2008 data showing that 40 % of children were living with their mother only, while 2.8 % lived in their father only, and 35 % lived with both biological parents (Holborn & Eddy, 2011). This pattern has implications for family poverty given that FHHs have been shown to be generally disadvantaged in terms of access to important socioeconomic resources such as land, livestock, credit, education, health care and extension services (Connell, 2003; UNECA, 2009). Other noteworthy facts regarding FHHs in South Africa include the following (see Statistics South Africa, 2010a):

- FHHs are on average larger than male-headed households (3.7 persons per household compared to 3.3 for males) with a higher total dependency ratio (0.8–0.4).
- Individuals in FHHs are less likely to be economically active than individuals living in households with male heads.
- FHHs are more dependent on state social assistance (grants) and are more likely than male-headed households to indicate remittances and social grants as sources of income.
- FHHs are less likely to indicate salaries and wages as the main source of household income than male-headed households.
- Many of the dependents in FHHs are children: On average, 33 % of these households consist of
 children compared to only a fifth for male-headed households, meaning that FHHs are burdened by
 a large child dependency ratio.

Absent Fathers

With regard to absent fathers, recent figures published by the South African Institute of Social Relations showed that the proportion of children aged 0–17 years with absent but living fathers increased from 42 % in 1996 to 48 % in 2009 (Holborn & Eddy, 2011). Analysis of the data by racial group revealed that Africans had the highest proportion of children with absent fathers: 52 % in 2009, which is an increase from the 46 % reported in 1996. The corresponding figures for Coloureds were 41 % and 34 %, respectively. The proportion of White children with absent fathers also increased from 13 % to 15 % in the same time period, while Indians were the only group that showed a decrease: from 17 % in 1996 to 12 % in 2009 (Holborn & Eddy). Additional noteworthy statistics by Holborn and Eddy are that 23 % of all South African children aged 0–17 years were living with neither biological parent in 2008. These figures are of concern given that while 'children are not necessarily disadvantaged

62 Z. Mokomane

by the absence of their father ... they are disadvantaged when they belong to a household without access to the social position, labour and the financial support that is provided by men' (Townsend, 2002, p. 270). There is also an established body of research showing the positive effect that the presence of a father has on a child's life chances, academic performance and social, emotional and cognitive functioning (Engle, Beardshaw, & Loftin, 2006; Kang & Weber, 2009; Richter, 2006).

Poverty

Another of the cardinal outcomes of past discriminatory and exclusionary policies in South Africa is the high poverty and inequality levels in the country which deter the family from playing its various roles in society and make it difficult for its members to meet their needs. Although there are suggestions that the country might achieve Millennium Development Goal 1 (eradicate extreme poverty) by 2015 if government's poverty reduction strategies continue at current levels (Statistics South Africa, 2010b), mass poverty continues to present itself as a challenge in the country.

The levels and patterns of poverty still reflect apartheid settlement patterns as virtually all poor households are found in the former homelands, informal settlements and townships, with Africans being the most affected. One of the common explanations is that employment creation has not transpired at the anticipated rate in the post-apartheid period and many of the previously disadvantaged people are still unskilled. Their resultant inability to secure employment has led to additional burdens for many African families as they have limited or no income to sustain basic livelihood. In the same vein, the persistent inequality has been partly attributed to the reproduction of existing disparities in ownership, income, resources, skills and other determinants of people's capacity to take advantage of opportunities (Department of Social Development, 2012).

Housing

The Constitution of South Africa clearly stipulates that everyone in the country 'has the right to adequate housing and the State is obliged to take reasonable legislative and other measures within its available resources, to progressively realise this right' (Frye, 2008, p. 17). In line with this, a housing subsidy scheme was implemented in 1994 with the aim to balance the housing landscape that had been skewed towards Whites during the apartheid era and to ensure that the most vulnerable members of society are sheltered in adequate housing. While this subsidy saw more than 2.8 million households adequately sheltered by 2010, the slow pace of housing delivery has been among the key grievances responsible for violent protests in recent years (Ndinda, Uzodike, & Winaar, 2011). Ndinda and colleagues posit that although the overall purpose of the housing policy is being met, 'a significant proportion of those in need of housing still lack access [and] while households ineligible for the government housing subsidy have been left to access housing through the market, lack of low-cost rental stock has pushed such households into informal dwellings hence the persistence of informal settlements' (Ndinda et al., 2011, p. 782).

Other consequences of past policies for African family life identified mainly by the Lund Committee on Child and Family Support (South African Government Information, 1996) are that:

The majority of households living in poverty, especially in rural areas, contain three to four generations
and are generally much larger than relatively better-off households. It is argued that this may be an
unintended side effect of the homelands and migrant labour policies because, while they removed men
of working age, they made more likely the continuation of the extended family system.

- Many Black South Africans, especially from poorer households, travel long distances to reach their
 places of employment. Workers typically leave home before sunrise and return after dark and are
 often not there for their children. Therefore, while parents may be 'present', they have little time
 for active parenting.
- Closely related to the above point is that, while the laws that established the migrant labour system
 no longer exist, migrant work is still very much part of life for many. For example, in 2001, about
 15 % of households and 39 % of FHHs in the country received remittances from migrant workers,
 the latter suggesting that there are still high numbers of men living and working away from their
 families (Holborn & Eddy, 2011).
- High numbers of children are born out of formal partnerships. The participation of many young men in the migrant labour system meant that young people had to wait several years more than was the custom before they could get married. This not only increased the average age at first marriage but it also resulted in an increased number of people who ever got married (Mokomane, 2006). The pattern has continued to date as illustrated by Kalule-Sabiti, Palamuleni, and Makiwane (2007) who used census data to show both the increase in the average age at first marriage for males and females and persistent low marriage prevalence. Given these marriage patterns, much of the childbearing in South Africa takes place outside of formal relationships. Indeed, accounting for 58 % of all births in South Africa, nonmarital childbearing in the country is among the highest in the world and is close to four times the average prevalence in sub-Saharan Africa which is 16 % (Nzimande, 2005).
- A high proportion of the nonmarital childbearing occurs to women aged below 20 years. While analysis of the country's age-specific fertility rates reveals that teenage pregnancy has declined from 16.4 % in 1998 to 11.9 % in 2003, teenage pregnancies remain high at 61 births per 1,000 women aged 15–19 years (Department of Social Development, 2010).

Family Policies in the Post-Apartheid Era

Following the end of apartheid and the establishment of a new democratic dispensation in 1994, the post-apartheid government instituted various policy and legislative reforms aimed at, among other things, the realignment of the country's institutions, in order to transform the South African society. However, the family is not explicitly addressed in many of these policies. Rather it is usually inferred, and, in consequence, most socio-economic benefits indirectly filter down to the family. This absence of an explicit family policy in South Africa has, for the most part of the post-transition period, been identified by policymakers, civil society and concerned citizens as a critical policy shortcoming that needed to be urgently addressed so as to mitigate the effect that apartheid-induced policies had on families (Department of Social Development, 2012).

Largely as a response to these concerns, a draft *National Policy Framework for Families* was developed in 2001 by the Department of Social Development. Its 2005 'final draft version' was premised on the principle that families are the core of society, and its goals include the protection and support of families through effective and efficient service delivery, the creation of an enabling environment geared towards the self-reliance of families and the promotion of inter-sectoral collaboration among stakeholders in the provision of services. The final draft version draws from, among others, the *White Paper for Social Welfare* – the first overall social welfare policy under the post-apartheid government – which reaffirms the country's commitment to securing basic welfare and human rights. Among other things, this White Paper focuses on the family and the life cycle: families, children, youth and ageing and outlines strategies to promote family life as well as to strengthen families and guides through its developmental paradigm – the implementation of profamily policies and services in the country.

Z. Mokomane

In the pursuit to finalise the draft National Policy Framework for Families, the South Africa Cabinet, in September 2011, approved the Green Paper⁴ on Families which aims to incorporate family-related issues into general government policymaking. The Green Paper was released for public comment in May 2012, and a White Paper⁵ on Families is expected to be available by March 2013. To this end, South Africa is one of the very few countries that have taken on board the call by African Union *Plan of Action on the Family* (PoA) for member states to design and implement national policies and programmes for the family. The 2010 midterm review of the Plan of Action found, among other things, that only 10 of the 25 member states that participated in the review had purposely adjusted their respective programmes and policies in accordance with the PoA requirements and only one country had developed a road map on family (African Union, 2010).

Despite this apparent policy interest, the family has not enjoyed a high priority in the academic circles in South Africa; 'the liberation and class struggles have always been deemed more important topics of academic debate and research than the family. This has translated into a situation where we have very little empirical data that can provide a picture of the family as a whole' (Zeihl, 2003, p. 217). Much of the family policy development in the country is therefore premised on secondary and descriptive analyses of the various survey and census data that are regularly collected by various government and research institutions in the country. These are often complemented by participatory appraisals, done through community organisations, in which families and their members, especially those who are poor, speak for themselves, with little screening by academics (South African Government Information, 1996). It is from these that a depiction of characteristics of family life and the effectiveness of policies and services available to families is often drawn. The latter is the focus of the next section.

Family Policies in Contemporary South Africa

Given the definition of family policy provided earlier in this chapter, it can be concluded that South Africa does not have an explicit family policy. What the country does have, though, is an enabling legislative and policy framework within which marriage is regulated and through which national development endeavours are meant to reach specific family members. For the purpose of this chapter, the policies will be discussed within three broad categories: those targeting marriage, those related to child-rearing and work-family balance and those aimed at supporting families at risk.

Policies Targeting Marriage

Social science research has consistently shown that stable families founded upon marriage provide profound benefits for men, women and children, while the breakdown of stable marital structures imposes significant social and economic costs upon individuals and society (Waite & Gallagher, 2001; Wilkins, 2012). It is for this reason that the fostering of marital stability has been identified as a key principle of family policy (Olson, 1999). Despite this, and notwithstanding the low marriage

⁴A Green Paper can be described as a consultation document issued by the government which contains policy proposals for debate and discussion before a final decision is taken on the best policy option. A Green Paper will often contain several alternative policy options (http://news.bbc.co.uk/2/hi/uk_news/politics/82326.stm).

⁵A White Paper is used as a means of presenting government policy preferences prior to the introduction of legislation. Its publication serves to test the climate of public opinion regarding a policy issue and enables the government to gauge its probable impact (Chapin & Deneau, 1978).

prevalence and increasing cohabitation in the country, South Africa does not have any policies that explicitly target marriage. Rather, the institution is regulated by various legislative Acts, key among them being the *Marriage Act of 1961* which consolidates and amends the laws relating to the solemnisation of marriages in South Africa, the *Matrimonial Property Act of 88 of 1984* which covers issues around the matrimonial of married people, the *Recognition of Customary Marriages Act No. 120 of 1988* which came into existence primarily to accommodate the customary marriages that were previously not recognised or accommodated by the marriage acts of the country, but had been in existence in large numbers and in greater populations in South Africa (Department of Social Development, 2007) and, finally, the *Civil Union Act No. 17 of 2006* which legalises same-sex marriage by allowing two people, regardless of gender, to form a marital union. Other relevant legislations that have implications for marriage and the welfare of married family members are the Divorce Act, No. 70 of 1979, and the Domestic Violence Act, No. 116 of 1998.

Policies Regarding Child-Rearing and Work-Family Balance

As alluded to earlier, many South African children are not being continuously parented by either or both of their own parents as the parents spend most of their time travelling to and from work or are physically away – for months or weeks – working. The work-family conflict that is created by this situation is further aggravated by the increased female labour force participation in the recent past. While many of the historical policies hampered women's full integration into the labour market (Department of Labour, 2006), the implementation of various enabling policies and legislation by the post-apartheid government has greatly improved the situation. A number of studies (e.g. Department of Labour, 2006; Ntuli, 2004; Statistics South Africa, 2012; Yakubu, 2010) have consistently shown that while still lower than that of men, labour force participation of South African women has been increasing since the end of apartheid.

While positive, these labour market trends suggest that South Africa women work longer hours than men, when both market and nonmarket activities are taken into account. That is, despite their increasing entry into wage employment, women continue to be primarily responsible for the general management of their households and for the care of minor children and elderly members in their households and families (UNECA, 2001). Among other things, this hampers the women's ability to do other potentially life-enhancing activities such as engaging in income-generating and skills-building projects, furthering education and/or attending to other social relationships. Indeed, data from the 2000 Time Use Survey showed that each day South African women spent less time than men on learning, social and cultural activities and using mass media but spent more than double the time men spent on household maintenance and care of persons (Budlender, Chobokoane, & Mpetsheni, 2001).

Available literature has also shown that in addition to inducing depressive symptoms and physical health complaints among women (Blin, 2008; Oomens, Geurts, & Scheepers, 2007), the failure to adequately reconcile work and family responsibilities has a negative impact on the care and health of children (and therefore human capital) and adversely affects workplace productivity and profitability. It has also been associated with negative impacts in the quality of relations between spouses and increased risk of family dysfunction (Macewen & Barling, 1994; Mathews, Conger, & Wickrama, 1996). Examples of family dysfunction include spousal emotional distress such as depression, insufficient surveillance and lack of control over children's behaviour, lack of warmth and support and displays of aggression and hostility among family members (Ahmed, 2005).

Against the above background, it is evident that getting the work-family balance right is vital to enhance the well-being of families and society at large as well as to improve business performance and better labour market outcomes (OECD, 2001; Pavalko & Henderson, 2006). It is largely because of this that many Western and industrialised countries have introduced several arrangements that may assist

Z. Mokomane

employees to better coordinate their work and domestic obligations. These 'family-friendly' or 'work-life' policies include, among others, working hour arrangements (e.g. flexibility in work schedules, part-time work, working from home and telecommuting), subsidies for childcare and statutory such as rights to maternity, paternity and parental leave (Oomens et al., 2007; Pavalko & Henderson, 2006).

To what extent has South Africa adopted these 'family-friendly policies'? According to Dancaster (2006, 2008), there is no legislative right for employees to request flexible working arrangements in South Africa. The only existing legal avenue for the right to request an adaptation of working hours for the purposes care is through the unfair discrimination provisions of the Employment Equity Act. However, this option has not been utilised, and it remains cumbersome and costly for employees.

In terms of statutory parental leaves, the Basic Conditions of Employment Act recognises only one of the leaves in its 'pure' form: paid maternity leave. This is defined as leave available to new mothers which is intended as a measure to protect the health and welfare of the mother and newborn child, just before, during and immediately after birth (Moss, 2006). With a total duration of 16 weeks, South Africa's maternity leave is not only more than the minimum 14 weeks recommended by the International Labour Organisation's Maternity Protection Convention No. 183 but is also the highest in sub-Saharan Africa where maternity leave is typically between 12 and 14 weeks (Smit, 2011).

In the absence of paternity leave, defined as a statutory entitlement for fathers, usually to be taken soon after the birth of a child and intended to enable the father to spend time with his partners, new child and older children (Moss, 2008), fathers in South Africa have the right to 3 days' leave after the birth of their children as part of their family responsibility leave (Smit, 2011). According to Smit (p. 24):

Although civil society organisations and trade unions [in South Africa] have tried to push paternity leave higher up in the policy making agenda, major strides are yet to be made in this regard. ...Reasons why fatherhood has not yet emerged as a 'policy issue' in South Africa [include] the opinion that fatherhood-related policy matters must 'compete' with 'many other claims made upon the over-stretched social agenda of the state". This along with the continued prevalence of patriarchal power and the traditional view that caring lies primarily in the hands of women ... may be seen as reasons why paternity leave has yet to become a matter of serious concern to policy makers ... in South Africa.

While the country's family responsibility leave can be used by fathers, it is noteworthy that it really is meant to attend to a broader range of family-related eventualities, specifically the birth, death and illness of defined relatives. It has, therefore, been criticised for being narrow in scope, taking into account the large number of sick adults in the context of high HIV and AIDS. For example, it does not provide for the absence of an employee to attend to a sick or elderly adult relative. Other notable limitations of the leave are that it only covers leave to attend to sick children (and the birth and death of defined individuals); legislated provision of 3 days of paid leave a year is simply too short, given that this is a multipurpose leave and considering the context of child and elder care demands in South Africa, and it is only available to employees who work 4 days a week and who have worked for their employer for at least 4 months (Dancaster, 2008).

Policies Supporting Families at Risk

Policies that support families at risk in South Africa are in the form of social assistance, and their provision is premised on the country's constitution which enshrines the right of all to access 'appropriate social assistance' from the state if they are unable to support themselves and their dependants (Delany, Graham, & Ramkissoon, 2008). Social assistance refers to non-contributory assistance or benefits provided by the state to poor and needy groups in a population (International Labour Organisation, 2000). In line with this definition, social assistance in South Africa refers to a stable of a number of grants that provide guaranteed monthly cash payments to targeted individuals. With an estimated 15.8 million as of end of June 2012 (South Africa Social Security, 2012) out of an estimated

midyear population of 50,586,757 million people in 2011 (Statistics South Africa, 2011), South Africa has the largest social assistance system in Africa, and there are some insinuations that the proportion of beneficiaries to total population is the highest in the world (Frye, 2008). The five major grants that are of significance to family policy are the Old Age Grant, the Disability Grant, the Child Support Grant, the Foster Care Grant and the Care Dependency Grant. The grants are all financed through general tax revenues collected nationally and are implemented and administered by the South African Social Security Agency which is a national government agency monitored by the Department (Ministry) of Social Development (Frye).

Old Age Grant

Also known as the state Old Age Pension, the Old Age Grant (OAG) has its roots in the South African social pension scheme introduced in the 1920s to protect the minority White population against poverty in old age (Barrientos, Niño-Zarazúa, & Maitrot, 2010). The grant is available to all South African men and women, including permanent residents, aged 60 and older, subject to a means (income and assets) test. As of end of June 2012, there were close to 2.8 million recipients of the OAG which, in April 2011, was ZAR 1200 (approximately US\$148) per month. A further R20 (US\$2.45) is added for those aged 75 and above. Furthermore, OAG recipients who cannot look after themselves and need full-time care from someone else may apply for an additional *grant-in-aid*, which provides an extra R280 (about US\$34) per month subject to the provision of a valid and recent medical or assessment report or assessment report showing that the older person requires full-time care. OAG receipts in low-income households are also eligible for special housing subsidies to enable them to either buy a house or finish an incomplete house. This subsidy, which is paid directly to a financial institution or a conveyancing attorney, is only payable once.

Disability Grant

This grant – which can either be permanent or temporary – is payable to all adult (18 years or older) South Africans who are unable to work because of a mental or physical disability, subject to submission of a medical assessment that confirms that the applicant's disability renders him or her 'incapable' of entering into the labour market. Temporary grants are valid for up to 12 months, where after they fall away unless recipient reapplies and submits a new medical assessment and report showing that they are still unable to work (Republic of South Africa, 2005). There were approximately 1.2 million South Africans receiving Disability Grants (both permanent and temporary) as of end of June 2012. The value of the grant as of April 2012 was ZAR1200 (about US\$148) per month and was means tested. Recipients who cannot look after themselves and need full-time care from someone else can also apply for the grant-in-aid described earlier. Once the recipient of a permanent Disability Grant reaches 60 years of age, the grant is automatically converted to an OAG.

Child Support Grant

The Child Support Grant (CSG) is payable to primary caregivers of children aged younger than 18 years old to a maximum of six children. As with the OAG and the Disability Grant, the CSG is means tested. The value of the grants as of April 2012 was ZAR 280 (about US\$34) per month per child. As of end of June 2012, the CSG had been accessed by over 11 million poor children under 18 years of age (South Africa Social Security, 2012).

Z. Mokomane

Foster Child Grant

The objective of the Foster Child Grant is to reimburse nonparents for the cost of raising foster children who have been removed from their parents and legally placed in the care of foster parents, in terms of the Children's Act. As of April 2012, the foster child grant was R770 (about US\$95) per child a month, and it had approximately 565,000 recipients as of end of June 2012. While the grant is means tested, it is noteworthy that it depends on the income of the foster child, not on the income of the foster parents. Other pertinent points about the grant are that (1) it is usually only for 2 years, as courts typically appoint foster parents for a 2-year period only after which children are usually adopted, returned to their parents or placed with other foster parents. However, a social worker can extend the grant depending on the circumstances. (2) The grant is usually paid out only until the child reaches 18 years of age. In the event that the child turns 18 years old while in secondary or high school (but not a tertiary facility), the grant can be paid out until the end of the year in which the child turns 21 years old.

Care Dependency Grant

This means-tested monthly grant of ZAR 1200 (about US\$148) as of April 2012 is currently paid to just over 116,000 beneficiaries (end of June 2012) and is payable to a parent, guardian, foster parent or custodian of any child between the ages of 1 year and 18 years who needs full-time care because of mental or physical disability. The child must need, and have, permanent home care; the grant excludes those children who are cared for in state institutions because the purpose of the grant is to assist the caregiver looking after the child to replace his or her lost earnings. Infants aged less than 1 year are excluded because all young children have full-time care needs regardless of their disability status (Barrientos et al., 2010). It is also noteworthy that this grant is equal in value to the Disability Grant and is converted to such when the recipient turns 18 (WC).

Social Relief of Distress Grant

In addition to the foregoing five grants, which form the core of South Africa's social assistance system for family members, there exists the *Social Relief of Distress Grant*. This is a temporary grant of assistance intended for someone in such need that they are unable to meet their or their families' most basic needs. These are typically people who meet one or more of the following conditions (Frye, 2008):

- Awaiting permanent aid.
- Have been found medically unfit to undertake remunerative work for a period of less than 6 months.
- Their breadwinner is deceased and insufficient means are available.
- Have been affected by a disaster, and the specific area has not yet been declared a disaster area.
- The applicant has appealed against the suspension of his or her grant.
- The person is not a member of a household that is already receiving social assistance.
- The person is not receiving assistance from any other organisation.

The amount of the grant cannot exceed the maximum amount of other grants, and despite the fact that this is considered a grant, it can be made available in kind (e.g. food parcels) rather than cash (Frye, 2008).

As a form of social protection, the social assistance grants in South Africa are designed to (1) reduce poverty in the short term by raising consumption and (2) break the intergenerational transmission of poverty by putting family members in a better socio-economic position (Arriagada, 2011).

The effectiveness of the grants in this regard is widely recognised. For example, Samson et al. (2005) noted that Old Age Grants in South Africa reduced the poverty gap in households with older people by more than half (54 %) while virtually eliminating poverty for households with only older people (a reduction of 98 %). In the same vein, a review of the Child Support Grant (CSG) by Delany et al. (2008) found, among other things, that households of eligible caregivers allocate a larger proportion of their household expenditure to essentials such as food, basic services and education-related costs; CSG beneficiaries are more likely to attend childcare facilities or preschool than non-beneficiaries in the same age group; CSG recipients were more likely to have bank accounts and some form of savings than those who are eligible but not receiving the grants; and CSG recipients reported being involved in financial decision-making, either alone or jointly with others, regarding how the grant is spent. Overall the conclusions of the various evaluations of grants in South Africa are capsuled in the following statement by Samson et al. (2005, p. 4):

South Africa's experience with social security has provided important lessons for countries concerned with eradicating poverty and reducing inequality. Research has identified social grants as effectively targeted, and as the most pro-poor item of government expenditure, Furthermore, social grants not only provide households with income, they also support second-order effects that further reduce poverty. In particular, households that receive social grants are more likely to send young children to school, provide better nutrition for children, and look for work more intensively, extensively and successfully than workers in comparable households that do not receive social grants.

Family Policy Implementation and Assessment

The purpose of this chapter was to provide an overview of family policy in South Africa. It high-lighted the detrimental effects of the apartheid policies on the family and how these are associated with many of the socio-economic problems facing families in contemporary South Africa. The chapter further showed that despite clear evidence of policy interest in the welfare of families, South Africa, like many other African countries, does not have an explicit family policy. Rather, the welfare of families in the country is safeguarded by a number of implicit commitments and policies embedded in legislative acts, including the constitution and labour legislation, but more so in the social assistance system. While the latter is the most extensive in Africa (Frye, 2008), there are a number of gaps in it that can hamper effectiveness. Key among these include:

Means testing: Virtually all of the grants in South Africa are means tested. That is, eligibility for benefits is established by measuring individual or family assets and income against a calculated standard usually based on subsistence needs. While this may reduce governments' direct costs for providing assistance (Taylor, 2005), lack of administrative capacity that often leads to errors of exclusion of those who should be receiving the grants seems to be a major problem in South Africa as it is in many sub-Saharan Africa countries (Kaseke, 2008; Taylor, 2008). For example, Delany et al. (2008) noted that while targeting the Child Support Grant in the form of the means test was relatively accurate with low levels of inclusion of those who should not be receiving it, there were relatively higher levels of erroneous exclusion of eligible children and primary caregivers. Concerns have also been raised that the means test for the Old Age Grant has the potential to act as a disincentive for people to save for their old age (Frye, 2008).

Absence of conditionalities: Currently all grants in South Africa are relatively free of conditions, meaning that they are given without any attached conditions. While unconditional social assistance is far less costly both for the administrators and the beneficiaries than conditional assistance where beneficiaries are required to undertake some form of work or training or to utilise prescribed education, health or nutrition services and where adherence to the conditions is regularly monitored (Adato & Bassett, 2009; Slater, 2011), conditional social assistance has consistently been found to be more beneficial in developing

70 Z. Mokomane

countries due to the added advantage of building human and physical capital through the education, health and sometimes training conditions that are attached to them (Slater).

Individual focused: It is also evident that all of the social grants in South Africa are not targeted at families or households but at certain categories of vulnerable individuals, specifically older person, people with disabilities and children. It is noteworthy, however, that the needs of such individuals may not necessary be congruent with those of the family unit. While investing in children should be seen as a priority to break the intergenerational poverty, there is need to consider poor families that, for example, have no children or vulnerable members and hence no indirect access to the grants. Overall, therefore, the social assistance system in the country tends to overlook intra-family dynamics in the country.

Recommendations

From the discussion in this chapter, the following are areas that the government of South Africa, in collaboration with other stakeholders, needs to consider in their efforts to mitigate, through policy development, the challenges affecting families:

- 1. Develop and implement an explicit family policy. While South Africa has reaffirmed its commitment to improving family welfare by developing the Green Paper on Families and putting in place plans to convert it into a White Paper, consideration should be given to converting the latter into an explicit family policy so as to provide a holistic framework that will anchor efforts directed at improving the overall well-being of families. Among the key tenets of the explicit family, policy should be:
 - The fostering of marriage and marital stability. This will be on the basis of consistent research showing that stable marital unions generally promote societal health, safety and social progress, while unstable marital unions promote negative circumstances like poverty, crime, substance abuse and social disintegration (Wilkins, 2012).
 - The encouragement of fathers' involvement in their children's upbringing through, for example, the
 appropriate elaboration or revision of current laws and social policies that will create an environment where fathers have the opportunity to care for, engage with and support their children and
 families.
 - The promotion of work-life balance by putting in place mechanisms and policies, including
 paternity leave, to facilitate the balancing of work and family responsibilities as well as to mitigate families' burden of caring for their children, older persons and people with disabilities.
- 2. Ensure the effective implementation of the Plan of Action on the Family in Africa (2004) (PoA). The explicit family policy will need to be closely aligned to the key recommendations of the PoA, the purpose of which is to serve as an advocacy instrument for strengthening family units, addressing their needs, improving their general welfare and enhancing the life chances of family members. The PoA focuses on nine priority areas namely: poverty alleviation; rights to social services; promoting environmental sustainability rights, duties and responsibilities; rights of protection for the family; strengthening family relationships; control of major causes of morbidity and mortality; ensuring peace and security; and evaluation and monitoring. Overall, therefore, it is a useful and relevant instrument in addressing many of the challenges facing the family in contemporary South Africa.
- 3. Consider the key recommendations of the Social Policy Framework for Africa (2008). In addition to the PoA, consideration needs to be taken of the key tenets of the African union's Social Policy Framework for Africa which proposes a minimum package of essential social protection for families targeting, among others, benefits for children, informal workers, the unemployed, old people and

persons with disabilities. Given that South Africa already has a relatively established social assistance system, the current need is to:

- Ensure that available assistance is family focused and incorporates the prevailing transformations
 taking place within family system because it is within the family that the social grants can act
 more efficiently. Essentially the system should adopt a 'family security approach' which recognises that multiple generations and multiple levels of influence must be targeted concomitantly
 (Shanks & Danzinger, 2011). As Shanks and Danziger posit:
 - No single program is likely to be enough. And although the most concrete issue for a family may be insufficient income, "fixing" income support policies alone might not take us far enough along in a risk and protection framework. Families with children, especially those headed by young single women, could undoubtedly use better-designed cash and financial help with housing, child care, food, and job training to make ends meet. However, to prevent a lifetime of poverty and dead-end jobs, a host of other resources education, parenting support, services to provide their children a nurturing home environment, and high-quality early child care are needed. Given that families often experience spells in and out of poverty throughout the life course, it would be strategic to assist parents of young children to increase their educational attainment and plan a better life for themselves and for their children. Work-related participation requirements might be part of a broader goal to improve long-term outcomes for entire families. (Shanks & Danzinger, 2011, p. 48)
- Attach conditions to some of the existing social grants, particularly those aimed at children and family care. Although the conditionality aspects of social assistance are often criticised in the context of limited education and health resources in developing countries, they are often implemented with a long-term objective (of both governments themselves and of development assistance agencies) to strengthen these resources in wider context than merely that of social transfers (Slater, 2011). Therefore, attaching conditions to social grants is likely to lead to longer-term economic and social 'health' of families, especially the poorest, as well as to wider social development and poverty reduction in the country.
- 4. *Build an information base* through regular research studies and situational analyses for understanding the factors that place families at risk, to assess the direct and indirect effects of existing policies and legislation on family life and well-being and to identify opportunities for mitigation.

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72 Z. Mokomane

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Part III Family Policies in Europe

Chapter 6 Family Policies in Norway

Mette L. Baran, Evan E. Diehnelt, and Janice E. Jones

Abstract Norway has become a liberal leader in family policies, gender equality, equal workforce participation, children's rights and equality, and in supporting sexual equality. This has been supported by money from oil revenues, international involvement/engagement, and domestic policy shifts. While Norway is not perfect, it continues to push forward, such as with its Ombudsman for Children. The Directorate of Children, Youth and Family Affairs handles family policies in Norway. This department is responsible for developing family-life and cohabitation policies as well as legislation affecting children and families. Family affairs policy, family law, and gender equity policy are also managed by the directorate. Current issues impacting family policy in Norway are discussed in this chapter.

Keywords Norway • Government pension fund • Oil revenue • Sexual equality • Cohabitation

Introduction

Approximately the same size as New Mexico, Norway is located in the northern part of Europe situated on the western side of the Scandinavian Peninsula, which it shares with its eastern neighbor, Sweden. The North Sea borders the country on the west, and the Barents Sea lies to the north. Spitsbergen, a group of islands 400 miles to the north in the Arctic Ocean, is a Norwegian dependency. The country also shares borders with Finland and Russia in its northern regions. A long and narrow landmass, Norway extends more than 1,100 miles from north to south and varies in width between 270 and 4 miles. Although it is one of the less populated countries in Europe, with only 4,973,029 inhabitants (US Department of State, 2011), it is one of the richest countries in the world due to its large supply of oil, natural gas, fish, timber, and hydropower. The per capita gross domestic product was \$53,300 (US Department of State).

The official language is Norwegian, a Germanic language. The constitution provides for freedom of religion, and other laws and policies contribute to the generally free practice of religion in Norway.

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78 M.L. Baran et al.

However, the Evangelical Lutheran Church of Norway, considered the state church, receives benefits and support from the government which are not afforded to other religious groups. Education is free through the university level and is compulsory from ages 6–16. At least 12 months of military service and training is required of every eligible male; however, many seek exemption from this law, and approximately 40 % are exempted from service for health or other reasons annually. Norway's health system includes free hospital care, physicians' compensation, cash benefits during illness and pregnancy, and other medical and dental plans. There is a public pension system. The official retirement age is 67; however, one can retire prior to this age.

The Influence of Socioeconomic Context on the Social Policymaking Process

Norwegians, being under the rule of Sweden and Denmark for centuries, have a strong sense of national pride. In 1814, while still under the rule of the Swedish king, the constitution was written; however, it was not until 1905 that the country won its freedom and emerged as an independent constitutional monarchy. The small scale of Norwegian society, with a highly homogenous population of little more than four million, also aids in the development of a strong cultural identity and heredity. The king and queen serve as symbols of national unity; however, their functions are mainly ceremonial. Although the constitution grants important executive powers to the king, these are almost always exercised by the Council of Ministers in the name of the king (King's Council). The Council of Ministers consists of a prime minister – chosen by the political parties represented in the parliament (Storting) – and other ministers. The 169 members of the parliament are elected from 19 counties (fylker) for 4-year terms according to a complex system of proportional representation. Each county is headed by a governor appointed by the king in council, with one governor exercising authority in both Oslo and the adjacent county of Akershus.

Some of the northerly sections of the country are home to at least two main groups (coastal and mountain) of an indigenous population of Sami (previously called Lapps) with a separate language (a non-Indo-European language) and distinct cultural traditions. Some groups of Sami practice reindeer nomadism and range across northern Sweden and Finland. Currently, there are approximately 40,000 Samis living in Norway. Ethnic relations between the majority population and the indigenous Sami peoples have been problematic on occasion. In 1999, the United Nations Human Rights Commission asked Norway to explain the delay in giving the Sami population self-determination. The establishment in Karasjok in northern Norway of a Sami parliament to coordinate relations with local, regional, and national government offices has helped draw attention to the needs of that population.

Starting in the 1980s primarily for humanitarian reasons, Norway welcomed asylum seekers and immigrants from various parts of the world. As of January 2011, there were 600,900 immigrants and 100,000 Norwegian-born persons with immigrant parents living in Norway. The majority of immigrants are from Poland, Sweden, Germany, and Iraq. Thirty-four % of immigrants have Norwegian citizenship. Immigrants now make up about 12.2 % of Norway's population, but the percentage in Oslo is nearly double that (US Department of State, 2011). Over the last decade, the attitude toward asylum seekers has become somewhat less sympathetic, and survey data show that outside of business dealings, relatively few Norwegians have contact with the immigrant populations. Norway is a unitary state, which means that only the national government is sovereign. However, implementation of policy is locally done through municipalities.

Economic Context

Norway is one of the world's richest countries in per capita terms, although less than 3 % of the area is arable. Its large shipping fleet is one of the most modern among maritime nations. Metals, pulp and paper products, chemicals, shipbuilding, and fishing are the most significant traditional industries.

Hydropower provides nearly all of Norway's electricity as all of the gas and most of the oil produced is exported. In addition, tourism is an important industry attracting visitors to a country dominated by rugged mountainous or coastal landscapes (Everyculture, 2012).

The country's emergence as a major oil and gas producer in the mid-1970s transformed the economy, and in 2010 oil and gas exports accounted for 47 % of total exports. Norway is the world's seventh largest oil exporter and second largest gas exporter, providing much of Western Europe's crude oil and gas requirements (2010). In addition, offshore exploration and production have stimulated onshore economic activities. Current petroleum production capacity is approximately 2.6 million barrels per day. Production in gas has increased rapidly during the past several years as new fields are opened, with crude oil production in decline. In 2010, 26 % of state revenues were generated from the petroleum industry; taxes and direct ownership ensure high revenues. The oil industry directly employs roughly 40,000 people in core extraction activities. Over 250,000 are employed in petroleum-related activities (US Department of State, 2011).

The influx of oil revenue also permitted Norway to expand an already extensive social welfare system. Norway established a petroleum fund (the Government Pension Fund Global) to save and invest the state's oil and gas earnings. The fund was valued at over three trillion kroner (over \$500 billion) at the end of 2011. Thanks in part to prudent financial regulation and to high prices in world markets for its energy and fisheries exports, the global financial crisis has had only a limited impact on Norway. Norway's unemployment rate stood at 3.4 % at the end of November 2011. In recent years, labor costs have increased faster than in its major trading partners, eroding industrial competitiveness. Though the impact of international economic turmoil is uncertain, Norway is expected to experience moderate growth in 2012. Norway twice voted against joining the European Union, but, with the exception of the agricultural and fisheries sectors, Norway enjoys free trade with the EU under the framework of the European Economic Area. This agreement aims to apply the four freedoms of the EU's internal market (goods, persons, services, and capital) to Norway. As a result, Norway normally adopts and implements most EU directives. Its principal trading partners are the EU, the United States, and China. Norway has such great family policy partly because of successes made in energy policy. Domestic energy consumption is primarily powered by hydroelectric energy, which is clean and renewable. Norway however also has, in recent decades, discovered oil off its coasts. This oil is a great export for Norway. The oil is claimed by the state, which means that the state can directly profit from the income of oil sales. This money is a superb buoy of domestic spending, as seen in states like the United Arab Emirates, which can support extensive domestic investment without other natural resources or tax bases. The money from the sale of oil in Norway is put into a sovereign wealth fund, the Government Pension Fund Global, which in Norwegian is Statens pensionsfond Utland or SPU. This fund is quite large, by some estimation the largest sovereign wealth fund in the world and the largest stockholder in Europe. This money is ethically invested, for instance, not financing companies that produce tobacco or violate the Geneva Convention. As this great wealth is in ocean waters and land territory, how to defend this wealth has impacted Norwegian policy options. Norway has the highest military expenditures per person in Europe, but this is not Norway's first line of defense. Rather, diplomacy and international engagement permeate Norwegian policy. This globalism is evident in everything, from Norway's large financial supports of the United Nations to its participation in international efforts.

Political Context

Until the 1981 election, Norway had been governed by majority Labor Party governments since 1935, except for three periods (1963, 1965–1971, and 1972–1973). The Labor Party lost its majority in the parliament in the 1981 elections. Between 1981 to 2005, governments alternated between Labor Party minority governments and Conservative-led coalition governments. In the run-up to the 2005 election,

M.L. Baran et al.

Labor Party leader Jens Stoltenberg reached out to the Socialist Left (SV) Party and the agrarian Center Party to form a "Red-Green" coalition government that commanded a majority of seats in parliament. Stoltenberg's government was the first majority government in Norway in over 20 years, but the governing coalition has had to bridge substantial policy differences to build this majority. The 2005 election was historic because it was the first time the Labor Party was in a coalition government since the 1940s, the first time SV was ever in the national government, and the first time the Center Party joined with the socialist parties as opposed to the right-of-center parties. On September 14, 2009, the "Red-Green" coalition won reelection for 4 more years after winning 86 of the 169 seats in parliament.

Norway supports international cooperation and the peaceful settlement of disputes and recognizes the need for maintaining national defense through collective security. Accordingly, the cornerstones of Norwegian policy are active membership in the North Atlantic Treaty Organization (NATO) and support for the United Nations and its specialized agencies. Norway also pursues a policy of economic, social, and cultural cooperation with other Nordic countries – Denmark, Sweden, Finland, and Iceland – through the Nordic Council.

In addition to strengthening traditional ties with developed countries, Norway seeks to build friendly relations with developing countries and has undertaken humanitarian and development aid efforts with selected African, Asian, and Latin American nations. Norway also is dedicated to encouraging democracy, assisting refugees and asylum seekers, promoting a global response to climate change, and protecting human rights throughout the world. The high GDP per capita is also a factor in supporting family policy, as Norway is not as limited in what resources it can task to address a specific issue. However, it also means that if a person falls through the system, then that person would be faced with a greater gulf between them and others. Furthermore, Norway has worked to acknowledge the value of nonacademic learning, so-called life skills. This is particularly useful for reintegrating those outside the system, such as recent immigrants. There is some concern that this process of certifying and officializing such knowledge might only bring the costs of orthodox educational credentialing without bringing benefits to the learner, such as job market recognition.

Family Characteristics in Norway

Definition of Family

In order to be considered family members, the persons must live in the same household. Further the relationship of the members of the household must be one of marriage or of parent(s)/child relationship (Statistics Norway, 2012). Under this definition, cohabiting couples that live in the same household and that have a couple relationship are not considered members of the same family. A social phenomenon in Norway that is increasingly acceptable is cohabitation as a form of relationship similar to marriage, and most view it as acceptable as marriage. This new stage of cohabitation has, by some demographers, been described as the transformation from a traditional to a modern family formation pattern (Blom, Noack, & Østby, 1993). This form of cohabitation could be compared with a stage of engagement before marriage. Both cohabitation and engagement represent a premarriage trial period (Noack & Østby, 1981). In Norway 22 % of all couples are cohabiting couples.

In 1977, 12 % of women in the age group 20–24 were cohabiting. This lifestyle was at the time mostly for the young. In 1999, cohabitation was common for all age groups under the age of 45 and started to be common even for older age groups. There were 250,000 cohabiting couples and 840,000 married couples in Norway. In 1999 it is also much more common for women to live as single. For the whole age group 20–44, the proportion that were married in 1977 was 73 %, and in 1999 this percentage was down to 42 % (Eriksen, 2001). In 2004, marriage was still the most common choice for living together; however, 26 % of the adult population cohabited or 590,000 people. Today, for persons under the age of 30, the majority of couples are cohabiting couples.

Children and Family Characteristics

Today, close to 50 % of children are born out of wedlock; however, only 7 % of them to single mothers. In 1980, only 14 % of all children were born outside marriage. There is, however, a tendency that cohabiting couples marry later with the presence of children. Currently, one in three cohabiting couples has common children, and among cohabiting couples with children, 30–50 % marry some time before the child turns three (Eriksen, 2001).

Despite new and changing family structures, parental presence remains high. Statistics show that bear out that, of all children in the age group 0–17 years, nearly two out of three children live with married parents, 14 % live with parents that are cohabiting, 16 % live with a single mother and a small 2 % live with a single father, and 4.4 % live in families with one biological parent and one stepparent. In summation, as of the year 2000, 77 % of all children 0–17 years lived in fact with both parents (Statistics Norway, 2012).

Jensen (2001) looks more closely at the parents living with their child/children. 16 % of the children live with their single mother, while only 2 % live with their single father in her study. Among the children living in families with one biological parent and one stepparent, the majority of the stepparents are men. Jensen notes that in the year 2000, 97.5 % of the children lived with their mother, while 79.8 % lived with their father. Jensen concludes her article saying that children live with their dads when the dads live with the mother. The modern father tends to spend more time with their children than earlier generation fathers. On the other hand, with the liberalization of the family structure and the increase of cohabitation, there is a possibility that the fathers have lost out somewhat.

Fertility Rates

The fertility rates in Norway were historically moderate compared to other European countries, but during the nineteenth century, the total fertility rates fluctuated and peeked at around 4.5 children per woman. These fertility rates together with falling death rates lead to an increase of the population. This overpopulation triggered an important emigration period in Norway, and around 1865 some of the increased population emigrated to other countries, in particular the United States. Emigration to the United States was rather common and continued to about 1930. Proportional to the originating population, emigration from Norway to the United States was exceeded only by emigration from Ireland.

The pressure on existing resources from an increasing population in the beginning of the twentieth century leads to falling fertility rates and an increasing mean age at marriage. During the recession in the 1930s, the total fertility rate was down to 1.78 and the mean age at first marriage was 26.4 years for women and 29.3 years for men. After WWII a new prosperous time period started and family formation had never been higher. Only 10 % of the female birth cohorts from 1930 to 1945 were unmarried at the age of 30, and only 5 % had never been married by the age of 40. The age at marriage fell to 22.8 years for women and 25.3 years for men.

The fertility rates were rising, and a baby boom started for period from 1946 through the beginning of the 1960s. The fertility rates peaked at 2.9 children per woman during these years. But with the female birth cohorts of the 1950s, new trends started with shifting patterns of marriage and mother-hood. Today's fertility rate is 1.95 per woman (Catalyst, 2011). By 1970, the high marriage rates culminated. Up to this point in time, the divorces were rare, and almost all children (95 %) were born to married couples. From 1970, however, this situation started to change rather dramatically; less couples married, more couples divorced, and more children were born outside marriage. In the 1950s and the 1960s, engagement was a common procedure among all socioeconomic and social cultural classes. The small group of people doing the traditional form of engagement today are usually young people with religious background or people who finished secondary schooling at some level (obligatory schooling) (Noack, 2001).

Same-Sex Partners

In August 1993, a new law on registration of partners of the same sex was introduced. Norway was the second country in the world to recognize same-sex partnerships, after Denmark. This was similar to civil unions and did not allow for church marriages. On January 1, 2009, a new law took effect allowing for gender neutral marriages. The bill also states "that when a woman who is married to another woman becomes pregnant through artificial insemination, the other partner will have all the rights of parenthood from the moment of conception" (Wikipedia, 2012). Known as assisted insemination, the legislation also requires that identity of the male donor be recorded and offered to the child upon adulthood. Both parents in this situation are to have full legal rights from "the moment of conception."

Divorces

The divorce rates continued to increase throughout the 1980s but started to level off around 1994. However, after 2000, the divorce rates have increased again. The rates of divorce are most frequent for the age groups 25–35 for women and 30–40 for men. Surveys give a picture of the differences in divorce rates among cohabiting couples with children and married couples with children. Among 4-year-old children with parents living together, 15 % had experienced a breakup, while among children with married couples, only 5 % had experienced a divorce. The similar numbers for children 16 years old were 35 and 15 % (Statistics Norway, 2012).

Married couples have automatically shared parental rights for their children. That means each has a 50 % right to the child. Rules for child support payments suggest that both parents' incomes as well as the parents' time with the children should count in the settlement. Parent responsibility means the parent(s) can decide on different juridical binding decisions on behalf of the child, like choice of school, name, application for passport, and movement abroad. Statistical numbers show that shared parental responsibilities are much more common among all couples with children in the year 2002 than in the year 1996, a movement from 29 % to 42 %, while the percentage of mothers having the lone parental responsibility diminished from 67 % to 53 % (Statistics Norway, 2012).

State of Research on Families as Background for Evidence-Based Policy Development

Public welfare initiatives have a long history in Norway. Dating back to the end of the 1700 century, healthcare services were in place to assist families with birth-related service. In the 1800s families benefitted from advancing knowledge in health care and the public welfare initiatives. Public benefit initiatives increased along with the industrialization of the country, and the first worker benefit was an accident coverage introduced in 1894. Public benefits in Norway date back to the 1930s when the government first started to offer public benefits to assist families in their welfare. This was a reaction to declining birthrates, and politicians initiated stimuli activities in order to entice young people to marry and raise a family. However, it was not until after WWII that Norwegian family welfare initiatives developed such as child welfare benefits for mother and child with the majority of the changes taking place during two decades in the 1960–1970s. Many changes have taken place as a response to changes within the traditional family characteristics as well as societal changes in general. The government has played a somewhat active role contributing to this change, for example, by developing policy regarding equal rights for men and women. In addition, the government has increasingly placed an effort in assisting families to cope with the escalating number of family

Table 6.1 Timeline of the National Public Scheme in Norway

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1895	The first Norwegian National Pension Scheme is introduced, and accident insurance for factory workers is introduced. Later this is extended to include seamen and fishermen
1911	Mandatory National Pension Scheme is extended to other sections of the population
1939	Unemployment benefits
1957	Mandatory national sickness coverage for the entire population
1961	Disability pension
1965	Widow and mother's pension
1966	Norwegian National Pension Scheme becomes a law
1971	Rights to sickness leave, unemployment benefits, and workers compensation are integrated in the National Insurance Scheme. Pregnant women with rights to sickness leave may receive a "natal allowance" (paid maternity leave), a leave of absence for a maximum of 12 weeks. Six weeks are reserved for after procreation
1978	The right to full salary during illness is introduced
1981	Special support for unwed mothers expanded to include divorced and single providers. Men and women become equal
1987–1993	Parental leave (period for birth allowance) is extended to 20 weeks and is further extended to 42 weeks by 1993
	1988 right to leave with full salary paid for pregnant women in dangerous work environment who cannot be given other assignments (Store Norske Leksikon, 2012)

violence and increased neglect. Policies concerning child and youth initiatives are also connected to family relations, and policies concerning these areas have been preventive and focused on mending. However, the government has not played a pivotal role in the increasing number of divorces in Norway over the last decades. In addition, cohabitation has increased as an acceptable alternative to marriage.

In the 1950s, the term family politics was not utilized, and the Department of Family and Consumer Goods was created and followed by several restructuring and name change efforts. The department Forbruker- og administrasjonsdepartementet (1972), Familie- og forbrukerdepartementet (1990), og Barne- og familiedepartementet fra (1991) (Store Norske Leksikon, 2012). The following is a time line of the National Public Scheme in Norway (Table 6.1):

The Norwegian government is a leader in offering welfare initiatives in the world and all citizens' benefit. Everyone with a permanent address living in the country for a duration longer than 12 months, regardless of citizenship, is covered by mandatory social policies since 1967. In 1997, a new mandate was introduced offering economic benefits related to illness, pregnancy, birth, unemployment, old age, disability, death, and loss of a provider. The National Insurance Scheme also covers expenses incurred related to medical treatment, rehabilitation, and work-related reschooling initiatives.

In 2010, the budget was 305 billion Norwegian kroner (approximately \$60 billion) financed by membership dues (29 %), employer dues (43 %), government (27 %), and others (1 %). In 2011, 1,450,000 people received their pension or other temporary financial benefits from the National Insurance Scheme which translates into one in every fourth Norwegian inhabitant living off welfare benefits.

As in many western countries, the contemporary family characteristics are in a state of flux. Norway's marriage rates are falling as cohabitation is becoming more and more the norm for couples of all ages. The current mean age for marriage for women is 32 (Hausmann, Tyson, Bekhouche, & Zahidi, 2011). In addition, the divorce rates remain high at 43 % (Divorce, 2012).

Rønsen and Skrede (2006) researched parents' participation in the labor force and the division of labor between the parents and the fertility level. The study shows that the country has managed to keep fertility rates close to the reproduction rate despite the high employment rates. One can conclude that the family welfare regulations support the combination of family employment and family reproduction.

M.L. Baran et al.

Family Policy Framework Developments Targeting Different Family Functions

Family policies in Norway are handled by the Directorate of Children, Youth and Family Affairs. The directorate comes under the Ministry of Children and Equality. This department is responsible for developing family-life and cohabitation policies as well as legislation affecting children and families. In addition, the department administers existing laws and regulations related to family affairs policy, family law, and gender equality.

The following laws are administrated by this Directorate of Children, Youth and Family Affairs:

Act relating to children and parents (Chap. 14 of the National Insurance Act (related to maternity/paternity benefits and adoption allowances))

Act relating to child benefits

Act relating to cash benefits to the parents of young children

Act relating to marriage

Act relating to the authority of Norwegian public officials to solemnize marriage abroad and of foreign public officials to solemnize marriage in Norway

Act relating to the recognition of divorces and separations obtained abroad

Act relating to registered partnerships

Act relating to family counseling offices

Act relating to equality between the sexes

Act relating to the Equality and Anti-Discrimination Ombud (Regjeringen, 2012)

The Ministry of Children, Equality and Social Inclusion seeks to strengthen consumer rights, interests, and safety; to allow children and young people to grow up safely and to participate in public decision-making processes; to promote economic and social security for families; and to promote full equality of status between men and women. The ministry's activities affect the daily lives of most people in the country, and its decisions and judgments can have a major impact on individuals. Most of the ministry's budget goes toward benefits for families with children. The three main benefit types are called child benefits, maternity/paternity benefits, and cash benefits to the parents of young children. Among social welfare services, the largest budgetary items are for child welfare and protection (Regjeringen, 2012, para. 1).

Family Policies Targeting Marriage

Family Counseling Service is provided by Bufetat, a subordinate agency of the Directorate of Children, Youth and Family Affairs which is responsible for its management. The directorate comes under the Ministry of Children and Equality. Family counseling is offered free of charge to people with different problems with relationships, conflict, and family-life crises. Many people come to the family counseling office for advice and face to face conversations about everyday problems.

The following is a list of services that the Family Counseling Service can provide:

- Couples who wish to work on their relationship; new parents who need to make adjustments and show responsibility and care for the child; and parents, children, and young people struggling to improve relations within the family
- Cross-generational problems
- Working through problems after the breakup between married couples or cohabitants
- Help to improve parental cooperation between ex-partners and challenges with blended or extended families
- · Families struggling with illness and loss

- Support when conflicts arise due to differing family cultures
- Forced marriage and other traditions that may be harmful to health
- Assistance for parents and children when violent behavior is a problem
- Assistance to same-sex couples on the same footing as with other couples (Bufetat, 2012)

In addition to the above services, the agency offers courses and group programs on relevant issues related to family life. These include courses on couple's relationship, courses for first-time parents, and courses for the parents of children with disabilities and groups for children and adults after the breakup of cohabitation and when domestic violence is a problem within the family.

The agency provides mediation in cases of separation and breakup of cohabitation. In Norway, mandatory meditation is required for family breakup situations for married couples with children under the age of 16. In addition, cohabiting parents who are in the process of ending their relationship must also take part in mediation in order to receive increased child benefit. Parents who wish to bring an action before the court in respect of the child's place of residence, contact rights, or parental responsibility must first participate in mediation. The goal of mediation is to assist families in making agreements on parental responsibilities and the situation of the child (Bufetat, 2012).

Family Policies Regarding Child Rearing and Family-Work Balance

The two most important benefits to families with children in Norway are child benefit and the parental leave benefit. The child benefit is paid to families with children under the age of 18 to cover some of the costs of having children. Around 78 % of mothers with preschool children are employed. However, at least half of the mothers with the youngest children work reduced hours. Approximately, 650,000 families receive the child benefit, which brings the total to approximately 1.1 million children per year.

The parental leave benefit is paid to families when a child is born or adopted, and for most it continues until the child is approximately 1 year old. The intention of the parental leave benefit is to make it financially possible for one parent to stay at home with the child during its first year. The cost is budgeted at approximately NOK 15 billion (2011), which translates to United States dollars as \$2,623,853,126.00, which includes the costs of paying the lump-sum maternity benefit. The parental leave benefits provide income for the parents during the child's first year and ensures equality in the parenting. The parents share a period of 47 weeks with parental leave benefit (or 57 weeks with reduced payments). After the first year, parents can opt to receive cash-for-care benefits or place their child in a subsidized day-care facility.

Parental Leave: Maternity Leave, Paternity Leave, and Parental Leave

Norway has both a statutory maternity leave, paternity leave, and parental leave: out of a total of 43 weeks at full wage replacement, the mother has to take 3 weeks of the parental benefit period prior to delivery. She may also opt to take a total of 53 weeks at 80 % of wages. The right to parental leave benefits is based on normal earnings during 6 of the last 10 months before start of the leave period. Parents may share this time period; however, 3 weeks before and 6 weeks after the birth are reserved for the mother for health reasons. With the exception of this period and the father's 10-week quota, the parental leave benefit can be freely divided between the parents. The father's payment will be based on his income. When the father wants to take a part of the parental leave benefit that is not part of the father's quota, he must have the primary care of the child. To ensure this, some demands are set for the mother's activity (repeated above). In the case where the mother works reduced hours before the birth of the child, the father's payment during his leave is reduced accordingly. He might then "condense" the paternity quota, taking a shorter period of leave with

M.L. Baran et al.

full pay (if mother works 75 % of full-time, the father can take 3 weeks of leave at full pay instead of 4 weeks at reduced pay). The mother can stay at home during these 4 weeks (Skevik, 2003). The parental leave payment paid by the government is limited to \$54.200 in 2002. The rest of the parental leave can be taken up by either parent; however, relatively few fathers take more than the 4 weeks. At least 85 % of the fathers do take up the father quota (Lappegård, 2003). This time off for both parents is considered periods of employment. In order to be entitled to parental or adoption benefit, the mother must have been employed and earning a pensionable income for at least 6 of the 10 months immediately prior to the commencement of the benefit period, while the father must have been employed and earning a pensionable income for 6 of the 10 months immediately prior to the commencement of his part of the benefit period. Parental and adoption benefits are calculated on the basis of the income of the parent who takes leave of absence. If the parent's income is six times the National Insurance basic amount, parental or adoption benefit will not cover the excess amount; however, agreement may be reached with the employer to provide full pay. Parents cannot lose their jobs while on maternity/parental leave. If the parent is fired during this period, the employer shall present evidence of reasons for firing unrelated to his/her pregnancy/parental leave (Skevik, 2003).

Lump-Sum Maternity Grant

Mothers who do not have the right to parental leave benefit are entitled to a lump-sum maternity grant. In 2011 it amounted to a grant of approximately \$6,000 NOK or \$1,050.00 USD per child. All mothers who do not qualify for maternity leave are entitled to a *lump-sum payment*, aptly called "one-time allowance." When the mother is granted a lump-sum grant, the father may receive parental or adoption benefits for up to 39 weeks with 80 % pay or 29 weeks with full pay, provided that the mother goes out to work, takes an education, or is ill after the birth or adoption of the child. However, the father is not entitled to parental or adoption benefits while the mother is at home looking after the child. If the mother works part time, adjustments are made to the father's parental, or adoption benefit is reduced in proportion to the reduction in the mother's working hours (Skevik, 2003).

Unpaid Leave and Other Parental Rights

In addition to parental leave, parents have a number of other rights relating to childbirth and adoption. For example, each parent is entitled to up to 1 year's unpaid leave for each child in addition to the parental or adoption benefit period. This leave must be taken in conjunction with statutory leave in connection with pregnancy, birth, adoption, or taking over the care of foster children. Parents may take this leave simultaneously.

Leave to Care for Children, Including Leave to Care for Sick Children

Parents are entitled to leave of absence if the child, or if the person who normally cares for the child, is sick. Each parent has the right to 10 days' leave per year for this purpose. If the parent in question has more than two children, maximum leave is 15 days. Single parents are granted 20 days per year

or 30 if caring for more than two children. If the child is chronically ill, maximum leave is 20 days per parent per year or 40 days for single parents. The age limit for children is 12 years.

Child Benefit

Child benefit, a monthly nontaxable allowance, is the most important social security benefit for families with children under the age of 18. In addition, tax credits or reductions for child-care expenses are available. Anyone living in Norway and supporting children has the right to child benefit. This right applies from the month after the child is born or after taking over the care of an adopted child up to and including the month before the child reaches 18. Ordinary child benefit is granted automatically for newborn children. This means that in most cases, the parents do not have to apply for child benefit after the birth of a child. Child benefit is normally paid to the mother in couples and to the parent in single-parent families (Skevik, 2003). The benefit is payable at specific rates determined by the parliament for the first and second child and for the third and each of the other children. In 2012, families receive approximately \$2,000 annually per child. A special supplement of \$700 per year is payable for children living in the northernmost parts of Norway. Single providers have the right to additional child-care benefits for one child more than they actually have (additional child benefit). This means that a single provider with one child will receive child benefit for two children and so on. A single parent loses the right to additional child benefit if he or she marries, has a child with a cohabitant, or has lived in a marriage-like relationship in a joint household for at least 12 of the last 18 months.

Cash Benefits and Taxes for Families

Families with children can deduct for documented expenses toward child care for children under the age of 12. The current rates are NK \$4,500 for one child and NK \$5,000 which translates to \$787.16 and \$874.62, respectively, (USD) for two or more children, and is available to single parents and couples with children under 12.

Cash-for-Care Benefits

As of August 1, 2012, this benefit is an alternative to using a day-care center that receives no state grant for 1-year-olds for a duration of 11 months (previously 2-year-olds were also included in this benefit). The right to the cash benefit is therefore connected to whether the child has a place in a day-care center. It is also possible to combine some time in day-care centers with a reduced rate cash benefit.

Cash benefit payments amounted to approximately \$500 per month in 2011. This benefit is paid without any income or means testing and is not taxed. If the child spends less than 33 h a week, the family is entitled to a reduced benefit. The cash-for-care benefit is payable for each child without means or needs testing, and it is tax-free. The underlying logic is that parents who use state-sponsored child care "receive" a public grant, while those who use other forms of child care lose out. In principle, therefore, the cash-for-care benefit should be equal to the subsidy given per child in state-sponsored nurseries. The main reason the benefit is not paid for the first year is that this normally coincides with the parental leave and parents are not entitled to receive cash benefits while they are receiving full parental/adoption benefits (Skevik, 2003).

88 M.L. Baran et al.

Family Policy Implementation and Assessment

The Norwegian government has actively sought to influence gender equality in the home and in the workplace. In the 1980s, the Labor Party was in power for most of the decade, and Gro Harlem Brundtland was elected the first female prime minister in Norway in 1981 and again in 1986 after losing the election in 1982. In 1986, the term "women's government" was coined since 44 % of the ministers were women. In her third term (1990), a total of 47 ministers were women, and family policy and gender equality were issues of priority for the government as both public child-care services and parental leave policies were rapidly expanded during this period (Skevik, 2003).

The biggest change during this time was the move away from the traditional breadwinner model (males) and caretaker role (women) to a dual breadwinner model (Skrede, 1999). The government hence played an active role in attempting to change the behavior/cultural norms of the population. The ideal family practice promoted by Norwegian policymakers, it can be argued, is the dual earner/dual career model: "an interesting element of Norwegian policies is that it has put political fatherhood on the agenda... the caring father, and the domestication of men, is the new issue of the 1990s" (Ellingsæter, 1999, p. 45).

The Norwegian welfare state has been a leader in providing women opportunities to balance work and home life through by actively advancing policies that ensure women's position in the employment sector and by providing attractive benefits that offers them opportunities to still be present in their child's early years. However, OECD research show that while nearly 90 % of the males work full-time, only about 50 % of the mothers with preschool children work full-time (Kornstad & Thoresen, 2006).

One initiative to affect this is through the father leave policy which offers new fathers the ability to stay at home with full benefits for a total of 10 weeks to care for the newborn child. This quota was recently increased from 4 weeks, and although this paternity is optional, it is an example of a political initiative to influence cultural and social norms in the country as it may affect the relationships between the parents, between employers and employees for both parents, and also the relationship between the child and the father (Johansen, 2010). Johansen noted in her study that the policy makes the new parents consider the option to share the remaining parental leave more equally, but also stated that her findings show that it is the mothers who still provide the majority of the care for newborns. While the results of the family policy initiative might not have influenced parents decision making regarding shared responsibilities to a great extent that politicians had hoped for, Johansen does conclude in her study that the paternal leave policy is a highly successful initiative as a large percentage of new fathers utilize the 10 weeks reserved for fathers.

The availability of child-care options has a direct influence on the mother's decision to partake in the labor market (Kornstad & Thoresen, 2006). The cash-for-care benefit introduced in 1998 was an initiative to reduce the long wait lists experienced at many public day-care centers in Norway. Families not able to find a spot for their child in subsidized public day-care centers now received money to consider private caretakers.

Norway can be seen as a pioneer when it comes to codifying children's rights (Therborn, 1993). Norway and Sweden were the first countries to introduce explicit legal formulations of equal parental obligations and of the best interest of the child as a paramount principle, for instance, in custody legislation. Further, Norway was the first country to establish equality between children of married and non-married parents with regard to paternity and inheritance (1915). In addition, any forms of corporate punishment, including spanking, even by parents, is illegal in Norway. There is a special Ombudsman for Children who oversees children's rights.

Conclusions

Norway is a social welfare nation to be admired by most nations in the world for its policies directed at the general well-being of children and families. In Norway, a universal right to paid leave in connection with birth is granted by the National Insurance Act and dates back as far as 1956. The two most important regulations impacting families are the parental leave act and the subsidized child-care provisions allowing parents to either place their child in a publically funded child-care center or a cash benefit toward to the cost of private child care. In addition, mothers for children between 1 and 2 years of age who want to extend their time at home are allowed a monthly cash benefit. The benefits, in addition to secure employment benefits, no doubt have resulted in Norwegian women's active participation in the labor force. In 2008, 70.7 % of women participated in the labor force, compared to men's participation rate of 77.0 % (International Labor Organization, 2012). In 2012, women held 40.9 % of all board director seats in public limited companies. In 2011, Norway was ranked 2nd in the Global Gender Gap Index at 84.4 % after Iceland. In addition the wage equality for similar work done by women versus men was 75 % (Hausmann et al., 2011). The Global Gender Gap Index is measured by the World Economic Forum. It ranks 135 countries on the size of their gender gap between women and men in four areas: economic participation and opportunity, educational attainment, political empowerment, and health and survival (Catalyst, 2012). The country can be viewed as a forerunner and an excellent example of what constitutes superb family politics with its relatively high birth rates, gender equality, and equal gender participation in the labor force. This is the result of decades of sustained governmental pressure in legislation and policy to shape these issues and national culture.

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90 M.L. Baran et al.

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Chapter 7

Families and Family Policies in Sweden

Michael B. Wells and Disa Bergnehr

Abstract Sweden is known as a social welfare state, whereby the people who reside in Sweden are entitled to certain public benefits at little or no cost to the individual. Over the past century, Sweden has reshaped its culture, growing from one of the poorest nations in Europe to a flourishing country that others emulate, especially with respect to their family policies. Sweden has developed several foundational family policies that have helped to encourage equality, while establishing a sense of individuality. Sweden has created similar rights for cohabiters/married couples, as well as for same-sex/opposite-sex couples. Parents receive a generous parental leave package, flexible employment choices, and there is a low gender wage gap, while children receive high-quality childcare, free health care, free dental care, free mental health services, and a substantial child welfare program. Swedish family policies encourage both parents to work and to help each other with household and childcare tasks. Despite the public benefits that Sweden provides for mothers, fathers, and children, there is still a need for further improvements regarding policies on domestic violence, poverty, and child welfare. Assessments of Sweden's family policies are discussed.

Keywords Sweden • Family policy • Parental leave • Marriage • Family-work balance • Child welfare • Families at risk

Introduction

Sweden, a Northern European country with a population of 9.5 million, is part of the Scandinavian Peninsula and borders Norway to the west, Finland to the east and connects to Denmark in the south via the bridge over Öresund. Sweden stretches far north above the Arctic Circle, but the majority of its inhabitants reside in the central and southern parts of the country, within or close to urban areas.

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Sweden has 1.1 million families with children between 0 and 17 years old (URL 1), and around one fifth of all children are of foreign origin (URL 2). People living in Sweden tend to have a long lifespan, with the average life expectancy being 81 years old. The gross domestic product (GDP) per capita is around \$34,400 USD (URL 3), and Sweden's unemployment rate is around 8 % (URL 4). Sweden spends 20 % of its GDP on welfare services that are either free or inexpensive for the individual, thus adding to the individual's disposable income (Statistics Sweden, 2012). During the past decade, families have increased their disposable income, and today, 41 % of children live in families with high-bracket incomes (Barnombudsmannen, 2010). However, monetary equality has changed in Sweden, as there are increasing gaps between different household structures (Fritzell, Gähler, & Nermo, 2007; Rädda Barnen, 2012).

One of the main reasons why more children are growing up in higher income families is because most parents in Sweden work and are well established in the labor market prior to having children. In fact, women with permanent employment are 20 % more likely to become parents compared to those who are either temporarily employed or unemployed, and very few become parents before the age of 20 (Barnombudsmannen, 2010; Statistics Sweden, 2002). The present mean age for first-time mothers is 29 and for fathers is 31 (Barnombudsmannen), but Sweden enjoys one of the highest fertility rates among industrialized countries, with 1.9 children per woman (URL 3). With both parents connected to the labor market, most parents go back to work after having children.

The Swedish welfare state is part of what can be called a social-democratic model, which is characterized by having universal benefits and emphasizes equality for all (e.g., gender, economic classes, racial/ethnic groups, and children) (Esping-Andersen, 1990; Estes, 2011). The current welfare system was initiated in the 1930s but took off after World War II with the Social Democrats leading the government for the past 70 years, where they enlarged the welfare state, while embracing capitalism to stimulate the taxes and revenues needed to fund the welfare programs. Using other countries as models, such as the USA, Sweden adapted new policies and streamlined them not only to be culturally relevant but also to function more easily. By doing so, people in Sweden prospered, living healthier lives, attending higher quality schools, and increasing their disposable income due to both genders participating in the paid labor force, with the state providing available high-quality childcare (Sandin, 2012).

This chapter starts with highlighting Sweden's sociohistoric, economic, and political contexts. Then we explore family characteristics and family policies under three themes: family policies targeting marriage, the family-work balance, and policies supporting families at risk. The ways in which Swedish family policies are implemented and assessed are embedded within the three policy themes so that a fuller picture emerges on the importance and effect those policies have on those living in Sweden. The chapter ends with a discussion about Sweden's family policies, recommendations for future family policy research, and a short conclusion.⁶

¹ Foreign origins meaning either the child or both of the child's parents were born in another country.

² Among the OECD countries, only Denmark spends more on individual public consumption: 22 %. The USA spends 7 % (Statistics Sweden, 2012).

³A family with "high-bracket income" has the means to support another family while maintaining their living standard at a comparatively high level (Barnombudsmannen, 2010).

⁴ Around 86 % of women become mothers in Sweden, which is higher than many other European countries (Sobotka, 2004).

⁵Right-wing governments led the country from 1976 to 1982, from 1991 to 1994, and from 2006 to the present. During World War II, a government consisting of left- and right-wing political parties was in charge.

⁶ Naturally, this chapter does not aim to be comprehensive, as entire books (i.e., see Lundqvist, 2011) have been written about Swedish family policy and even those books leave information out (Haas, 2012). However, it is the aim of this chapter to provide a coherent basic understanding of Sweden's family policies and their influences.

Historical, Socioeconomic, and Political Context

In the nineteenth century, Sweden was one of the poorest nations in Europe, and a large proportion of the population sought a better future in North America. Emigration, high infant mortality, and decreasing fertility rates alarmed the ruling classes, and several political reforms were implemented and laws passed to secure the population stock. For instance, a law was passed in 1900 that prohibited women factory workers from returning to work earlier than 4 weeks after childbirth, with the aim being to provide some time off for the mother, as well as to help decrease infant mortality by trying to increase breastfeeding. The contraceptive law of 1910 prohibited sales of and information about contraceptives, but in 1938, the Swedish government repealed the law because it was not effective. Fertility rates continued to decline, and in the 1930s, Sweden had the lowest fertility rates in the world – a problem that came to engage all political parties, intellectuals, and debaters (Hatje, 1974; Hoem & Hoem, 1997). Other laws still in effect today from the 1930s include the prohibition of dismissing employed women due to marriage, pregnancy, and childbirth and free childbirth services and health care for mothers and children.

The nation prospered after World War II. Sweden grew from one of the poorest countries in Europe to a strong, vibrant nation with its commodities, industries, and infrastructure, all enabling the production and sales of necessities to a war-struck Europe (Therborn, 2004). Prewar plans to foster birth rates and public health through universal reforms that supported childbearing and families with dependent children were expanded in the postwar era of affluence, constituting the foundation of the Swedish welfare state and contemporary family policies. During that time period, several reforms were introduced that are still in effect today – reforms intended to facilitate childbearing, combining paid work with caring for a child to promote public health through free school meals and a general child allowance (1940s), 3 months of paid maternity leave for all mothers (1955) with remuneration based on the mother's previous earnings (from 1963), the introduction of the parental leave program (1970s), and the creation of available and high-quality childcare facilities at a reasonable cost for working parents (1970s and 1980s) (Björnberg, 2004; Hatje, 1974; Ohlander, 1994). These reforms laid the foundation for and are part of current family policies.

Historically, Sweden has led the way for many countries regarding family policy issues. Sweden has a history of passing reforms that were radical in their day, such as the abortion law of the mid-1970s that granted pregnant women the right to abortion up to the 18th week, the divorce law of 1974 that permitted divorce without a particular reason and without mutual consent, changing parental leave insurance in 1974, granting fathers the same rights as mothers to remuneration for leave from work to care for a child, and completely banning any person from using corporal punishment (1979). More recently, laws allowing homosexuals to adopt and receive insemination were passed as well as legalizing same-sex marriage.

State of Research on Families

Sweden greatly invests in family research, and politicians use that research to inform their policy decisions. In 2009, Sweden spent 3.59 % of their GDP on research and development, making it second only to Finland in spending money on research among the Organisation for Economic Co-operation and Development (OECD) countries (URL 5).⁷ Family policy research is conducted in multiple arenas,

⁷ In 2009, Finland spent 4 % of its GDP on research and development, while the USA spent 2.8 %.

such as in the social sciences, medicine, and the public health fields. In doing so, the Swedish government puts forth effort in promoting and preventing children's and parents' health and well-being, while at the same time broadening the public's knowledge about the topic.

Family Policies Targeting Marriage

Swedish Family Law is a composite of three groups of laws, which are based around the Code relating to Parents, Guardians, and Children [Föräldrabalken], the Marriage Code [Äktenskapsbalk], and the Joint Homes Act [Lag om sambors gemensamma hem 1987]. The Marriage Code supports the rights of couples who are married, and the Joint Homes Act supports the rights of cohabiters (Björnberg, 2001). These codes are quite similar as marriage and cohabiting unions are widely accepted in Sweden (Duvander, 1999). Whether from married or cohabiting families, about three out of four children 0–18 years old grow up with both original (biological or adoptive) parents (URL 1). Of those who live together, Sweden is about evenly split between those who marry and those who cohabit, making it the country with the highest percentage of cohabiting unions (Kiernan, 2004). Many Swedish couples will cohabit, have their first child, and then marry, in that order (Björnberg, 2001; Duvander 1999). For example, according to Statistics Sweden in 2011, while the average age for marriage is 33.1 for women and 35.6 for men (URL 6), the average age of having their first child is 28.9 for mothers and 31.5 for fathers (URL 7). Despite Sweden's acceptance of cohabiting unions, marriages last longer (Duvander, 2008). In fact, of those couples with children, cohabiting couples are almost twice as likely to separate/divorce as married couples (URL 8).

If parents do divorce or separate, Swedish social services try to engage the parents in discussing custody and contact issues. For the most part, children who reside primarily with one parent meet regularly with the nonresident parent, encouraging divorced parents to share custody and childcare tasks, thereby creating a divorced-nuclear family (Barnombudsmannen, 2010; Eriksson, 2002; URL 9). Although this is a newer phenomenon, the sharing of parental responsibilities is made easier for most couples since 85 % of all separated/divorced parents live within 50 km (approximately 31 miles) from the nonresident parent. Of children with divorced or separated parents, two-thirds reside mainly with the mother, around one-fifth primarily with the father, and one-fifth spend an equal amount of time living with their mother and father (Barnombudsmannen). Five to eight percent of Swedish children live in families consisting of their biological/adoptive parents and a stepfather or stepmother (URL 1).

Same-sex marriages have been legal in Sweden for several years, but as of May 1, 2009, same-sex couples were granted the right to marry either with the civil authorities or in a religious institution (i.e., church), so long as the religious leader agreed to marry the couple. At the end of 2011, around 4,000 women and 3,400 men were registered as official partners in Sweden, while around 2,500 women and 1,700 men were in same-sex marriages (URL 10). Around 1,300 children reside in homosexual families (URL 1). Same-sex marriage is accepted by the mainstream culture, although LGBT individuals may still face adversity from varying fringe groups.

⁸ For parents with dependent children, there is a trial period of 6 months after first filing for divorce. For the divorce to go through, one of the parties has to send a written confirmation to the authorities six months after the initial filing.

Domestic Violence

Domestic violence was historically viewed as an unseen issue that researchers knew little about, but starting in the early 1980s, Sweden saw a boom of information and help for women who had experienced domestic violence. Women seeking refuge could find sanctuary in the shelters that sprang up throughout Sweden, while newspapers highlighted the dramatic impact of domestic violence (Peter, 2006). In 1993, the Ministry of Health and Social Affairs created a Government Commission to address the domestic violence issue (Nylen & Heimer, 2000). A year after its creation, the Commission took a reactive approach to the current problem by recommending and securing the funds for the National Center for Battered and Raped Women which provided medical and social services, as well as police protection and legal support to battered women (Peter, 2006). Swedish family policy acknowledges the gendered bias of domestic abuse, as primarily women are victims of abuse (Eriksson, 2002).

In 1997–1998, a new proactive bill was passed called the "Violence Against Women" bill, which brought about a new penal code offense called the "gross violation of a woman's integrity," reflecting the state's commitment to gender equality. This meant that in addition to charging any accused offender with any domestic charge, such as assault, coercion, sexual molestation, or sexual exploitation, the courts could also charge the accused with a gross violation of a woman's integrity, thus not only protecting the woman physically, but also protecting her individual integrity. Attacking from these fronts, the Commission successfully made available needed funded agencies to help women reestablish themselves and move forward with their lives, while publically condemning domestic violence (Peter, 2006). During this same time, the World Health Organization [WHO] (1997) declared that violence against women is a health and human rights issue that needs to be dealt with decisively. Sweden is fighting against domestic violence (Edin & Högberg, 2002), viewing violence against women as a social problem (Eriksson, 2002) that needs to be tackled from multiple arenas so that each person's health and human rights are fully protected (Peter, 2006).

Around the world, on average, one in four women has been sexually or physically abused by a man (Edin & Högberg, 2002). In a survey on around 15,000 people in Sweden, during the course of 1 year, around 2 % of the women and 3 % of men said that they had been physically abused one or more times. Two-thirds of the women said they knew the abuser, while a little more than a quarter of the men stated they knew the abuser. Not surprisingly then, more women said they had been abused in their home (31 % compared to 12 % of the men) (Brottsförebyggande rådet, 2011).

Family Policies Regarding Child Rearing and Family-Work Balance

Swedish family policies aim to support individuals rather than families, so as to create a more gender-equal society; therefore, women are encouraged to seek employment, while men are encouraged to contribute their fair share of housework (Bergman & Hobson, 2002). In Sweden, women and men participate in the paid labor force in near equal numbers (Statistics Sweden, 2011), and the wage gap is among the lowest in the world (Peter, 2006). In fact, Sweden strives for its citizens to be fully employed so that the individual is financially self-reliant (Haas, 1996). Additionally, women

⁹ However, other studies looking at people's lifetime abuse rates show much higher numbers: for example, in a study on 2,755 separated or divorced women in Sweden, 35 % stated that they at some point were abused either through physical violence, threatening, or sexual violence (Lundgren et al., 2002).

¹⁰ Women tend to report abuse less often than men because more often than men, they know their abuser (Brottsförebyggande rådet, 2011).

constitute a majority of those enrolled in higher education (The Swedish National Agency for Higher Education and Statistics Sweden, 2007), with around half of all government seats being occupied by women (Peter, 2006). Over the past 20 years, women have decreased the time they spend on household chores and caring for children and relatives, and now, they spend more time on work in the paid labor market. Alternatively, men's time on paid work has decreased, and their time spent on unpaid work has increased slightly. In total, although both men and women work and help with household tasks, women spend approximately 45 min more per day on unpaid household duties (Statistics Sweden, 2011).

To help create a more equal division of labor, the Swedish government has incentivized the sharing of parental roles (Daly, 2011). For example, in order to help reduce the work-family conflict, Sweden has provided its citizens with a generous parental leave package, as well as providing subsidized high-quality childcare (Stier, Lewin-Epstein, & Braun, 2012). Moreover, many businesses in Sweden have flexible work schedules, allow people to work from home, and do not typically schedule meetings in the early mornings and late afternoons so that parents can tend to their family, if needed. In fact, parents overwhelmingly stated that if they had to tend to family affairs, then it was not a problem to refuse working evenings, weekends, or overtime, and many said they were not even asked to do so if the employer knew they had small children (Hobson, Fahlén, & Takács, 2011). By implementing these family policies that affect both public and private lives, Sweden has developed a welfare model where parents can better manage their career and their family (Andersson, 2008).

Parental Leave

Sweden has one of the most comprehensive parental leave programs in the world (Haas, 1996; Ray, Gornick, & Schmitt, 2010). Wanting to create a gender-equal society, expand individual freedoms, and balance the family-work conundrum for both mothers and fathers (Bygren & Duvander, 2006; Thomas & Hildingsson, 2009), parental leave was introduced in 1974. Sweden then became the first country in the world to allow both parents to take time off of work to care for their child, promoting men to increase their involvement in childcare and mothers to work in the paid labor market. Initially, the leave comprised of 6 months, but it has been augmented and extended further up to the present. From 1975 onwards, the parental leave days and remuneration could be used part time, thus enabling parents (who can afford it) to extend their period of leave. Parental leave is tied to previous earnings, but offers a low flat rate for those who did not work prior to having the child¹¹ (Bergnehr, 2008; Wells & Sarkadi, 2012). Parental leave permits the parents to take a maximum of 480 days off from work. The remuneration is tied to their previous earnings (the salary) for the first 390 days of leave and consists of a low flat rate for the last 90 days (in total for both parents). Parents are eligible to receive 80 % of their salary if they have either worked for 6 months prior to their child's birth or for 12 full months over the past 2 years¹² (The Swedish Social Insurance Agency, 2012). A person that has been away from work due to parental leave has the right to return either to their same or a comparable position, while receiving the same salary.

¹¹ At the present, the low flat rate for parents who did not work prior to having a child is 5,400 SEK (approx. \$840 USD) per month before tax. However, the government has proposed a raise to 6,750 SEK (approx. \$1,050 USD) per month, being introduced in January 2013.

¹²There is a cap of 440,000 SEK per year (approx. \$65,170 USD). Therefore, people earning a higher yearly salary than this will only be compensated during their parental leave at 80 % of this amount (The Swedish Social Insurance Agency, 2012). However, due to agreements between many unions and employers, the employers add remunerations to the insurance, which can give parents on leave more than 80% of their salary.

Swedish parental leave is particularly flexible. During the first 2 weeks after the birth of their child, both parents are entitled to parental leave so that they can help manage and be there for their new child (Fägerskiöld, 2008). After the first 2 weeks, only one parent may utilize parental leave at a time, ¹³ but they are entitled to use their parental days until the child's first year at school. ¹⁴ Additionally, parental leave can be used in different increments such as taking off of work in full, three-quarter, half, one-quarter, or one-eighth of a day (The Swedish Social Insurance Agency, 2012). Consequently, parents can choose who uses parental leave and for how long they use it for. However, 2 months out of the 390 days of the higher remuneration cannot be passed on to the other parent. These months were added to the insurance in two steps, in 1995 and in 2002, and are informally referred to as the "daddy months" since the political aim was to increase the fathers' parental leave take-up.

Today Swedish fathers use 23 % of the parental leave days. Fathers who have a higher education take more parental leave than fathers with a lower education and vice versa for mothers (The Social Insurance Agency, 2011a). Although the fathers' take-up could be seen as rather high compared with other countries, the discussion in Sweden continues on how to achieve a more even division between mothers and fathers. In 2008, the gender equality bonus was introduced, aimed as an incentive for parents to divide the insurance more equally. For the first 390 days of parental leave, parents can receive a 50 SEK (approx. \$7.40 USD) bonus for every parental leave day they use that is over the two nontransferable months (the "daddy days") (The Swedish Social Insurance Agency, 2012). ¹⁵ However, at the present, few parents have claimed the bonus, and it appears to have had a minimal impact on fathers taking more parental leave (Duvander & Johansson, 2012).

Work-Family Balance

For the past four decades Swedish family policies have actively promoted the dual-income, dual-carer model (Allard, Haas, & Hwang, 2011). Sweden has promoted this model by encouraging gender equality through education and paid work (i.e. financial independence), while promoting both parents to share household tasks and child rearing responsibilities. In part, the political goal has been realized – women attend higher education to the same extent as men and work almost as many hours in the paid labor market. Of parents who have children under the age of 18, 91 % of fathers and 81 % of mothers are employed (Barnombudsmannen, 2010), and women have some of the lowest wage gaps in the world, receiving 94 cents on the dollar compared to men, after controlling for occupation, education, age, and working hours (Ekberg, 2008). In 1979, the right for parents with preschool children to decrease their work by 25 % was introduced and is still in effect. This reform helps parents to balance the duties of everyday life, that is, paid work and caring for children. About half of the mothers with preschool children decrease their working hours in paid labor due to this reform, while only a small percentage of men do (Statistics Sweden, 2009); therefore, we can still see a gender difference despite the family policies. But Swedish family policies do support families in combining

¹³ When the child is under a year old, parents may take "double days" up to 30 days, where both parents are using parental leave at the same time. However, once the child is a year or more, only one parent can use parental leave at a time (The Swedish Social Insurance Agency, 2012).

¹⁴ As of January 1, 2013, parents have to use 80 % of their parental leave days by the time the child is four years old (or they lose those days) but are permitted to use the remaining 20 % until the child is 12 years old.

¹⁵ For example, if one parent took 160 days of parental leave and then the other parent took 70 days of leave, that family would receive a 50 SEK per day bonus for 10 days (bonus = 500 SEK), as the first 60 days were guaranteed to that parent to begin with. Since you can only receive the bonus for 390 days of parental leave, if all days were used and split completely evenly (195 days per parent), the maximum bonus would be (195 days – 60 guaranteed parental leave days) * 50 SEK = a bonus of 6,750 SEK, (approx. \$1,050 USD).

paid work and parenthood. For instance, the parental leave insurance, the right to work part time when children are young, the right for parents to take time off from work to care for sick children with governmental remunerations compensating loss of salary, and providing subsidized and available childcare are all ways family policies support the work-family balance¹⁶ (Andersson, 2008; Allard et al., 2011).

Sweden offers subsidized childcare when children are between 1 and 6 years old and free public schooling, including university studies. Not only are childcare programs subsidized, but each child is guaranteed a spot in a childcare setting (Daly, 2011). If parents do not want to use childcare, municipalities can offer a child home care allowance that entitles one parent to stay home with their preschool child. If families take the child home care allowance, the family would receive a tax-exempt payment of up to approximately \$387 USD per month to provide childcare for their child. However, very few parents have done this because the money they receive does not compete with their salary from full-time employment. Also, this reform has been criticized for encouraging mostly the unemployed and low-paid women to stay at home to care for their household and children. This runs counter to the gender equality policies that promote the participation of mothers in the paid labor market (Duvander, 2008).

Children's Rights

Several countries in Western Europe, including Sweden, view children as their own person with their own rights (Daly, 2011). In 1979, Sweden became the first country in the world to completely ban corporal punishment. Known as the *aga-law*, the ban aimed and later achieved its goals of reducing the use of physical punishment towards children, offering parents and professionals a set of acceptable parenting practices, and detecting child abuse more quickly (Durrant, 1999). To further help ensure children's rights, the Swedish government has created a law entitled the Code relating to Parents, Guardians, and Children (Föräldrabalken) (1983), which states in Chap. 6 paragraph 1 that "children are entitled to care, security, and a good upbringing. Children are to be treated with respect for their person and individuality and may not be subjected to physical punishment or any other injurious or humiliating treatment." Children's policies in Sweden are aimed at creating equality between children by ensuring that they receive proper health care, adequate housing, good parenting, suitable education, and assistance if they have a special need (Haas, 1996).

Children living in Sweden have a right to receive a strong education throughout their lives. From the year that the child turns three, children receive up to 15 hours of free early childhood education (förskola) per week (URL 11). Moreover, Sweden's childcare programs are said to be of high quality, due in part to considerable policy efforts over the last 40 years (Andersson, 2008; Andersson, Duvander, & Hank, 2004). In 2010, with these policies in place, 83 % of children between 1 and 5 years old were enrolled in childcare in Sweden (almost 95 % of all 4–5 years were enrolled) (URL 12). These Swedish policies not only make it possible for all young children to receive a high-quality early childhood education, but also serve as a backdrop to Sweden's social-democratic welfare system by promoting the family's fertility rates, as well as the dual-earner model and therefore encouraging

¹⁶ The municipality receives government funding to keep the childcare fees down. The fees to the families are wage-/income-related, but the state directives/regulations are that a family/household should never pay more than 1,260 SEK/month (\$188 USD/month) for the first child in childcare, 840 SEK/month (\$125 USD/month) for the second child, and 420 SEK/month (\$63 USD/month) for the third childcare and never more than 3 % of the household income for the first child, 2 % for the second child, and 1 % for the third child. The fees for children in after-school childcare are lower. The maximum fee the municipality can charge is 2 % of the household's income and 840 SEK/month (\$120 USD/month) for the first child and 1 % and 420 SEK/month (\$63 USD/month) for the second and the third child (URL 13).

gender equality (Andersson). In fact, in the United Nations Children's Fund of 2008, Sweden ranked first in early childhood education and care (Bremberg, 2009). Additionally, Sweden also has high rates of youth independence, where, for instance, affordable and available public housing and free higher education have enabled an early departure from the parental home (Therborn, 2004). Moreover, parents are obliged to financially provide for their child up to the age of 18, or 21 if they are still in high school.¹⁷

Swedish children's rights expand into divorce as well, as these family policies state that the courts must do what is in the best interest of the child and that the child's views should be considered (i.e., for living arrangements). Joint custody is the current interpretation of what is typically considered in the child's best interest. The Code relating to Parents, Guardians, and Children adheres to divorced parental collaboration, aiming to create a divorced-nuclear family paradigm (Eriksson, 2002). However, failure to include the child's views is shown in investigations of matters concerning custody and the child's living arrangements after divorce/separation (Dahlstrand, 2004; Eriksson & Näsman, 2008; Rejmer, 2003). In 2006, the child's right to express his or her views was emphasized in the Code relating to Parents, Guardians, and Children, but there is no indication of an increase in cases where children are allowed to state their views in family law proceedings (Röbäck, 2011). In addition, many children with divorced parents appear to face recurrent conflicts between the parents, which in some cases leads to the child and residential parent (most often the mother) not receiving the entitled child support by the nonresidential parent (i.e., the father) (The Social Insurance Agency, 2011b).

Family Policies Supporting Families at Risk

During the past century, Swedish family policies have been centered on universal health-promoting services, the goal of which is to decrease social stratification and to promote the prosperity of each individual and the nation as a whole. A general child allowance, wage-related childcare fees, free education, free health and dental care for children below 20 years of age, free healthcare check-ups at child health centers, free counselling for parents, student health services including vaccinations for school children, free parental cooperation talks offered by the Social Services in case of divorce or separation, and free child and adolescent psychiatry are all important parts of the Swedish welfare support system for families. In addition, families with special needs can receive aid for in-home care of children or adult family members who suffer from long-term illnesses as well as handicap benefits and disability pensions. Sweden's family policies also protect children if their parent's die before they turn 18 years old by providing them with a children's pension (Lindquist & Lindquist, 2012). If a child's parent dies, then the child is guaranteed a minimum of 1,467 SEK/month (approx. \$200 USD), which consists of a children's pension based on the perished parent's pension (i.e., previous earnings and/or additional governmental support for children who receive a very low pension) (The Swedish Pensions Agency, 2012).

¹⁷ Swedish high school ends at age 19 for most students.

¹⁸ All children up to the age of 16 receive the general child allowance of 1,050 SEK/month, around \$145 USD, tax free. This is done so as to help even out the financial inequalities between those with children and those without children. In addition, parents with two or more children receive a large family supplement, the amount depending on the number of children. A family with two children receives 2,250 SEK per month (approx. \$330 USD), while a family with three children receives in total 3,754 SEK/month (approx. \$517 USD), with four children 5,814 SEK/month (approx. \$800 USD), and with five children 8,114 SEK/month (approx. \$1,118 USD). When the child turns 16, the child allowance is transferred to the student allowance for children attending high school (The Swedish Social Insurance Agency, 2010).

¹⁹Many children receive more than this amount, as it is based on the parents' pension.

Children and Poverty

Physical and mental well-being among Swedish children and adults are high by international comparisons (Lindgren & Lindblad, 2010; Save the Children, 2010). Events such as family dissolution, unemployment, and death may push families into poverty, but for most Swedish families, financial hardship is temporary (Lindquist & Lindquist, 2012). However, close to 10 % of all children in Sweden live in underprivileged areas, characterized by having a low mean income, high unemployment rate, and low parental educational levels (Statistics Sweden, 2007). The majority of the disadvantaged families are comprised of single mothers and/or are of foreign origin (Rädda Barnen, 2012). For example, among children residing with single parents, 28 % live in poverty compared to 9 % of children living with two parents. Among children of foreign origin, 32 % live in families with low-bracket incomes (Rädda Barnen). These percents are important since those family structures are overly represented among the chronically poor (Lindquist & Lindquist, 2012).

Single mothers and immigrant families also have a higher propensity to experience health issues compared to coupled mothers and nuclear families of Swedish origin (Fritzell, Ringbäck Weitoft, Fritzell, & Burström, 2007; Ringbäck Weitoft, 2003; Ringbäck Weitoft, Haglund, & Rosen, 2000; Ringbäck Weitoft, Haglund, Hjern, & Rosen, 2003). In fact, about 20 % of single mothers depend on social benefits (Stranz & Wiklund, 2011); therefore, it may not be hard to understand that besides the elderly, the parents with dependent children (single parents in particular) rely the most heavily on Sweden's welfare system (Statistics Sweden, 2012). However, Swedish family policies have resulted in higher rates of employed mothers and thus lower levels of poverty among single mothers than in, for example, Great Britain (Burström et al., 2010; Fritzell et al., 2007; Statistics Sweden, 2012). Still, for many single mothers, financial pressure is high.

One corrective measure to help children rise out of poverty is to provide them with a good education, as successful school achievement tends to affect well-being positively (Gustafsson et al., 2010). However, Sweden, over the past 15 years, has witnessed an increase in the proportion of children who do not reach the established educational goals (Swedish National Agency for Education, 2009). This is especially true for children residing and attending schools in disadvantaged areas, where they experience a 50 % higher risk of school failure, as compared to children from higher socioeconomic status areas (Statistics Sweden, 2007). Additionally, children in out-of-home care, such as institutional or foster care, are also particularly vulnerable; they have high risks of physical and mental health problems and school failure (The National Board of Health and Welfare, 2012; The National Board of Health and Welfare & Swedish National Institute of Public Health, 2012).

Single-Parent Families

In the beginning of the twentieth century, laws were passed to secure the rights and living conditions of children born out of wedlock and children in residential care. Local authorities were obliged to establish a children's welfare board, with child welfare officers who inspected foster homes and secured the rights of children born out of wedlock (Bergman, 2011). For children of unwed mothers, the welfare officer was made responsible for establishing who the father was, seeing to it that the father paid the mother child support, and ensuring that the mother took sufficient care of the child. In 1938, a law was passed that gave single mothers financial support from the state in case the father did not pay (Bergman, 2003). In practice, this system is still in effect. Current policies state that children who live only or most of the time with one parent are entitled to child support from the nonresident parent (most often the father). In case child support is not paid, the resident parent is entitled to maintenance support paid by the state: 1,273 SEK/month (approximately \$170 USD) (The Swedish Social Insurance Agency, 2008). The standard for maintenance support is comparatively low, and the state

has neglected to raise the amount over the years. However, the general child allowance, housing allowance for families with low disposable income, and other universal benefits (such as free health and dental care for children, free education, wage-related and subsidized childcare) add to the financial support the state provides – support that is of great importance to families with dependent children and single parents in particular.

Child Welfare

The Swedish child welfare system (i.e., the Social Services), is obliged to protect children from harm and abuse and to support families. The Social Services Act (SoL) and the Care of Young Persons (Special Provisions) Act (LVU) regulate these services, including residential and foster care and non-institutional measures, but the local authorities are in charge of deciding which services and measures to prioritize (Östberg, 2010). As previously mentioned, children in out-of-home care are a vulnerable group with high risks of failure at school, health problems as children and in adult life, criminality, and dependence on social benefits (The National Board of Health and Welfare, 2012; Sundell, Egelund, Andrée Löfholm, & Kaunitz, 2007).

The number of children in care outside the parental home declined steadily during the twentieth century. At the beginning of the century, mainly young children lived in foster or residential care, but this has changed, and today, mostly older children are in out-of-home care (Bergman, 2011). At present, around 25,000 children, 1 % of the 0- to 20-year-olds, lives in out-of-home care, for longer or shorter periods, with foster care being the most common. Besides out-of-home care, around 28,000 children are subjects of noninstitutional care provided by the Social Services. Such care comprises structured care programs, personal support, contact person/family, and treatment (The National Board of Health and Welfare, 2011).

Institutional and noninstitutional care under the Social Services Act and Care of Young Persons Act are interventions that follow report and investigation. Most children are subjected to an investigation after a report is filed by a professional (such as teacher, police, social worker) or other person (such as family member, relative, neighbor). Reported and investigated children often live with single parents (i.e., mothers) and/or in households with low disposable income (Östberg, 2010; Sundell et al., 2007). The reason for reporting a child to the Social Services may concern a young person's behavior (e.g., antisocial, criminality, self-harm) and/or suspicion of neglect and/or abuse in the home (Sundell et al.,).

But a report does not necessarily lead to an investigation—on the contrary, many do not. A recent study on child welfare assessments and decisions shows that an investigation was more likely to be undertaken if the child was a girl and in cases where the report came from a professional. Parental incapacity to care for the child (i.e., parental antisocial behavior, drug or alcohol addiction, and recurring conflicts) was not a strong reason for initiating an investigation, but antisocial and self-harming behavior of the youngster was (Östberg, 2010). Unclear definitions of a child at risk and when the risk may be of such a degree that interventions are required are a problem that may lead to children and parents not getting the support they need. Estimations of the child's needs and risks vary across agencies and social workers, and in viewing the child's development, the risks are narrowly defined and focused on the current situations, which neglect long-term solutions. The result is reactive child welfare measures, with a focus on acute interventions and less on providing proactive support (Östberg, 2010; Sundell et al., 2007).

Furthermore, studies suggest that investigations often exclude the child's and his/her parents' wider social network (i.e., potential or real support). There are also indications that children and parents are not being included in the investigation process to the required extent, in accordance with the right to participate as stated in the Social Services Act (Sundell et al., 2007; see also Eriksson, 2009).

In addition, there is a need to improve the support given to children in residential care or foster care when they make the transition to adulthood and no longer are entitled to child welfare services (Höjer & Sjöblom, 2011). To sum up, although Sweden is referred to as a country where the children have many rights, there are important improvements to be made in the field of child welfare.

Discussion and Recommendations

Swedish family policies aim to create individual (economic) freedom and a gender-equal society where children are granted similar opportunities regardless of their economic, social, or cultural background. Sweden has a history of universal benefits and health-promoting policies, providing a social security system that supports parents and children. In short, like previous reviews have found (e.g., Duvander, 2008; Haas, 1996), Sweden is a good example of what family policy can accomplish for the individual.

However, the Swedish system has its flaws, and some political initiatives have not (yet) gained the desired effect. For instance, family policies aiming to achieve a gender-equal society in terms of women and men participating to the same extent in the paid labor market and taking an equal share in domestic duties are, after four decades, still not fulfilled. Indeed, we have witnessed large changes in gender roles and women's and men's family practices, but still, men work more hours in the paid labor market and have higher salaries than women Also, mother do more for their children, relatives, and household compared to fathers.

When it comes to parental leave, introduced in 1974, fathers take no more than 23 % of the days, despite recurring campaigns and reforms promoting a more gender-equal division. A big question has been why? Previous research suggests several influencing aspects. One is family economics: most fathers earn more than the mother, and therefore, financially, it makes more sense for mothers to use more parental leave. Increasing the ceiling of the salary cap may therefore encourage higher income fathers to utilize more parental leave, although at the present, the highly educated fathers are actually those who use most parental leave days. Another explanation is that fathers may feel pressured to continue working instead of taking (more) leave due to employers' attitudes towards gendered roles. Much research indicates that notions of the father as the main breadwinner and the mother as the primary parent continue to be evident and influence men's and women's parental leave take-up. For instance, maternal gatekeeping tends to occur partly because of the strong social pressure to be a good, attentive mother (and woman) (e.g., Allard et al., 2011; Wells & Sarkadi, 2012). Other studies suggest that due to social norms on how fathers and mothers should behave, men have the possibility to opt out of parental responsibilities, while mothers do not (e.g., Bekkengen, 2002). Thus, traditional attitudes towards the genders continue to influence family practices in Sweden.

Further work to change gendered perceptions could be vital in creating an environment where mothers and fathers feel they are supported and encouraged to divide paid labor and domestic duties equally. A recurring discussion in Swedish politics is whether to extend the "daddy months" to further encourage fathers to increase their parental leave take-up. After 40 years of promoting an equal division of parental leave, perhaps this would be the most efficacious incitement.

There are more signs of Sweden not being the gender-equal society it strives for. After divorce or separation, most children have the mother as the primary carer and sole breadwinner, although the number of children staying an equal amount of time with their mother and father has increased from previous decades. While the majority of single mothers do work, many struggle financially and do not always get the child support that they are entitled to receive. In addition, being a single mother increases the risk of physical and mental health problems. Thus, there tends to be a great need to develop Swedish family policies to better support single mothers and their children.

Swedish laws and regulations promote the involvement of both parents in their child's life, regardless of whether the parents live together or not. Very seldom is sole custody given to one of the parents in

case of divorce or separation. This is sometimes problematic, for instance, in cases when the father has been physically and/or mentally abusing his partner (i.e., the mother). The societal emphasis on the importance of the father (e.g., the standard procedure of joint custody) gives the father the right to an equal part in parental decisions about the child and the right to spend time with the child, regardless of his (previous) actions towards the mothers and, in some cases, regardless of the child's wishes (see Eriksson, 2002). This suggests that societal support to families (fathers, mothers, and children) that experience domestic violence could be further improved and developed, and children's views in matters concerning custody and living arrangements should be increasingly acknowledged. Having said that, domestic abuse appears to be far less common in Sweden than in many other parts of the world, as measures have been taken over the past 30 years to bolster the victims of domestic abuse, and the child's right to express his or her opinion is emphasized in Swedish law (i.e., the Code on Parenthood and the Social Services Act). Clearly, however, more can be done to set laws and regulations into practice.

This also goes for policies aiming to reduce the number of families that experience poverty. Despite the social-democratic model with an extensive welfare system, many children and parents face poverty, and we witness an increase, especially among single parent families and families of foreign origin. Swedish labor market and family policies promote dual-earner families. Regardless of the economic aid and the social services families receive, the unemployed, parents with lower educations, and single parents all face greater adversities compared to dual-earner families, leading some researchers to call for greater safety nets to be put in place (e.g., Bull & Mittelmark, 2009). Important for future research is to widen our understanding of the most appropriate and effective support for these (different) groups of families, including the perspectives of children as well as those of the mothers and fathers.

One of the ways to help reduce poverty is to provide all children with a quality education throughout their entire childhood. School failure increases the risk of physical and mental health problems for children and in adult life (Gustafsson et al., 2010), but during the past 15 years, Sweden has witnessed an increase in the proportion of children who do not reach the established educational goals (Swedish National Agency for Education, 2009). Policies that strengthen the school system and student health services appear to be vital in promoting children's health and future prospects. It is also of great importance to widen our understandings of the schooling situation for children subjected to child welfare measures (e.g., investigations, residential or foster care) and how it can be improved (Eriksson, Bruno, & Näsman, 2011; Hedin, Höjer, & Brunnberg, 2011). In addition, in order to make the needed policy changes to further support families and children at risk, more research is required on social workers' as well as on children's and parents' views and experiences of the child welfare system and on how local and national policies influence the child welfare agencies (i.e., consequences for children and parents) (Sundell et al., 2007).

Conclusions

Sweden's family policies are a huge undertaking, affecting all aspects of the family's life. Over the past 40 years, Sweden has developed and tweaked its family policies to try to make family life more equal, while stressing each person's individual rights. The Swedish model emphasizes the dual-earner, dual-carer family; therefore, families with only one salary (or none) and/or with only one carer generally struggle compared to those who follow the Swedish model. Some challenges for the Swedish welfare system are to reduce the number of families that experience poverty, to further support families at risk, and to better take into account the views of children. There are also rising educational issues, as more children are failing at school. Despite these shortcomings, Sweden has helped lead the world in family policy and is often viewed as a model to emulate.

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Chapter 8

Family Policies: The Case of Iceland

Guðný Björk Eydal and Ingólfur V. Gíslason

Abstract Icelandic family policy was left implicit until explicit goals of family policy were enacted by a parliamentary resolution in 1997. The resolution emphasises the need to strengthen the position of the family, regardless of family type. It also states that the welfare of the family is based on equality between men and women in all aspects of life. Work-life balance has gained increased attention in policymaking during the 1990s and led to important changes, for example in family law where the rights of children to care from both parents were strengthened and in laws on paid parental leave that, from 2000, have provided both parents with equal rights to paid parental leave. While support for care, paid parental leave, day care and after-school and leisure service has been increased from the 1990s, the support for provision of children has not increased and family benefits in Iceland are income tested. Compared to other nations in Europe, child poverty is nevertheless among the lowest according to Eurostat (2012). The Icelandic welfare system also provides general measures, benefits and services to the elderly and the disabled; education and health services are mainly publicly financed, and there are also additional measures for groups at risk, such as social assistance and child protection services. Government and other agencies have emphasised the need for evidence-based policies and practices, but little family research has been conducted, the lack of research in the field being evident.

Keywords Alimony • Breadwinner • Care • Care gap • Child poverty • Childcare • Children's best interest • Cohabitation • Courts • Custody • Domestic violence • Domestic work • Dual earner—dual career • Equality (gender) • Evidence • Families at risk • Family • Family benefits • Family policy • Family type • Fathers • Income test • Iceland • Legitimacy • Mothers • Municipalities • Nordic model • Nordic countries • Paid work/employment/labour market • Parental leave • Parental obligations • Paternity suit • Registered partnership • Residency • Rights • Services • Social security • Tax • Wedlock • Welfare • Women's movement • Work-life balance

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Introduction

Iceland is an island in the North Atlantic Ocean, situated between Greenland to the west and Norway to the east. It is usually classified with the Scandinavian countries, Denmark, Finland, Norway and Sweden, under the heading 'Nordic nations'. While these countries are known for their extensive welfare system, Iceland does not conform to the 'Nordic model' as welfare expenditures have been considerably lower. At the same time the Icelandic welfare system has offered social security for all, and both education and health care are for the most part free of charge, with only a fraction of the costs paid by the users of the services (Ólafsson, 1999). Iceland also provides less support than the other Nordic countries to families with children, though during the 1990s work-life balance gained increased attention, leading to some important changes (Eydal & Gíslason, 2008; Eydal & Ólafsson, 2008).

One of the main social characteristics of the country is a very high labour market participation of both men and women. In 2011 83.7 % of men and 77 % of the women were active in the labour market. Men worked on average 44.1 hours a week, while the average for women was 35.4 h. These figures have remained fairly stable for a number of years, though the working hours for men have been slowly decreasing (Statistics Iceland, 2012a). The population enjoys good health and a long life. Life expectancy for boys born in 2010 was 79.5 years and for girls it was 83.5 years. The total fertility rate is high from a European perspective or 2.2 children in 2010 (Statistics Iceland, 2011).

Much like other Western countries, and the Nordic countries in particular, family development in Iceland has been characterised by an increased individualisation. Women have increased their participation in labour market and men, especially fathers, have increased their participation in family life and care tasks. Children's rights have also been increased. The aim of this chapter is to sketch the development of family policies in Iceland and to point out some of the major characteristics.

The Impact of Sociohistoric, Economic and Political Context on Families and the Policymaking Processes

Family Characteristics

There were 77.621 nuclear families in Iceland in 2012. Of these 37.4 % were married couples without children under 18 years of age, 29.7 % were married couples with children, 4.2 % cohabited without children and 12.6 % cohabited with children, 1.4 % were single fathers and 14.8 % were single mothers (Statistics Iceland, 2012b). These numbers have remained fairly stable over the last decades.

The main points of interest are the high percentage of unmarried couples and the high number of lone mothers. Historically, it has been more common to have children out of wedlock in Iceland than in the other Nordic countries (Gunnlaugsson, 1988). Many couples start by cohabiting with a child or children and later marry (or not). This has no effect on the social status of the couple or the child nor on the financial support they can receive from the state or municipalities. The total proportion of lone parents is similar to those of the other Nordic countries, but the division between fathers and mothers is very different as the proportion of single fathers is much lower in Iceland (Nordic Social Statistical Committee [NOSOSCO], 2010). In 2008 single women gained the right to artificial insemination (Lög um breytingu á lögum nr. 55/1996, um tæknifrjóvgun og notkun kynfrumna og fósturvísa manna til stofnfrumurannsókna, með síðari breytingum nr. 54/2008). Surrogate mothering is, however, illegal, though in 2012 the parliament passed a resolution on establishing a special committee that should write a proposal on a law on surrogate mothering (Alþingi, 2012a, A: 376).

In Iceland, as in many other Western countries, divorce rates began to rise in the 1970s when women poured into the labour market. It reached its zenith in 1991 when there were 11.6 divorces per

1,000 married couples and has remained fairly stable since then, being 10.5 in 2010 (Statistics Iceland, 2012c). This is a partial picture of dissolved partnerships since a sizable number of couples live together without being married; in 2003 the number of couples that dissolved their cohabitation was higher than the number of couples that got divorced, or 2.6 per 1,000 inhabitants compared to 1.8 (Statistics Iceland, 2004).

The last decades have witnessed a clear development towards an increased sharing of both childcare and domestic work among couples. The most radical of these changes regards parental leave, which will be discussed later, but two other changes should be mentioned here. One is the extent to which couples continue to be active parents after divorce. In 1992 the law in Respect of Children was revised and the concepts 'illegitimacy' and 'legitimacy' were abolished (Barnalög nr. 20/1992). Simultaneously the option of shared custody after divorce was introduced and immediately became popular, with 23 % of parents making use of it already in 1994. This figure rose steadily and was up to 83 % in 2010. This development was even faster and went further among those who ended their cohabitation, with 94 % sharing custody in 2010 (Statistics Iceland, 2012d). In 2006 the law was revised and shared custody made the general rule in the case of divorce or dissolved cohabitation. In 2012 it became possible for the courts to order shared custody and contact for up to 7 out of 14 days. These changes came into force in January 2013 (Albingi, 2012b, A: 1529). Shared custody does not necessarily mean that the parents are equally involved in the taking care of their child or that the child lives with both parents. However, the development seems to be in that direction since two studies have shown that around a quarter of divorced parents now have the children live with each parent for an equal amount of time, switching on weekly basis being the most common arrangement (Arnarsson & Bjarnason, 2008; Júlíusdóttir & Arnardóttir, 2008).

The other change that has to be mentioned is the increased participation of men in domestic work. A couple of different studies have come to very similar conclusions, namely, that men shoulder around 40 % of unpaid work in the homes (Arnardóttir, 2008; Þórsdóttir & Stefánsson, 2010). This moves Iceland into the Nordic league where very similar results have been obtained since the turn of the century (Lausten & Sjörup, 2003; Statistics Sweden, 2003; Vaage, 2002). So all in all Iceland has been moving in the direction of increased sharing in all realms of life, paid and unpaid work and the taking care of children.

The Influence of Socio-economic Context on the Social Policymaking

The literature recognizes the electoral strength of Social Democratic Parties and parties left of the centre and the organisational strength of the working class as important explanatory factors regarding the formation of the Nordic welfare states (Esping-Andersen, 1991; Flora & Heidenheimer, 1981). Politically Iceland deviates from the Scandinavian countries in that the Social Democratic Party has never been the state-bearing party. That role fell to the centre-right Independence Party which has been the largest political party in Iceland since its founding in 1929, apart from the elections in 2009, usually receiving from 35 % to 45 % of the vote. The Icelandic political system is characterised by a multilevel coalition system, and the Independence Party has participated in 22 of the 31 governments that have been formed in Iceland since it was founded (Statistics Iceland, 1997; Statistics Iceland, 2012e). One of the reasons for the party's success is that right up to the last decade of the twentieth century, it never advocated a classical liberal policy. Instead it tempered its economic liberalism with social liberalism and one-nation conservatism. The party made a conscious decision in the 1930s to seek influence within the labour unions and skilfully played on the antagonism between the social democrats and the communists/socialists to gain a strong foothold within the labour movement (Kristjánsson, 1979). This meant that the issues of social redistribution and social justice gained a voice within the party. Another reason for this deviation from the Nordic model is that communists

and radical socialists were much stronger in Iceland than in the Scandinavian countries, which severely hampered the Social Democratic Party (Harðarson, 1999).

Religion has not played a major role in the formation of Iceland's family policies (Björnsson, 1971; Eydal, 2005). A vast majority of Icelanders belong to the Lutheran state church, though it has been losing ground, from embracing 90 % of the population in 1998 down to 77 % in 2012 (Statistics Iceland, 2012f).

A study on the making of Icelandic family policy from 1944 to 1984 (Eydal, 2005) showed that, apart from political parties in parliament, actors such as the women's organisations and the labour market organisations were influential in the formation of legislation on entitlements such as family benefits and parental leave (e.g. Gíslason, 2007; Ólafsson, 1999). The development of the Icelandic family law has been characterised by the close, and for most part formal, co-operation among the Nordic countries. While the Nordic co-operation in the field of family law was definitive for the outcomes regarding such legislation, the legislations on childcare and social security were not influenced to the same extent by the other Nordic countries (Eydal, 2005).

Until the 1980s the concept of 'family policy' was hardly referred to in the debates in the Icelandic parliament, *Alþingi*. This changed in the 1990s when the need for a holistic policy declaration gained greater political attention. In 1994, the UN's Year of the Family, a proposition was put forth in parliament that called for a comprehensive family policy. In 1997 Alþingi formally recognized the need for explicit public family policy by passing a parliamentary resolution: on both the formation of family policy as well as the measures to be implemented that would strengthen the position of the family. The principal premises of the family policy were that the family is the cornerstone of Icelandic society and a source of human values that should be reinforced and protected regardless of the family type. The policy was primarily to take the following three principles into account: (1) that the welfare of the family is based upon equality between men and women and on shared responsibility for the tasks within it, (2) that the family is the setting for emotional ties and (3) that family life provides individuals, especially children, with security and the opportunity to fully develop their qualities (Alþingi, 1996–1997, A: 1230).

One of the main reasons for this change is that the issue of reconciliation of work and family life gained wide attention from policymakers, labour unions and employers (Eydal & Ólafsson, 2008). This has been reflected in the legislation and according to the Act on the Equal Status and Equal Rights of Women and Men, companies and institutions that employ more than 25 people have to prepare a policy on equality that shall include specific provisions on gender equality in their personnel policy (Lög um jafna stöðu og jafnan rétt kvenna og karla nr. 10/2008). Furthermore, in the year 2000 Iceland ratified the ILO resolution on rights of employees with family obligations (Alþingi, 2003–2004, A: 1573).

State of Research on Families as Background for Evidence-Based Policy Development

Generally speaking there is a serious lack of family research in Iceland (Júlíusdóttir, 1993, 2001; Kristinsdóttir, 1991). However, at the same time, there has been an increasing emphasis on evidence when policies are being formulated. A case in point is when the laws on paid parental leave in 2000 were enacted (please see section of support to families below where the scheme of paid parental leave is discussed). In the report with the bill, references were made to research (Alþingi, 1999–2000, A: 1065). It was also stated that the effects of the law should be evaluated and eventual changes be based on that evaluation. Such an evaluation has not been undertaken by the state, though a number of independent studies have been published (e.g. Arnardóttir, 2008; Eydal & Gíslason, 2008).

There has been a slow and tentative increase in the use of evidence-based policymaking in the family field and an increased reliance on experts (Guðmundsson, Jónsdóttir, & Júlíusdóttir, 2010).

This can, for example, be seen in the field where services for families are provided, for example in local social services where evidence-based work has been emphasised for the last decade (Ingólfsdóttir, 2011). According to Guðmundsson et al. (2010) there is a growing demand for both research and advisory in policymaking. At the same time there is a general lack of research and evaluation of different public policies in Iceland.

Family Policy Framework Developments Targeting Different Family Functions: A Review of Family Policies

Family Policies Targeting Marriage

As already mentioned above, the development of Icelandic family law has historically been characterised by the close co-operation among the Nordic countries, and in the 1920s the Icelandic marital law and the law on parents' obligations to children were revised in accordance with the family law in the other Nordic countries (Snævarr, 1983). According to Therborn (1993, p. 258), the reformed legislation "declared an explicit basic equality between husband and wife, father and mother, provided for no-fault divorce (after a procedure of separation) and established the principle of the best interests of the child as the main criterion for deciding issues of custody". Thus, the Icelandic marital law has, since the 1920s, viewed both spouses as equally responsible for providing for each other and their children. Consequently the courts in cases of divorces in Iceland do not rule on alimony payments, though in cases where the parents are not in agreement about the provision, custody or access to children, it is possible to get a ruling on the arrangement (Eydal & Friðriksdóttir, 2010). There have been some minor changes to the marital law since the 1920s but in principle they are still the same (Eydal, 2010).

In the 1920s all the Nordic countries also reviewed their laws in Respect of Children. In the case of Iceland the new legislation provided children born out of wedlock with the rights to an inheritance and the name of their father. Since the number of children born out of wedlock was exceptionally high in Iceland at the time, this legislation was of great importance (Eydal, 2005). In 1981 a new law in Respect of Children was enacted. According to the law parents are to consider their children's best interests at all times and discuss all major decisions concerning their child with them. The law also emphasised the right of the child to care and support from both parents. The parental obligations of cohabiting parents were put on an equal footing with married parents, which meant that both parents had custody while cohabiting. When cohabitation was dissolved the custody and visiting rights had to be decided in accordance with legal rules, but such visiting rights had been granted to divorced parents in 1972. According to the law the child shall have a residency with one parent and this parent gets the parental support, while the visiting parent is required to pay maintenance for the child (Eydal, 2010; Eydal & Friðriksdóttir, 2010). While previous laws had emphasised the child's right to know both its parents, it was only in 2003 that a mother became required by law to seek paternity for her child. Furthermore, according to the law from 2003, a man who claims to be a child's father may initiate a paternity suit in order to have the claim tested. This is a major change since previously only the mother or the child could initiate a paternity suit (Barnalög nr. 76/2003).

The legal definition of a child underwent some changes during the 1990s. Following the ratification of the UN Child Convention in 1992, it became necessary to adjust Icelandic laws to comply with the convention, which states that a child is an individual under 18 years of age (*Lögræðislög* nr. 71/1997; *Barnaverndarlög* nr. 80/2002).

Iceland has not enacted a special law on cohabitation. However, there is a historical tradition of recognizing the rights of cohabiting couples in various Icelandic laws, for example cohabitation was acknowledged in the context of the establishment of a child's paternity already in 1921 (Alþingi,

1946, A: 364). Gradually, more and more laws included clauses that addressed the rights of a cohabiting couple specifically. Nowadays it is possible to register cohabitation with the authorities (Erlendsdóttir, 1988; Eydal, 2005; *Lög um lögheimili* nr. 21/1990). The parental rights and duties are the same as in the case of married couples. The cohabitation of heterosexual couples has gained wide recognition in Icelandic law and has been a relatively common and widely accepted family form (Eydal & Ólafsson, 2008). Despite the recognition that heterosexual cohabiting couples have received in law, there has been and still is a clear difference between the legal status of cohabitation and marriage. Cohabiting couples were not able to adopt children until 1999 (*Lög um ættleiðingar* nr. 130/1999). Cohabitants do not have any automatic inheritance rights, and no laws exist on how to administer the financial affairs if the relationship breaks up (Alþingi 2000–2001, A: 935; Erlendsdóttir, 1988; Erfðalög nr. 8/1962). However if a cohabiting woman gives birth to a child, her cohabitant will automatically be regarded as the father, but if the parents are neither married nor cohabiting, the mother has custody of the child, but both parents share parental obligations (Barnalög nr. 20/1992).

During the 1990s the need for legal rights of same-sex couples to start a family was raised in Iceland, and in 1996 the first law on registered partnership for same-sex couples was ratified. The law provided same-sex couples who register their partnership with a legal status similar to that of married couples. In 2000 the law also permitted step adoptions in cases where a partner in a registered partnership had a child, his/her partner could adopt the child (Lög um staðfesta samvist nr. 52/2000). However, same-sex couples did not have legal rights to adopt a child together until 2006 when lesbian couples also gained rights to artificial insemination and other fertility procedures. The aim of the law from 2006 was that same-sex couples enjoyed all legal rights as heterosexual couples, except the right to get married which was enacted into law in 2010 (Alþingi 2005–06, A: 1445; Alþingi, 2010, A: 1302). Thus, from 2010 same-sex couples have had all the same legal rights in family law as heterosexual couples.

Domestic Violence

Domestic violence first surfaced in Iceland as a social, rather than an individual, problem in the 1970s as part of the general movement towards increased rights and opportunities for women. The 1980s saw the establishment of the first women's shelter (1982) and a centre for incest survivors (1990). Both were the result of grassroots movements among women and are still run on that basis even though both receive the lion's share of their funding from the state and some municipalities. In 1998 a psychological treatment centre for violent men was established with financial backing from the state, the Red Cross and other interested parties. It had to close down in 2001 due to lack of funding but was re-established in 2006 not least due to pressure from the women's movements. It is now fully funded by the ministry of welfare. So even though these three resources are different in scope and origin, all are mainly funded by the state and the municipalities (Velferðarráðuneyti, n.d.).

Domestic violence as such is not treated separately in Icelandic law but covered by the violence section of the General Penal Code originally from 1940 (Almenn hegningarlög nr. 90/1940). Children are protected by the law on child protection, originally from 1932, and according to the law it is the duty of all individuals to report to the child welfare authorities if they have any reason to believe that children are at risk. In 2009 Alþingi revised the law and banned the corporal punishment of children (Barnaverndarlög nr. 80/2002).

There are several indications that the issue of domestic violence has been moving up on the political and social agenda in recent years. For one thing Alþingi passed a law on restraining orders in 2008 and another in 2011, which allows for the removal of a violent person from his/her home. In 2005 the National Commissioner of the Icelandic Police issued a policy procedure concerning domestic violence that laid out how the police should react and aid in these cases and how they should be registered. The aim was, on the one hand, to move the issue up on the agenda and, on the

other, to try to harmonize the recording of incidents to make it easier to use it for purposes of research (Ríkislögreglustjóri, 2005).

In 2003 a committee on "men's violence against women in close relationships" was established. It brought together representatives from four ministries, the Centre for Gender Equality and the Association of Icelandic Municipalities. The committee initiated several projects such as the publishing of books on domestic violence which are intended for professional groups that are particularly likely to come across victims of domestic violence, the health service, midwives, the police and the social service. The committee also wrote a plan for action against domestic violence and violence against children that was adopted by the government in 2006 and was the basis for a number of projects and initiatives in that area.

There have been three large quantitative surveys on domestic violence in Iceland, in 1996, in 2005 and in 2008. The results are fairly similar, showing that between 0.5 % and 2 % of Icelandic women have experienced violence from a spouse or former spouse sometime in the 12 months preceding the study. Around 0.7 % of the women in the survey in 1996 had experienced what can be labelled serious violence. The studies are not strictly comparable but generally speaking they show little changes in the extent of domestic violence and its effects or the extent to which women seek help (Gíslason, 2008; Karlsdóttir & Arnalds, 2010). Only the first of these studies included men and 0.8 % of the men said that they had been the victims of domestic violence in the past 12 months and 0.3 % were the victim of serious domestic violence.

Studies on violence towards children have not examined the frequencies of domestic violence among children specifically (Freysteinsdóttir, 2007). A study by Ólafsdóttir (2011) among adults showed, however, that 17 % claimed to have experienced sexual abuse as children.

Family Policies Regarding Child-Rearing and Family-Work Balance

As mentioned earlier the Icelandic family and gender equality policies have emphasised the issue of reconciliation of work and family during the 1990s and onwards. Care policies, public supports for parents with young children, are believed to be of vital importance in this respect. In the case of Iceland childcare was regarded to be the private matter of the parents and public support developed slowly until the 1980s.

The first law on day care was enacted in 1973 but in 1991 a new day-care act was passed. According to the act day-care institutions are called playschools in order to emphasise that the children are in schools and that they mainly learn by playing. This law further established the educational and pedagogical aspects of institutional day care provided by municipalities but under the administration of the Ministry of Education. It is possible for private partners to establish and run playschools if they have permission from the local authorities. The municipalities subsidize the day-care services and parents pay fees that are a fraction of the actual costs. In addition to day care the municipalities provide services called family day care, which are private child minders that care for children in their homes, usually in the period from the end of parental leave up to the time that the children can start playschool. The age at which they begin is different from commune to commune but is usually from 15 to 24 months old.

During the 1990s, the municipalities of Iceland have increased the coverage for all age groups as well as the number of full-time placements. This change has been taking place due to policies made on local level as there is no state guarantee or universal right of children to day care (Eydal, 2010; Eydal & Gíslason, 2008). The increase has been slow but constant, and in 2010 80 % of 1–2-year-old children and 95 % of 3–5-year-old children in Iceland were enrolled in public day care (institutions or family day care) (NOSOSCO, 2010). Similarly there has been a steady increase in the amount of time that children spend in playschools each day. In 1998 just over 40 % spent 8 hours or more in play-

schools each day but in 2011 the figure was up to 81 % (Gíslason, 2012). After-school services for children 6 years old and older have also been improved during the 1990s (Eydal & Ólafsson, 2008). Furthermore during the past decades public support for leisure and recreational services for children has been increased and most municipalities offer special benefits for parents to spend on their children's organised leisure activities (Hiilamo, 2008; Pálsdóttir, 2009).

Similar development has taken place regarding entitlements to paid parental leave; the first law on universal rights to a 3-month paid parental leave was enacted in 1981. Gradually the entitlements were extended to 6 months in 1990. In 1997 the parliament voted in favour of a governmental bill on universal right to 2-week paid paternity leave from January 1 1998 (Eydal & Gíslason, 2008).

In 2000, a new legislation on parental leave was passed, radically changing the scheme of parental leaves. According to the new law the goal of the act is, "...to ensure children's access to both their fathers and mothers" [and furthermore] "to enable both women and men to co-ordinate family life and employment" (*Lög um fæðingar-og foreldraorlof* nr. 95/2000). The law entitled each parent with the same right to 3 non-transferable months of paid parental leave. In addition the parents have 3 months that they can decide how to share. Thus, the total period was extended from 6 to 9 months and the parents can be on paid leave together. The payments were changed from a system of low flat-rate benefits to 80 % of salary while on leave, but minimum payments are still paid to those parents that have not accumulated rights by participation in labour market. In addition a parent continues to accumulate social rights while on parental leave, as if he/she was working. A special parental leave fund was established to monitor the system. The fund receives its funding from a part of the insurance levy paid by all employers. Last but not least a prospective parent cannot be fired after informing the employer of his/her intentions of taking parental leave (*Lög um fæðingar- og foreldraorlof* nr. 95/2000).

There was a broad social and political consensus about this radical change towards equal rights of fathers and mothers to paid parental leave. Not a single member of Alþingi voted against the laws and women's organisation and the labour unions rejoiced at its passing into law. The historical fact that Icelandic mothers had enjoyed less right than women in the other Nordic countries may have paved the way for this agreement, since there was no strong historical tradition for a long-term paid maternity leave (Eydal & Gíslason, 2008).

The changes took effect from January 1, 2001, and the extension of the leave came in steps so that fathers got their first month in 2001, the second in 2002 and have had 3 months from 2003. The political and social consensus was apparently not confined to *Alþingi* and social movements since fathers eagerly grasped this opportunity right from the beginning. Actually fathers were making better use of their rights than had been expected, and it soon became apparent that the parental leave fund was headed for bankruptcy. Consequently the insurance levy was raised somewhat in 2004 and a very high ceiling on payments was introduced, affecting only 2.6 % of fathers and 0.4 % of mothers (Vinnumálastofnun, 2010). Figure 8.1 shows the percentage of fathers making use of parental leave from 1994 to 2010. The figures for the years 2009 and 2010 are preliminary since in 2008 the period that parents have to make use of their entitlements was increased from 18 months after the birth of the child to 36 months. Therefore, the final figures for 2009 will not be available until 2013. The picture shows that the impact of the changing of laws in 1997 and 2000 is clear.

Prior to the law in 2000 hardly any father made use of the paid parental leave, but when they got the right to individual entitlements, gradually from 1 month in 2001 to 3 months in 2003, the proportion of fathers that took advantage of them rose sharply and reached over 90 % in 2008.

Figure 8.2 shows the number of days that fathers and mothers use on parental leave and, again, the figures for 2009 and 2010 are still preliminary. The number of days that fathers use closely follows their individual rights. Mothers, on the other hand, on average make use of the days allotted to them and the three sharable months.

Severe cuts had to be made in the welfare system following the financial crash that shook Icelandic society in October 2008 and the parental leave was not exempt. The ceiling on payments has been lowered twice and now affects around 47 % of the fathers and 19 % of the mothers. However, the sitting government has stated that the cuts are temporary and the planning for the restoration of the

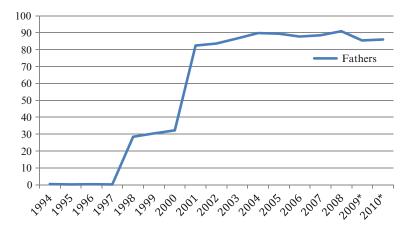


Fig. 8.1 Fathers in Iceland that took paid parental leave as % of mothers on leave (1994–2010). [Own figure statistics from Vinnumalastofnun] (Vinnumálastofnun, 2010)

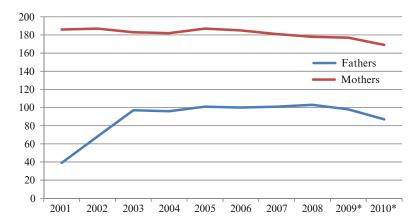


Fig. 8.2 Average number of days used by parents on parental leave (2001–2010). [Own figure statistics from Vinnumalastofnun] (Vinnumálastofnun, 2010)

compensation has begun as well as planning for an extension of the leave from 9 to 12 months (Gíslason, 2012). It is highly noteworthy that the original consensus remains since no politician has suggested a change in the basic structure of the system.

Thus, during past two decades public support, both to services and paid parental leave, has been increased in order to enable both parents to earn and care. These changes have resulted not only in the high proportion of Icelandic fathers making use of their entitlements but also in them taking increased part in the care of their children after the paid parental leave (Eydal, 2008). Thus, the gendered roles of both mothers and fathers are slowly being transformed towards a dual earner—dual carer model.

Family Policies Supporting Families at Risk

The Icelandic welfare system provides support to families at risk. Most of the schemes can be traced back to the Social Security Act from 1946 that included schemes of family benefits, birth benefits and support to lone parents. One of the aims of the act was to secure a minimum level of well-being for all

Table 8.1	Child benefit packages for parents with two children (one under 7 years) earning	ıg
median inc	ome in 2011. Monthly amounts in thousands ISK. [Own calculations]	

	Renting	Own housing
Lone parent	110	94
Couple – One earning	33	33
Couple – Two earning	17	17

Source: Kristjánsson, 2011, 48; 53

Table 8.2 Social expenditure in Iceland 1990 and 2007 as % of GPD. [Own table, statistics from OECD]

	1990	2007
Total social expenditure	13.7	14.6
Total family expenditure	2.4	2.9
Cash benefits	1.7	1.4
Family benefits	1.4	0.6
Paid parental leave	0.3	0.6
Other cash benefits	0.1	0.2
Benefits in kind	0.7	1.5
Day care	0.5	0.9
Other benefits in kind	0.2	0.6

Source: OECD, Social Expenditure Database (SOCX)

children. The main structure of the system from 1946 has been kept more or less intact; thus, all parents are entitled to family benefits; lone parents are entitled to state-guaranteed child maintenance, mother/father wages and family benefits; and pensioners and widows/widowers are entitled to child pension (Eydal & Ólafsson, 2008). The only scheme that has undergone significant changes is the scheme of family benefits (actually called child benefits in Icelandic). In 1975 it was moved from the Social Security System to the tax system, though it was not designed as a tax credit since parents did not need to pay taxes in order to get the benefits. The benefits were universal until 1978 when it was changed so that higher benefit was paid for children under the age of seven and for children of lone parents. Income testing was applied gradually from 1984 and the whole amount became income tested in 2011 so that parents with income above certain ceiling do not get family benefits (*Lög um tekju- og eignarskatt* nr. 75/1981 m.s.b.; Kristjánsson, 2011).

As both family and parental benefits are income tested, low-income and lone-parent families receive the greatest support. As Table 8.1 shows, families earning the median income are also eligible for support.

In addition to the social security benefits for parents with children, the local social assistance authorities pay social assistance to families that are without income from either the labour market or social security. Social assistance is regarded as a short-term measure and therefore only paid as a minimum income. The Ministry of Welfare publishes recommendations of the benefit amount annually, but each municipality makes its own rules on eligibility and the benefit's amount (Eydal & Marteinsdóttir, 2011).

Iceland has kept welfare expenditure low, services and benefits for families with children being no exception. In recent years there has been an increase in support related to care, paid parental leave, day care and leisure time services. At the same time expenditures on family benefits have decreased (Table 8.2).

Despite the decrease in expenditure on family benefits, comparative European studies on poverty (e.g., EU-SILC) show that poverty in Iceland has not increased in recent years and that a relatively low proportion of the Icelandic population lives at risk of poverty as defined by EU (under 60 % of median incomes both from wage work and social transferences) (Table 8.3).

Table 8.3 Relative poverty rates in Iceland and EU-27 (2010). Share of population below 60 % of median income. Based on equalized household disposable income per person. [Own table, statistics from Eurostat]

Services and Benefits in Case of Sickness or Old Age

The Icelandic health care system provides universal services that are either free of charge or subsidized so that user fees are very low (Nordisk Medicinalstatistisk Komité [NOMESCO], 2011). Furthermore Social Security provides special support for parents with chronically ill or disabled children (Tryggingastofnun ríkisins, n.d.). Icelandic parents have no legal rights to pay when caring for a child with a short-term illness, but labour market agreements usually cover the rights of parents to full pay for a short period. For example, public servants are entitled to 12 days a year with full pay to care for their sick child. The number of days is for each parent, and no consideration is taken to the number of children in the family (Fjármálaráðuneyti, n.d.).

The Icelandic welfare system also offers services for the elderly, the aim being to enable them to live in their own home as long as they wish to. Home care services are provided on municipality level to realize this goal. Home help is either free of charge or at a very low user fee. If the old age person requires more services, he/she can apply for evaluation of need (*vistunarmat*). Residential care can be provided either in home, services flats or in a nursing home if the evaluation shows that the care needs are not met at home. These are all financed by the state, but the recipient pays in accordance with his/her pension; thus, the fees are income tested. Despite the extensive public services the role of the family in caring for and supporting the elderly is still extensive (Sigurðardóttir, 2010).

Families at Risk: Child Welfare Services

The law on child protection addresses the core duties of parents towards their children and defines when the public authorities have a duty to intervene in family life to guarantee the best interest of children (Barnaverndarlög). The primary goal of the law is to support families in taking good care of their children (Haugen, 2002). However, if parents fail to fulfil their duties towards the child, or the child is considered to be in danger for other reasons, it is the duty of the child welfare authorities to guarantee the best interest of the child. The primary emphasis is on supporting the child in the family if possible and to use institutional services and foster families only if that fails. Each municipality is required to establish a Child Protection Committee with five members, but the law also encourages electing a joint committee for more than one municipality. The child protection committees hire professional staff, often in co-operation with the social service organisations. Furthermore a state organisation, the Government Agency for Child Protection, is responsible for all specialized services in the area of child protection and for coordinating and strengthening the child protection services (Barnaverndarlög; Haugen, 2009). Among the institutions that the Government Agency for Child Protection runs is the Children's House were children that have been victims of sexual abuse and their families can get all service at one place, different organisations and services being combined under

^aUnder the age of 16

Figures from Eurostat n.d.

one roof. The Children's House in Iceland has been recognized and praised as the best practice model by, for example, the International Save the Children Alliance, and has been emulated in many other countries (Guðbrandsson, n.d.; Sigurjónsson, 2006).

Icelandic legislation, both the law on child welfare as well as the law in Respect of Children, has increasingly emphasised the rights of children to participation and to be heard on matters affecting them. Furthermore the importance of agency and user involvement in social policies from the 2000s and onwards has also contributed procedures that emphasise the inclusion of all family members (Árnadóttir, 2010; Haugen, 2009). Iceland ratified the Convention on Children's Rights in 1992 and established the Ombudsman for Children in 1994 (Eydal & Kröger, 2009).

Family Policy Implementation and Assessment

As pointed out in the section about family research, there is a growing interest in applying evidence-based policies and practice in Iceland (Guðmundsson et al., 2010). However EBPP is still applied on single-case basis and is not applied systematically in all areas of family policies. Furthermore as pointed out above there is a lack of family research in Iceland (Guðmundsson et al. 2010; Júlíusdóttir, 2001; Kristinsdóttir, 1991). Thus, it is not always easy to estimate the success of single policies since often there is lack of information about how things were before the policies were implemented; thus, the baseline is often missing. There are some good examples of areas where policies have been implemented as a response to results from research, the act on paid parental leave being a good example as it was noted that research had shown that fathers were deprived of opportunities to care for their children while being willing to increase their participation in care (Eydal & Gíslason, 2008). Guðmundsson et al. (2010) discuss a number of family policies which also can be claimed to be a response to research outcomes pointing at a problem that could be solved.

The example of paid parental leave is probably the single policy measure in Iceland that is most often mentioned as best practices or model for other countries, the reason being the success of the policies regarding the take up of fathers (e.g. Organisation of exchange of good practices on gender equality, n.d.). Though the statistics on the take-up rates of the fathers are good evidence of the success of the policies, they do not show if the twofold goals of the law – to provide both parents with opportunities to participate in labour market and care for their children on one hand and to ensure children care of both parents on the other – have been reached. In the act it says that the effects of the law should be evaluated and eventual changes be based on that evaluation. As pointed out above, no systematic evaluation has been undertaken by the state, though a number of independent studies have been published on the issue (e.g. Arnardóttir, 2008; Eydal, 2008; Eydal & Gíslason, 2008; Gíslason & Eydal, 2011).

Conclusions and Recommendations for Family Policy Development

The financial crisis that began in October 2008 put severe strain on the Icelandic welfare system. However, both the government and the local authorities have emphasised the importance of protecting children and young people from the consequences of the crisis through their policies, as well as ensuring that neither gender is disproportionally affected. Both have established welfare watchdogs to ensure that the well—being of children is monitored and that policies are proactive. This indicates the high priority given to these issues in Icelandic society.

Over the past two decades the main emphasis in family policy has been on reconciliation of work and care. This is in line with the general commitment of Icelandic politicians and most social agents to promote gender equality in all spheres of life. That means that the idea is to promote the continued

participation of women in the labour market and the increased participation of men in family life, in other words, to aim for the dual earner—dual carer system. One of the main obstacles to the realization of that goal has been the care gap that remains from the time of the end of parental leave to the time when playschools admit children. This is a period that to a larger extent is bridged by mother's adjusting their labour market participation to the needs of the family. The solution to this has to combine the interests of the parents, the children, the labour market and the drive towards gender equality. The recommendation would therefore be to extend the parental leave up to at least a year and getting the municipalities to commit to providing places in playschool from the time when children are 15 months old or even younger. That would eliminate the care gap in the great majority of cases.

Another recommendation would be a general shortening of the working hours so that no child had to spend more than 8 hours a day in playschool. And, as a matter of fact, the current government is considering both of these suggestions, and the extension of the leave was on the agenda of the prior government but the plans were thwarted by the financial crisis. Finally, there is a need for increased attention to evidence-based policy, that is systematic research on the effects of different policy measures. This has been discussed but little or no concrete measures have been implemented.

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Lög um lögheimili [Act on Legal Resident] nr. 21/1990.

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Lög um tekjuskatt [Income Tax Act] nr. 90/2003.

Lög um ættleiðingar [Adoption Act] nr. 130/1999.

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Chapter 9 Family Policy in Ireland

Tony Fahey and Elizabeth Nixon

Abstract The state in Ireland in the early decades of national independence sought to promote the stable, large, two-parent, father-centred family, particularly one founded on the owner-occupied family farm. Property distribution and normative regulation were the main policy instruments used, though some antipoverty income supports were also introduced. Economic modernisation and cultural change after the 1960s caused families to become less patriarchal, smaller, less tied to marriage and more oriented to education and wage/salary labour. A period of normative conflict over contraception, divorce and abortion ensued, and gender equality and the rights of children emerged as policy issues. Family benefits expanded to encompass a wider range of family circumstances and poverty risks, though child poverty remained high. Policy choices between incentivising women's work outside the home and supporting stay-at-home motherhood were resolved in mixed and sometimes conflicting ways but with a continuing strong focus on cash payments rather than provision of services. These choices remain contentious and, along with poverty alleviation, are key concerns in the current debates on family income support policies. Fiscal pressures arising from the current financial crisis also now exert an influence.

Keywords Ireland • Family policy • Contraception • Divorce • Abortion • Income support • Gender equality

It is only in recent times that 'family policy' has been conceptualised as a single policy domain in Ireland. Policies aimed at the family have long been important but historically were handled by disparate state agencies and government departments. In 1995, partly in response to controversies about divorce at the time, the Commission on the Family was established to examine legislation and policies on families (Commission on the Family, 1998). Its report brought the term 'family policy' into official discourse, and in 1997, the term 'family' was added for the first time to the title of a government ministry (the Department of Social, Community and Family Affairs, which primarily was concerned with social security). Some new agencies with a remit for family policy and family services provision were also established (Fahey, 2006) and helped to sharpen the focus on family issues in policy thinking and design of services.

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126 T. Fahey and E. Nixon

However, other developments took place at the same time which diluted this focus. Chief among these was an increased emphasis on children as a policy concern. This concern was expressed in the *Child Care Act (1991)* and was intensified as scandals about child abuse in Irish social services and by Catholic religious and clergy came to public attention in the 1990s and early 2000s. Administrative frameworks for dealing with children's issues were strengthened, a National Children's Strategy was adopted for the period 2000–2010, in 2011 a full ministry for children and youth affairs was created and a constitutional amendment to strengthen children's rights was adopted by a national referendum in November 2012. In 2011 also, the term 'family' was dropped from the title of the ministry responsible for social security (which is now named the Department of Social Protection). These labelling changes reflect shifts in policy priorities, and it is probably true to say at present that 'family' does not really serve as an influential organising concept in Irish policymaking. It is currently less forceful in that context than, for example, the concern with children just mentioned. As we review Irish family policy in this chapter, therefore, we need to think of it as a traditional loose array of distributive measures, services and regulatory frameworks targeted on various aspects of family life rather than as a single well-integrated or clearly defined field.

Sociohistoric, Economic and Political Context for Understanding Family in Ireland

Ireland was one of the late industrialising societies of Europe, and it missed out on the western economic boom of the 1950s (Barry, 1999; Garvin, 2004). Its post-war economy was dominated by inefficient family farming, and its industrial and services sectors were small, inward looking and uncompetitive. A reverence for rural ways of life and the Catholic Church pervaded Irish culture. The slowness of economic and social change up to the 1960s was reflected in the persistence of family patterns that had faded in Europe over the previous half century: many adults never married, those who married did so at a late average age, and while marital fertility declined somewhat from the very high levels of the early twentieth century, Irish couples still had by far the largest families in the western world (one-third of births in 1961 were to women who already had at least four children, a unique pattern among western countries at that time – Fahey, 2001; Murphy-Lawless, 1987). A safety valve of emigration absolved both state and parents of the long-term task of absorbing surplus children (Daly, 2006). Child-bearing outside marriage was uncommon – in the early 1960s, less than one birth in 30 took place outside marriage – and marital breakdown scarcely existed (Fahey, 2001). However, the economic and social model on which these family patterns were based was by then also in crisis, and a flood of emigration throughout the 1950s had brought catastrophic population decline.

The sexual revolution and, at a short lag, the gender revolution and the changes in family behaviour that demographers have labelled the 'second demographic transition' swept through the western world from the 1960s onwards (Lesthaeghe & Surkyn, 2006). These changes soon percolated into Ireland, aided by a turn towards industrial development and international markets in economic policy, a new emphasis on education as a motor of national development and an unprecedented surge in economic growth. A baby boom occurred in the late 1960s and 1970s. This was a delayed version of the baby boom which had occurred in other western countries in the post-war years and, like that earlier version, was driven by a sharp rise in marriages rather than a resurgence of the large family. As the rise in marriages petered out in the 1980s, fertility rates fell to within the normal European range (which itself was contracting at that time). However, even at its lowest point in the late 1980s and early 1990s, when fertility in Ireland fell below replacement levels, it remained in the upper reaches of European levels. Today, following an increase in couple formation and in births per woman since the mid-1990s, the total fertility rate in Ireland remains the highest in Europe, at almost 2.1 births per woman (Lunn, Fahey, & Hannan, 2009).

This was also an era of rising marital instability. Births outside marriage had remained below 5 % of all births until the 1980s but then took off and reached nearly one-third of births by the late 1990s. In spite of the ban on divorce then in place (which is discussed in the next section), marital breakdown also increased but did so slowly. When divorce legislation was introduced in 1997, the underlying slow growth trend was little affected, and marital breakdown topped off at more or less the lowest level in Europe in the early 2000s (Fahey, 2012).

Although marital breakdown is relatively low by contemporary standards and nonmarital child-bearing is about middle of the range for European countries, Ireland has a moderately high level of lone parenthood. The percentage of children living with lone parents is above the median for 31 OECD countries in data reported by Lunn and Fahey (2011). Based on data from the European Union's Survey of Income and Living Conditions, Iacovou and Skew (2011) reported that in 2009 Ireland had, after Latvia, the highest share of children living in lone-parent families in the EU. This higher-than-expected incidence of lone parenthood in Ireland is difficult to account for but is likely to reflect a number of factors: an overall higher fertility rate among Irish women, a relatively late average age of entry into stable partnership which increases the pool of unpartnered women 'at risk' of solo child-bearing, a low rate of entry into second unions which reduces exit from lone parenthood and a low rate of abortion as a solution to unplanned pregnancies among young women. One further factor may be a disincentive to partnership arising from the targeting of cash supports on lone parents in the social security system (Lunn & Fahey, 2011).

Family Policy Framework: Pre-1960s

Family patterns in Ireland in the first half of the twentieth century, as outlined in the previous section, had been supported by a number of strands of public policy, of which two stand out. One was the sustained attempt to create a society and economy based on family production in the farm sector. The state-funded land-reform programme, which originated under British rule in the late nineteenth century and continued after Irish independence was achieved in 1921, was at the centre of this effort. This hugely expensive and far-reaching episode of social engineering abolished rural landlordism and put in its place the small-scale family farming system that dominated the Irish social landscape in the first half of the twentieth century (Fahey, 2002).

A second strand of policy sought to regulate family and sexual behaviour, largely along the lines of Catholic moral teaching (Ferriter, 2009; Kennedy, 2001). From a range of measures designed to achieve this outcome, two are usually highlighted: the ban on the importation and sale of artificial contraceptives introduced in 1935 and the pledges to support marriage and the marital family (which included a ban on divorce) contained in Article 41 of the 1937 Constitution. Other forms of regulation sought to promote a subordinate domestic role for women, for example, through the 'marriage bar' which prohibited the employment of married women in public sector white-collar jobs (Pyle, 1990) and the clauses in the constitution extolling the value of women's role in the home. The state also supported a harsh disciplinarian approach to children, for example, through tolerance of sometimes brutal corporal punishment in the home and the school and through the penal treatment of marginalised children in the industrial school system (Maguire & Cinnéide, 2005; Raftery & O'Sullivan, 1999).

The dominance of these strands of state action on the family meant that social provision for families of a type then emerging in much of the industrialised world was slower to develop, though some antipoverty income supports for families did emerge. Pensions for widows were introduced in 1935, and children's allowances (renamed 'child benefit' in 1986) were introduced in 1944. Children's allowances were especially significant as they were the first and still remain the only universal social security scheme in Ireland (i.e. they are neither means-tested nor linked to social insurance contributions).

128 T. Fahey and E. Nixon

However, other family-oriented services faced opposition, as turmoil over a proposed maternal health service (the Mother and Child Scheme) in the late 1940s and early 1950s illustrated (Kennedy, 2001). Those services which did exist, such as the industrial school system for neglected and pauperised children, remained shockingly poor until reforms were initiated in the 1970s (Raftery & O'Sullivan, 1999). The large role played by family employment in the Irish economy also hampered the development of inclusive broadly based social insurance and fostered a social welfare system that was narrow in scope and consisted of a plethora of schemes targeted on specific and often quite small categories of the population (Carey, 2005; Daly & Yeates, 2003).

This, then, could be summed up as an era of patriarchal familism where the state sought to promote the large, stable, father-centred, two-parent family, particularly one founded on the owner-occupied family farm. It was also an era when wives/mothers were confined in the home, where children were seen but not heard and where property distribution and normative regulation were preferred as policy instruments over income maintenance or services provision for families.

Modernisation of Family Policy

The emergence of a more prosperous, secular and open society in the post-1960s era can be traced though a complex history of change in policies affecting the family. Some of this change entailed contentious public debate and a clash between liberal versus Catholic moral stances on the family. Other changes occurred in response to economic transformation, the expansion of education, the growth of wage and salaried labour and institutional developments such as Ireland's entry into the European Economic Community (now the EU) in 1972. The family in this period became more egalitarian, smaller and less tied to marriage. Here we will organise our account of change in family policy in this period under four headings: sex and reproduction, marriage and partnership, antipoverty policy and gender equality policy affecting the family. The first two of these have to do mainly with the legal regulation of the family and sexuality and entailed little by way of state intervention in resource distribution. The second two are concerned with family-oriented income supports and family services and therefore are mainly about resource distribution.

Sex and Reproduction. In 1973, the Supreme Court, in the McGee judgement, struck down as unconstitutional the ban on the importation and sale of 'artificial contraceptives' contained in the Criminal Law Amendment Act (1935). This provoked an extended national debate on the place of sexuality in people's lives, especially among the unmarried. An initial effort to legislate on this issue in 1974 failed in a welter of controversy. In 1979, a compromise statute was passed which allowed access to contraception to married couples for bona fide family planning purposes but sought to deny it to the unmarried (the requirement for a medical prescription to obtain contraception was the control device used). It was not until 1993, following extended wrestling with further legislation, that a fully liberalised regime on artificial contraception was introduced (Hug, 1999).

A further impact of the *McGee* judgement was the concern it generated among Catholic moral conservatives that the Supreme Court might go a step further and use a similar legal reasoning, based on the doctrine of personal rights, to permit abortion (which was illegal under the *Offences Against the Person Act, 1861*). This concern did not seem entirely far-fetched, since the marital privacy principle on which *McGee* was based was not that far removed from the bodily privacy principle that underpinned the US Supreme Court's landmark decision on abortion in *Roe v Wade* (1973). As debate on sexual and family issues took on increasingly liberal tones during the 1970s, a number of influential lay Catholics came to the conclusion that the only certain means of averting such a risk was to insert a blocking clause in the constitution. In consequence, in 1981, an array of Catholic civil society groups came together as the Pro-Life Amendment Campaign (PLAC) with a view to achieving that outcome. Exploiting a period of instability and knife-edged electoral competition between the major

political parties (there were three general elections in 1981–1982), the PLAC succeeded in having a referendum held in September 1983 on a constitutional amendment to protect the right to life of the unborn. The clause that was voted on pledged the state 'to defend and vindicate ... the right to life of the unborn, with due regard to the equal right to life of the mother'. The referendum was carried by a majority of 66 % and the pro-life clause was inserted as Article 40.3.3 in the Constitution.

This outcome was a triumph for the PLAC and Catholic moral conservativism in Ireland. It also reflected two features that characterised the politics of morality until the mid-1990s. One was the focus on the constitution as a battleground of change, in the light of the conservative leanings on the family and the position of women contained in the constitution. The second, which flowed from the first, was the role of direct democracy in deciding key issues since Irish law required a national referendum to amend the constitution. The recurrence of direct consultations with the Irish people on basic family questions was a key feature of this period and served to raise the temperature of the debate that took place.

The public vote on the 1983 abortion referendum seemed to reflect a solid anti-abortion sentiment in Ireland. However, that sentiment shifted in the early 1990s in the aftermath of a Supreme Court decision in the case of a 15-year-old girl who had become pregnant as a result of rape and threatened suicide if she was compelled to bring the birth to term (the 'X' case). The Court's decision, handed down early in 1992, was that in light of the threat to her life represented by her suicidal intent, the girl was entitled to have a termination of her pregnancy under the 'equal right to life of the mother' element of Article 40.3.3 of the Constitution. This decision had the effect of legalising abortion in Ireland in certain circumstances, a stunning outcome in that it was based on a pro-life clause in the constitution which had been designed to achieve the opposite effect.

Anti-abortion activists reacted fiercely against the 'X' case judgement, and the government decided on a further referendum to resolve the many-sided controversy which ensued. In consequence, in a triple referendum held in November 1992, voters were asked to decide whether to further amend the constitution in order to overturn the 'X' case ruling and also to decide on the rights to travel abroad and to have access to information in regard to foreign abortions. The resulting vote gave an indication of movement in Irish public opinion away from the anti-abortion certainties of the 1980s. It produced clear majorities in favour of letting the 'X' case ruling stand and upholding the right to travel and the right to information. A further referendum on proposed adjustments affecting the 'X' case judgement was held in 2002 but was defeated and left the 'X' case ruling intact.

As a result, abortion is now legal in Ireland under certain circumstances, but no openly acknowledged abortion services are provided since successive governments have shied away from defining operational rules to govern practice in this area. In 2010, in response to a case taken by three Irish women against the Irish state under the European Convention on Human Rights (the case of *A, B and C v Ireland [2010] ECHR 2032*), the European Court of Justice ruled that, while there was no right to abortion under the Convention, Ireland was in breach of the Convention by failing to define a procedure to enable woman C in the case to establish whether she qualified for an abortion under existing Irish law. This ruling imposed an obligation on the Irish Government to define and give legal effect to such a procedure. At time of writing, the government is awaiting the report of an expert group it set up to recommend how it should implement that obligation, thus setting the stage for further controversy on Irish abortion law in the near future.

Marriage and Partnership. Alongside contraception and abortion, the third major contentious issue in the politics of sexual morality in Ireland in this era was divorce (Dillon, 1993; Hug, 1999). The ban on divorce in the Irish Constitution had come increasingly under question since the 1960s. In April 1986, the government announced a constitutional referendum to drop the ban, encouraged by opinion polls which showed that substantial majorities of the population were in favour of change. However, in the campaign leading up the referendum, anti-divorce activists forcefully warned of the harm done to women and children by 'easy' divorce and changed many voters' mind. In the event, a majority of 63 % of voters rejected the amendment to allow divorce, another stunning victory for the defenders

T. Fahey and E. Nixon

of the status quo. However, in 1995, in a second referendum on divorce for which the government had prepared the ground more carefully, the electorate voted by a tiny margin (a majority of 50.28 %) in favour of change. This outcome paved the way for a divorce bill which had been published in advance of the referendum to be enacted in 1996. This came into effect in February 1997 as the *Family Law (Divorce) Act*, the statute on divorce which is still in effect today. The conditions for divorce in this legislation are based on no-fault principles but nevertheless are more restrictive than in most other countries in that 4 years of separation are required before a divorce can be granted.

Tussles over divorce in Ireland in this period are often interpreted as having major symbolic and practical significance for family culture and behaviour. In fact, much of the important change in both law and behaviour in regard to family instability had already occurred before divorce was enacted and left limited additional work for the new divorce law to carry out. As a result, divorce proved to be something of a damp squib when it arrived (Fahey, 2012). By the 1980s, well in advance of the advent of divorce, family law had developed a patchwork of provisions for dealing with marriage break-up, and these did much of the necessary work, though without making available the right to remarry. Also, this system brought nonmarital couples and their children within the ambit of family law. Measures on child custody and access (Guardianship of Infants Act, 1964), maintenance of children and spouses (Maintenance of Children and Spouses Act, 1976) and domestic violence (Family Law (Protection of Children and Spouses) Act, 1981) regulated key aspects of de facto separation in a piecemeal fashion and did so through quick and accessible procedures in the lower courts (the District Court). The provisions on domestic violence in particular (which were reformed and extended in the *Domestic Violence* Act, 1996) were heavily used and for long seem to have functioned in effect as something akin to a poor woman's version of unilateral judicial separation (Fahey & Lyons, 1995). More comprehensive settlements for marriage break-up, often involving division of property, were available in the form of judicial separation orders obtainable in the mid-level courts (the Circuit Court). When judicial separation was reformed and made available on a no-fault basis in the Family Law Reform and Judicial Separation Act (1989), the demand for it increased, though the cost and slowness of procedures meant that the simpler remedies available in the District Court continued to account for a higher volume of family law cases.

Divorce legislation enacted in 1997 neither transformed nor replaced this existing system but merely rounded it off by dealing with one outstanding issue – the right to remarry. That right has turned out to be relevant only to a minority of separating couples: in Census 2011, of the 14.3 % of the ever-married women who had experienced a marital breakdown, about half (7.5 %) were separated rather than divorced and only one in five had remarried (Central Statistics Office, 2012a). Today, as mentioned earlier, marital breakdown remains low in Ireland by European standards, though the large share of breakdowns accounted for by de facto separation makes it difficult to measure the rate of marital breakdown precisely (Lunn & Fahey, 2011).

Nonmarital Partnership. A shift in the locus of relationship instability into short-term and cohabiting unions in part accounts for the limited rise in marital breakdown in recent years. Child-bearing outside of marriage had gained a new level of social acceptance with the introduction of income supports for unmarried mothers in 1973 (the Unmarried Mothers Allowance). In 1987, the Status of Children Act prohibited discrimination against children born outside marriage, thereby weakening the historical function of marriage as a way of defining legitimate claims to inheritance. In 1990 and again in 1996, reforms of welfare supports for lone parents amalgamated payments for different categories of lone parents (the widowed, the unmarried, deserted and prisoners' wives, the separated and divorced) into a single scheme (Kennedy, 2001). These developments helped to give rise to the rapid increase in nonmarital child-bearing and lone parenthood outlined earlier.

Cohabitation also rose: by 2011, 15 % of couple households consisted of cohabiting couples and almost half of these had children. Cohabiting relationships are less stable than marital unions and in most cases represent a trial arrangement which either dissolves or progresses to marriage as partners reach their late 20s (Lunn & Fahey, 2011). The emergence of same-sex couples was a small but

significant part of this picture. Homosexual acts had been classed as criminal in Ireland until 1993, at which time homosexuality was decriminalised with notably little controversy. In the *Equal Status Act* (2000), family status and sexual orientation were included as two of the nine grounds on which discrimination was prohibited. Census 2011 counted 4,042 same-sex couples living together, which was almost 3 % of cohabiting couples. The growth of cohabitation and the unavailability of marriage to same-sex cohabitants gave rise to increasing calls for greater legal recognition of nonmarital or 'civil' partnerships. In response, the *Civil Partnership and Certain Rights and Responsibilities of Cohabitants Act* was passed in 2010. Under this statute, cohabitants (including those in same-sex partnerships) acquire legal rights and responsibilities in regard to each other after 5 years of cohabitation if they are childless or 2 years if they have children. Where one or both partners were previously married, partnership rights come into being only if the previous partners have been separated for at least 4 years.

Family Income Support and Antipoverty Policy. Financial supports for families are often regarded as the core of family policy, usually with reference to families with children but sometimes also including families with disabled or elderly dependents (Daly & Clavero, 2002). The financial supports that may be provided fall under two broad headings: cash payments and tax breaks in the income tax code. In Ireland by the 1980s, a patchwork of income supports for families had evolved, focused mainly on those with dependent children. These included a nontaxable universal cash payment (children's allowances/child benefit), a number of highly targeted cash payments (there were separate provisions for widows, deserted wives, unmarried mothers and prisoners' wives), additional payments for dependent children of recipients of unemployment supports (originally labelled 'child dependent allowances', now known as 'qualified child increases') and income tax breaks for children and stay-at-home spouses. While the purpose of the schemes could rarely be tied down to a single clearly defined objective, two purposes could be said to dominate and inform most schemes at that time: combating poverty and upholding the male breadwinner model of the family (i.e. by supporting mothers to remain within the home).

Since the 1980s, the concern with poverty and social disadvantage has continued to inform policy on income supports and services for families. However, support for traditional gender roles in the home has been turned on its head and redirected towards the promotion of gender equality, though less completely and with greater continuing acceptance of gender differentiation in the balance between home and workplace than in many other European countries.

With regard to poverty, in the 1980s, large families with children (mostly with two parents) were judged to be the population category most at risk of poverty, and in more recent years, lone-parent families have taken over that position. Throughout, however, children in families have persistently had up to double the poverty rates of other age categories in the population (Commission on Social Welfare, 1986; Department of Social Protection, 2010). These patterns highlight the persistent difficulties faced by family income supports in reducing poverty rates among families with children.

In the 1980s and early 1990s, the failure of policy in this area could be attributed at least in part to the low level of payments involved: income tax breaks for children had been eliminated and family cash supports in Ireland were small by the standards of other northern European countries (Daly & Clavero, 2002). From the mid-1990s onwards, however, family cash benefits improved a great deal, and by the early 2000s, their total value expressed as a share of GDP had reached the average for OECD countries (OECD, 2003). They increased further to rise well above the OECD average later in that decade, though continuing poor public provision of childcare meant that the combined value of cash benefits and services for families remained more or less at the OECD average (OECD, 2011). The outcome was to achieve some reduction in child poverty but, in a context where overall poverty rates were in decline, the gap in poverty rates between children and other age groups did not narrow. Furthermore, international comparisons suggested that Ireland was getting a relatively poor antipoverty benefit for its high level of cash payments to families: it was spending more than average on cash benefits but still finding itself with higher-than-average child poverty rates and with particularly high poverty rates among lone-parent families (Department of Social and Family Affairs, 2006; Department of Social Protection, 2010).

T. Fahey and E. Nixon

As the 2000s progressed, the search for a solution to family poverty paid increased attention to parental employment and the role of 'missing earners' as drivers of family poverty (OECD, 2011). In Ireland, this concern arose particularly in connection with lone parents since the core family benefit for such families – the One-Parent Family Payment – was by then quite large by international standards but was criticised as a 'social exclusionary wage' which trapped mothers in long-term welfare dependency and did too little to support them into quality jobs (Department of Social and Family Affairs, 2006). This shift towards employment promotion as a dimension of family policy meant that traditional antipoverty concerns increasingly overlapped with what previously had been a separate strand of policy: combating gender inequality by enabling women with family responsibilities to have greater access to jobs and independent incomes outside the family home.

Family Income Support and Gender Equality Policy. Ireland's accession to the EEC in 1972, along with changing public opinion in Ireland, had caused Irish policymakers to eliminate the more overt barriers and inequalities affecting women's employment in the 1970s, such as the marriage bar mentioned earlier and the differentiation of rates of pay for women and men in the same jobs (McCashin, 2004). In addition, a social insurance-based maternity benefit was introduced for working women in 1981. Today, this benefit, which is received by about two-thirds of new mothers, is relatively generous by international standards - it provides 26 weeks of paid leave along with a further 16 weeks of unpaid leave (there is no statutory provision for paternity leave, while a provision for 14 weeks of unpaid parental leave up to the child's eighth birthday is rarely availed of (Drew, 2010)). Further reforms of the family tax-benefit system to achieve a similar pro-employment effect were slower to emerge and remain contentious – an element of familism in the definition of women's roles persists in these aspects of family policy. In fact, a change in the income tax treatment of married couples occasioned by a Supreme Court judgement in the Murphy case (1980) had the effect of intensifying that familism in the 1980s. It gave a new and substantial tax benefit to stay-at-home wives and thereby served to disincentivise married women's entry into paid jobs (Kennedy, 2001). The value of this tax benefit was large: in 1991, it entailed a tax expenditure of £350 million (Callan & Farrell, 1991), which was more than the £325 million spent on child benefit and lone-parent payment combined at that time. Other developments in social security policy also served to reinforce the role of women as homemakers. This was particularly so of the payments for single mothers introduced in 1973 and later reformed and amalgamated with widows' pensions and other schemes to emerge as the One-Parent Family Payment (OFP) in 1997. While these schemes sought to provide some incentive to lone parents to take up paid employment, the pro-employment provisions were weak, and the net effect of the OFP was to sustain lone parents as full-time or near full-time homemakers until the youngest child reached age 18 or age 21 if in full-time education (Department of Social and Family Affairs, 2006).

In light of the regressive and anti-employment features of the tax benefit for stay-at-home wives, the government set out in 1999 to eliminate it by individualising the income tax treatment of married couples. This caused the income tax burden on single-earner couples to rise sharply as the income-earning partner lost the benefit of the tax allowances of his/her stay-at-home partner. In spite of the logic in favour of this move, it caused a storm of protest from those who read it as an attempt to 'force' mothers into paid jobs (Kennedy, 2001). The government immediately sought to allay public hostility by introducing a new and largely gestural tax credit for 'home carers', which was intended to benefit not just mothers in the home looking after dependent children but also those caring for adults with disabilities or dependent elderly relatives.

Although tax individualisation was partly pushed through by 2002, the opposition it had generated scared off policymakers from adopting further measures to incentivise mothers to take up paid employment since, viewed from the other side of the coin, these measures could be portrayed as penalising the stay-at-home mother (Byrne, 2007). This reluctance to shift family supports in a pro-employment direction was reflected in the pattern of increase in family benefits: as expenditure on these benefits more or less doubled in the period 2000–2009, they continued to be either unconnected with work incentives (as with universal child benefit) or tilted towards stay-at-home parenting (as with the OFP).

Furthermore, in 2006, in response to agitation from families about the soaring cost of childcare (most of which fell as a private cost on families), the government introduced the Early Childcare Supplement. This was an add-on to child benefit for children up to the age of 5 years designed to help with the cost of pre-school childcare. Its crucial feature was its adherence to the neutrality principle in regard to the choice between paid work and caring: it was provided to *all* parents with young children, thus leaving it to the parents themselves to decide whether to use it to help pay for childcare or to support a stay-at-home parent (usually the mother).

As the first decade of the 2000s came to a close, however, policy on family supports began to shift away from neutrality on the choice between work and full-time caring in the home to adopt a stronger activation approach. The first major step in this direction occurred with the termination of the Early Childcare Supplement in 2009 and its replacement in 2010 with a 'universal free pre-school year' for 3–4-year-olds – the first fully state-funded early childhood care and education service provided to all children in Ireland. While this service is not tied to parental employment status, it has the effect of facilitating paid employment among mothers. It may also deliver developmental benefits for children, particularly those from disadvantaged backgrounds, and thus may eventually help to combat educational disadvantage. It is also the only instance in the history of Irish family policy where a universal cash payment has been withdrawn and replaced by a universal service (a switch achieved with remarkably little opposition). Furthermore, the new service was provided at about one-third of the cost of the cash payment it replaced since the service is concentrated on a single year of the child's life (at ages 3–4 years) where the Early Childcare Supplement was provided for 4 years (ages 0–4).

A second major recent step towards an activation approach in family policy was initiated in Budget 2012 and took the form of a phased reduction in the maximum age limit for children in families benefiting from the OFP. For new claimants, the qualifying age of the child was reduced to 13 years, and a further phased reduction in the qualifying age to 7 years was announced. For existing claimants, a phased reduction in the child's qualifying age was put in place so that it would fall to 13 years by 2016, with the intention that it would be reduced to 7 years on a phased basis after that date. The implication is that when children reach the age limit, lone parents would be reclassified as jobseekers rather than lone parents and be treated accordingly from both an activation and income support point of view. This move is in keeping with a number of reforms to the OFP which had been actively considered by government in 2006 but not acted on at the time (Department of Social and Family Affairs, 2006). It remains unclear how fully this initiative will be implemented: it may well be affected by the parallel provision of after-school childcare, since it is recognised that activation of lone parents is likely to be hampered by the excessive cost or poor availability of childcare. Fiscal pressures arising from the current financial crisis impede the further development of childcare services, and so the overall extension of activation for women with children is constrained.

Fiscal pressures arising from the financial crisis have also raised question marks over child benefit. The large increases in the generosity of this benefit during the years of economic boom mean that, after old age pensions and unemployment payments, it is now the most costly social security expenditure in the state. However, as a universal, nontaxable benefit which children receive until age 18 (or age 16 if not in full-time education), it is thinly spread over the child population – the average payment per child in 2010 was €38 per week – and it has only limited redistributive effect, as the persistence of child poverty shows (see also Department of Social Protection, 2010). In Budget 2010, as part of overall cuts to public expenditure, child benefit rates were reduced by 10 %, with compensating increases for low-income families through increases in Qualified Child Increases and Family Income Supplement (this, in effect, amounted to a modest switch towards more targeted supports). In Budget 2012, higher rates of payment of child benefit for larger families were abolished. Proposals to means-test child benefit or make it liable for income tax have also been made, but the administrative and legal challenges facing such changes, along with questions about their underlying logic, make it unlikely that they will be attempted (Department of Social Protection, 2010). Nevertheless, the scale of expenditure on child benefit makes it likely to come under further scrutiny as a target for cuts as further fiscal adjustments are made in the near future.

T. Fahey and E. Nixon

Family Policy Implementation and Assessment

Ireland for long had only a limited tradition in monitoring and assessing the efficacy of social services, but there have been many improvements in recent years, particularly in regard to both general analysis of the effects of the tax-benefit system on income distribution (for recent examples, see Callan et al., 2011; Callan, Keane, Savage, & Walsh, 2012) and more focused analysis on particular areas (e.g. in regard to child income support, see Department of Social Protection, 2010). Household surveys on incomes and living standards have evolved since the 1980s and, apart from a gap in 2002– 2003, have been available annually since 1994 (the current version is the Survey of Income and Living Conditions conducted under EU regulations – see Central Statistics Office, 2012b). These data sources have formed the foundation for extensive government-funded policy-relevant research on poverty, social welfare and social exclusion, which in turn provided the framework for the Irish Government to frame poverty reduction strategies. In the National Anti-Poverty Strategy adopted in 1997, the Irish Government was the first in the EU to set an explicit poverty reduction target. The concept of 'consistent poverty' which provided the basis for the poverty reduction target itself reflected close links with the world of research since this concept had been developed by Irish researchers who have made important conceptual and methodological contributions to poverty research internationally (Nolan & Whelan, 1996; Whelan & Nolan, 2011; Whelan & Maître, 2012).

Another important recent development was the initiation in 2007 of the *Growing Up in Ireland* study. This is Ireland's first national longitudinal study of children and is based on samples from two cohorts (infants and 9-year-olds at initiation) numbering more than 20,000 children and families (for initial reports, see www.growingup.ie). While the primary focus of this study is on children's well-being, it also provides rich information on children's family contexts and thus represents a major advance in the data infrastructure for family studies in Ireland. Thus, apart from piecemeal evaluations of individual family-based services which have been conducted (Cousins, 2007; McKeown, Haase, & Pratschke, 2003), efforts to understand the impact of policy on family have been concentrated on the issues of poverty and social exclusion and, more recently, child well-being.

Conclusions

Family policy in Ireland has evolved through a number of major phases over the past century or more, in regard to both the policy instruments used and the goals that were pursued. For the first half of the twentieth century, policy focused on normative regulation of family behaviour and on distribution of property (especially farmland) in support of family production units entailing traditional gender and generational role divisions. There was only limited development of income supports and family services of the type then emerging in other developed countries. The economic and social models underpinning these efforts were clearly in crisis by the 1950s, thus setting the stage for a sharp change of direction from the 1960s onwards.

That change of direction became most evident through normative conflict on contentious moral questions, especially contraception, divorce and abortion. The resolutions arrived at on these issues by the 1990s were quite liberal relative to what had prevailed up to the 1960s but, on some issues (especially abortion but also, to a lesser extent, divorce), were still at the conservative end of the European range. Family income supports broadened over this period but, apart from one universal payment (children's allowances/child benefit), took the form of targeted cash supports for particular family contingencies with little by way of family services. Policy retained a strong focus on poverty reduction but also grappled inconclusively with questions of gender equality – some policy developments supported women's entry to paid work outside the home but others did the opposite in response to popular resistance to the idea that mothers should be 'forced' into paid employment.

The period since the mid-1990s has been relatively quiescent in regard to the normative regulation of family-related behaviour, though it is possible that demands on government to regulate the limited access to abortion which in principle is available under current Irish constitutional law will cause this topic to resurface in public debate. The economic boom from the mid-1990s to 2007 was accompanied by large increases in family income supports, but their impact on relative poverty among families with children was disappointing, largely – as the most common judgement on this question would now hold – because they did too little to encourage maternal employment among less well-off families. The advent of economic crisis in 2008 has led to some cuts in family benefits but has also been accompanied by a partial shift in family policy towards activation and the development of family services (especially pre-school childcare) facilitating parental employment. However, cash supports for families still dominate in the provision of family supports. In the current period of fiscal consolidation, pressures to cut back on their total cost, to target them more narrowly and to tie them more closely to activation measures are likely to continue.

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T. Fahey and E. Nixon

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Chapter 10 Family Policy in Germany

Eileen Trzcinski and Jessica K. Camp

Abstract In the period between 2000 and 2012, Germany made two major directional changes in its policies regarding family, labor market, and social assistance. The demographic and economic factors that drove these changes were (1) the low fertility rates of women in Germany; (2) the related demographic consequence of the aging of the population, together with real declines in the population; and (3) high levels of unemployment that were viewed as economically unsustainable. As a result of these trends, the primary goal pursued by Germany was to attempt to increase the percentage of persons within the middle of the age distribution who are economically active. One set of policies implemented to achieve this goal included expansions of parental leave and benefits, increases in the availability of childcare, and the implementation of long-term care insurance. A second set of policies resulted in retrenchments in the generosity of the level of unemployment benefits and social assistance. This chapter describes the details of these forces, the changes in the policies, and the families who gained and who lost.

Keywords Parental leave • Parental benefits • Childcare • Long-term care insurance • Unemployment assistance • Social assistance • Hartz IV

Family Policy in Germany

As defined by its constitution, Germany is a democratic and social federal state. Its Basic Law is the Federal Constitution, which was ratified on 23 May 1949; the most important recent amendment was instituted on 5 October 2009 (Deutscher Bundestag, 2012). This amendment limits the amount of debt of the Federal Government to 0.35 % of gross domestic product effective 2011, with a transition period until 31 December 2015, and requires all of the German states to maintain balanced budgets by the beginning of 2019 (Federal Ministry of Finance, 2011). The German Democratic Republic (GDR, formerly East Germany) was reunified with the Federal Republic of Germany (FRG, formerly West Germany) on 3 October 1990. Since reunification, Germany consists of 16 states. Germany is also one of the 27 members of the European Union.

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Historical Context

In the last half of the previous century, Germany developed a comprehensive social welfare system. Historically, the German social welfare system did not focus on the provision of supports that enabled women to combine market work and caregiving, particularly when children were young. Instead, it concentrated on the development of financial supports that enabled women to withdraw from the labor force after childbirth and during the child-rearing years without economic hardship for the family (Trzcinski, 2000, 2003). Within Esping-Andersen's (1990) typology of welfare, Germany was a prime example of the corporatist welfare state regime. These regimes have two primary characteristics. The first centers on the preservation of status differentials, which has the effect of negating the redistributive impact of state policies. The second centers on the role of the church and a concomitant emphasis on the preservation of traditional family forms. This emphasis resulted in social insurance that typically excluded women who were not labor market participants and in the principle of "subsidiarity," which emphasizes that "the state will only interfere when the family's capacity to service its members is exhausted" (Esping-Andersen, p. 27). One of the status differentials preserved under such a typology is that between women and men. Although the more dramatic forms of discrimination against women no longer exist, cultural norms still strongly promote a gendered division of labor (Tesch-Romer, Motel-Lingebiel, & Tomasik, 2008). In addition, these policies and the associated conservative policies behind them also constrained women's abilities to gain higher positions in the labor market and reenforced roles for men as the breadwinner as opposed a caregiver. Specifically, men who specialized in home production were subject to social disapproval, while women, particularly women who were working mothers, were criticized if they occupied highlevel positions in the labor market that were seen as interfering with their responsibilities as mothers (Holst, 2000; Slotkin, 2008). Until recent decades, however, these policies protected most children from poverty.

During this period from 1950 to the end of the century, West Germany did not develop policies that enabled women to participate equally with men in the labor market, and until recent decades, this suited the needs and preferences of women in the FRG. The picture for women from East Germany was different, however. During the existence of the GDR, they lived within a system where work and family were both equally encouraged. Hence, they found the transition to the social and economic system of the FRG difficult (Trzcinski, 1998, 2003). Although reunification between West Germany and East Germany occurred more than 20 years ago, attitudes and behavior towards work and family responsibilities have not yet converged. The extent to which substantial differences exist between the two parts of Germany can be observed in Fig. 10.1, which shows the percentage of children between 0 and 3 who are in formal childcare, including the percentage of children in full-day childcare. The percentage of children in full-time childcare ranges from 4.9 % in Bavaria, a state in West Germany, to 39.7 % in Thüringen, a state in East Germany (Krack-Roberg, Krieg, & Weinman, 2011). Similarly women who are currently not in the labor force in West Germany have stronger preferences for part-time work than their counterparts in East Germany. In 2009, 23 % of East German women preferred part-time work compared with 47 % of West German women (Holst & Schupp, 2011).

Changes in Policy: 2000-2012

In the period between 2000 and 2012, Germany made two major directional changes in its policies regarding family, labor market, and social assistance. These changes were driven by demographic and economic concerns. The policies improved the economic well-being of more educated women and their children but resulted in the deterioration of the well-being of families that faced higher probabili-

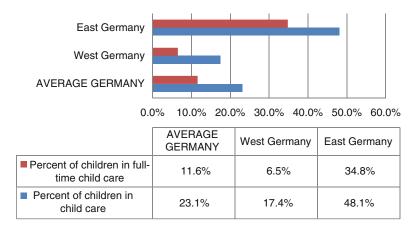


Fig. 10.1 Percentage of children in child care, 2010 (Source: Krack-Roberg et al., 2011)

ties of unemployment, including the economic well-being of single mothers and immigrants who faced much higher short- and long-term unemployment rates. These policy changes were accompanied with increases with poverty and inequality (Deckl, 2011; Faik, 2012; Gernandt & Pfeiffer, 2006; Goebel, Habich, & Krause, 2011).

The demographic and economic factors that drove these changes were:

- 1. The low fertility rates of women in Germany
- 2. The related demographic consequence of the aging of the population, together with real declines in the population, declines that are projected to continue for the next coming decades
- 3. High levels of unemployment that were viewed as economically unsustainable

Germany has one of the lowest fertility rates in the world, lower than 1.4 per women (Eurostats, 2012). In 2011, 663,000 children were born, the smallest number ever born in a given year and half of the number born in 1964 (Statistisches Bundesamt, 2012a). In addition, childlessness is disproportionately high among well-educated women in West Germany. In 2008, among women aged 40 and older with high education in West Germany, 26 % were childless, compared with 16 % of women with middle education and 11 % with low education. This same pattern is not observed for East German women (Pötzsch, 2011). The fertility rates have been beneath replacement for several decades and are driving population declines and changes in the age structure of the population. Germany reached its largest population in 2002 (82.6 million) with small declines each year until 2010. By 2009, the populargest population in 2002 (82.6 million) with small declines each year until 2010. By 2009, the populargest population in 2002 (82.6 million) with small declines each year until 2010. lation had declined to 81.8 million. The percentage of population aged 65 and older was 20.7 % in 2009 compared with 10.7 % in 1955 (Grobecker, Krack-Roberg, & Sommer 2011). The total dependency ratio, that is, the combined youth and elder dependency ratio, was nonetheless somewhat lower in 2009 (65.1 %) than in 1965 (72.8 %). Although 8.7 % of the population is foreign, the degree of immigration is not substantial enough to halt the projected declines. The projected population declines from 2010 to 2055 are presented in Fig. 10.2. Within 45 years, demographers project that population will decline by more than 13 to 69 million people.

Another important factor that informed policy change was the rapid increase of the number of unemployed persons within Germany, which had major political implications. The number of unemployed increased from reunification until 1997, following with some decreases afterwards. From 2000 to 2005, however, the number of unemployed climbed dramatically from 3.1 to 4.6 million, an increase of 1.5 million persons (Fig. 10.3). The unemployment rate peaked in 2005 at 10.6 % (Asef & Wingerter, 2011).

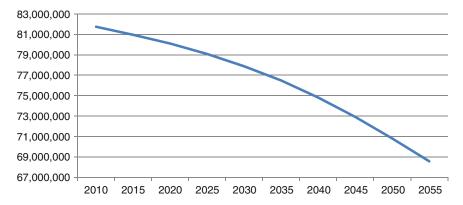


Fig. 10.2 Germany: Projected population trends 2010–2055 (Source: Eurostats, Population Projections)

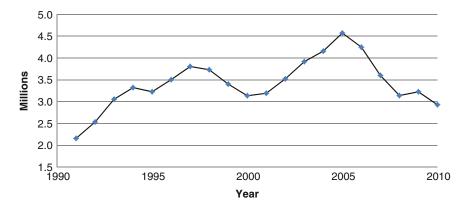


Fig. 10.3 Number unemployed in millions, 1991–2010 (Source: Asef & Wingerter)

Political Implications of Changing Demographic and Economic Trends

As a result of these demographic and economic trends, the primary goal pursued by Germany from the middle of the 2000s until 2012 was to attempt to increase the percentage of persons within the middle of the age distribution who are economically active. The high unemployment rates and the associated benefits paid in unemployment and social assistance benefits were viewed as unsustainable. According to Evers, Ewert, Meißner, Wolf, and Zimmer (2011), unemployment passed at a critical stage in 2005 when it rose above 4.5 million persons and resulted in the defeat of Germany's former social democratic chancellor Gerhard Schröder, who had promised to reduce unemployment during his period of office. During the 2005 campaign, the Christian Democrats (CDU) used the slogan "Social is what creates work" (Sozialist, was Arbeit schafft). The policy promise was to move towards neoliberal policies and to implement workfare policies. These workfare policies were accompanied with considerable cuts in social security payments for those who were aged 15-65. Unemployment benefits and social assistance payments were drastically reduced, and receipt of benefits became tied with work requirements. As detailed below, the long-term unemployed and those with less favorable chances in the labor market have suffered the most severe economic consequences. Although these policies resulted in reducing the unemployment rates, the quality of jobs that the unemployed are forced to take is low; these jobs do not offer security or the ability to move into job ladders where the individual can eventually access better jobs. Unemployed persons are required to

accept any employment that is reasonable. The criteria that must be used to decide whether the employment is reasonable include:

In principle, any employment is considered reasonable. This is stipulated in Section 10 of SGBII. Exceptions are allowed, for example on physical, mental or psychological grounds or where pay rates are solo was to be deemed immoral. Care of children under the age of three or care of dependents may also be given as grounds for rejecting an offer of employment. Other compelling reasons can also be taken into account – in particular, attendance of a school of general education.

Recipients of unemployment benefit II who reject a reasonable offer of employment, apprenticeship, opportunity to work or place on an integration scheme can expect to have their benefit reduced and then, if offers are repeatedly rejected, stopped altogether. (Federal Ministry of Labour and Social Affairs, 2012, p. 31)

Undefined are the levels of pay rates that are "so low as to be deemed immoral." According to Evers et al. (2011), these policy shifts resulted in the implementation of a "blame the victim" mentality, where people are responsible for success or failure. Some minimum protections did remain, however, for the children of unemployed persons.

The second drive of policy change was the low fertility rates and the limited participation of women who were mothers in the labor market. Many structural barriers existed in Germany that prevented women with children from participating full time in the labor market. Germany did not have full-time school days even for children aged 6 and older and childcare was scarce. The first guarantees to childcare were implemented in the 1990s, when all children aged three and over were guaranteed a space in childcare until the child became old enough to enter primary school. This legislation denoted a policy shift for Germany because it was the first time that the impetus for childcare included the mother's right to have supports to enable her to work as opposed as solely the rationale of the human development of the child (Trzcinski, 2003).

In the 1990s, women were becoming more vocal and militant about their desire to have institutional structures that would enable them to combine their caregiving responsibilities with market participation. According to Fleckenstein (2010), the rise of women aged 18–44 as an important voting bloc led the German conservative political parties to adjust their policy platforms regarding parental leave, parental benefits, and childcare policies. In Fleckenstein's analysis, Angela Merkel, who became the first female chancellor of Germany following the 2005 elections, assessed one of the major reasons of her defeat in 1998 was the CDU's failure to mobilize women. Women between 18 and 44 had showed strong support for left parties since the 1970s. In the 1998 election, even the majority of women aged 45 and 59 had provided support to left parties, with a substantial increase in older women lending to their support to liberal parties. The CDU concluded that it needed to change its policy platform to regain the support of the center, particularly of women in the center of the political spectrum. The CDU's solution was to develop a family model that was viewed as "women-friendly" (Fleckenstein). The policy responses were dramatic changes (1) in parental leave and benefits and (2) in legal commitments to increasing the number of childcare slots for children aged less than 6 years old.

Finally, the aging of the population resulted in legislation in 1995 that mandated long-term care insurance, with payments under the program starting in 2000. The provisions of this program maintained the long-standing policy in Germany that family members are the primary caregivers (Trzcinski, 2003), although it does not require that family members provide the care. Instead, it allows those who need care to choose institutional or home care. Under this program, it is possible for employees to combine caregiving with employment. Nonetheless, the overall spirit of the legislation maintained the "male-breadwinner model," whereby women are assumed to be the primary caregivers, even if these responsibilities interfere with their full participation in the labor market.

The current rhetoric of the CDU has been articulated by Dr. Kristina Schröder, the Federal Minister for Family Affairs, Senior Citizens, Women and Youth. Dr. Schröder notes that current German family policy should do the following: focus helping single-parent families with the development of additional child and elder care programs, create more flexible parental leave, and promote family-friendly

work environments that allow single parents and women to work and meet family care needs (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2011).

Expansions of Family Policy from 2000 to 2012

Parental Allowance and Leave

The Federal Law of Parental Allowance and Parental Leave was implemented in January of 2007 and replaced the child-rearing benefits in Germany formerly outlined under the Federal Law of Child-Raising Allowance of 1986. Parental allowance is a cash benefit that is calculated on a sliding scale ranging between 65 % and 67 % of the income that a parent was earning 12 months previous to the birth of their child (Federal Ministry of Labour and Social Affairs, 2012; Statistisches Bundesamt, 2012b). The allowance is set at a minimum of €300 per month with maximum benefits capped at €1,800 per month (Federal Ministry of Labour and Social Affairs, 2012; Statistisches Bundesamt, 2012b). For two-parent families, the parental allowance can be received for a minimum of 2 months and a maximum of 12 months for each parent. The total time receiving benefits cannot exceed 14 months (Federal Ministry of Labour and Social Affairs, 2012; Statistisches Bundesamt, 2012c). Single-parent families, on the other hand, are eligible for the entire 14 months of allowance (Statistisches Bundesamt, 2012c). Additionally, families who had a total monthly income that was below €1,000 per month, who have more than one minor child, or are single-parent households may be eligible for additional amounts of parental allowance (Statistisches Bundesamt, 2012b). Only couples who earn over €500,000 annually or single parents that earn over €250,000 are not eligible to receive the parental benefits (Federal Ministry of Labour and Social Affairs, 2012).

A change in the parental benefits was implemented July 2011. For families that are receiving social assistance from unemployment benefit II, the parental allowance is deducted in full from cash benefits (Federal Ministry of Labour and Social Affairs, 2012). This policy has a discriminatory effect on vulnerable families. Families that follow the traditional pattern of where a mother does not work receive an income supplement regardless of their economic situation, unless it is above the very high-income thresholds mentioned above, whereas unemployed parents are in effect forced to forfeit the allowance. These allowances are also tax-free for parents who are not unemployed.

Parental leave allows mothers and fathers to take time off or reduce their work hours for 2 months to 3 years per child without the threat of dismissal from their job (Federal Ministry of Labour and Social Affairs, 2012). Parents can also choose to take their time simultaneously or separately. They can also save a year of parental leave to use at a later point in time between the child's third and eighth birthday (Federal Ministry of Labour and Social Affairs). To receive the part-time benefits, parents must be employed prior to having their child, must work less than 30 h a week, and must let their employer know 7 weeks prior to taking parental leave (Federal Ministry of Labour and Social Affairs).

On average, families claimed €749 per month with average amounts differing from region to region. In general, parents from East Germany claimed less parental allowance than parents in West Germany (Kreisen, 2012). Some of the lowest family allowances were claimed in Bremen where average benefits were about €653 per month and Saxony-Anhalt where the average parental allowance was €646 per month (Kreisen). The highest family allowances were claimed in Hamburg with an average of €850 per month and Bavaria with €835 per month (Kreisen).

In addition to allowance amounts differing by region, there are also differences by type of family. Fathers and mothers who were not employed prior to the birth of their child received on average \leq 329 per month, while families with parents who were employed had an average allowance at \leq 964 per month (Kreisen, 2012). Gender differences also exist. The average claim for fathers was \leq 1,201 per

month, while the average allowance for mothers was €878. Despite these differences in allowance amounts, women are most frequently the recipients of parental allowance (78 %) when compared to men (22 %) (Statistisches Bundesamt, 2012b).

To encourage fathers to participate more in childcare, the Parental Allowance and Parental Leave Act of 2007 included 2 additional months of leave that have become known as "partner months" or "daddy months" Geisler & Kreyenfeld, (2012). Although men remain less likely to take time off to care for children, there has been an increase in the number of men who take leave since the implementation of the new policy. Geisler & Kreyenfeld (2012) note that the new policy may give men some security and allow them to move away from the traditional "male-breadwinner model" that may have prevented them from taking time to care for their children in the past.

Child Benefit

In Germany, anyone with children, including foreign citizens, are eligible to participate in family policy programs that are designed to support families and children while reducing risks of poverty, neglect, or abuse. In general, parents with children are eligible for €4,368 annually in tax relief for children under the age of 18 or, in special circumstances, children under the age of 25 (Federal Ministry of Labour and Social Affairs, 2012). Additional tax breaks for parents in the amount of €2,640 annually can be provided to help buffer the costs of childcare, child-raising, and vocational training expenses (Federal Ministry of Labour and Social Affairs).

Childcare Guarantees

In 1996, parents were granted the legal right to be able to access public childcare services for children aged 3–6. This right entitled parents to part-time, not full-time, childcare. Additionally, this right only ensured the availability of child care services, not that all child care needs or costs would be covered. According to Evers, Ewert, Meißner, Wolf, and Zimmer (2011), the expansion of childcare availability had three phases:

- 1. The expansion of kindergarten for children aged 3–6
- 2. The parents' needs and demands and needs for lunch for children, over-noon, and full-time care
- 3. The expansion of care arrangements for children aged 0–3, which had no exposure of childcare in West Germany

In Germany, childcare is a joint responsibility of federal, state, and local governments. In 2007, federal, state, and local governments agreed to provide for 750,000 children under 3 years care services in a day-care facility or family day care by 2013. To achieve this goal, more than 230,000 spaces must be created for toddlers within the next year. Beginning 2013/2014, the Childcare Promotion Act of December 2008 (Kinderförderungsgesetz) also provides for a parent's legal claim to a childcare place for all children aged 1 and older (Statistisches Bundesamt, 2012d).

Long-Term Insurance

According to Federal Ministry of Labour and Social Affairs (2012), approximately 2.42 million people in Germany require long-term care, with 0.75 million living in nursing homes and 1.67

million cared for at home by relatives, neighbors, volunteers, or professional carers. Since 1 January 1995, all persons with statutory or private health insurance are also required to have long-term care insurance; payments under the system began in 1 January 2000. Contribution levels for statutory insurance are 1.95 % for employees and .975 % for employers. The long-term care insurance program explicitly recognizes and actively encourages the role of family members in the provision of long-term care:

The main 'provider' of long-term care has always been the family. People who live at home and need help with day-to-day activities are usually taken care of by their relatives. This is a good arrangement because most people who need long-term care want to live with their families and in familiar surroundings as long as they can. Hence, home care must be given priority over institutional care. The law thus focuses on providing benefits that improve conditions for home care and relieve the burdens of care. (Federal Ministry of Labour and Social Affairs, 2012, pp. 82–83)

The Ministry also explicitly recognizes that most caregivers for those with long-term care needs are women. The level of payment that a person receives under long-term care insurance depends on the level of need and on whether the care is provided by close relatives or by others relative. The amount of payment for home-based care from 1 January 2012 ranged from €235 for the category "considerable need of care" provided by a close relative to €1,150 for the category "maximum need of care" provided by others.

Close family caregivers who take leave in order to provide care are refunded for lost wages, up to maximum amount paid to other persons that provide care. Statutory contributions for pensions and health insurance are also paid for caregivers on leave from work. Caregivers who are not participating in the labor market, such as retired wives or mothers, receive the lower rate of compensation. Employees who are providing nursing care for a dependent relative are entitled to 6 months of leave, if their employer has a workforce of at least 15 employees. The caregiver has the right to choose between full-time and part-time leave. They will receive up to the maximum of €1,510 per month for lost wages during this period. For emergency caregiving situations, employees have the right to take 10 days off from work. All statutory insurance premiums are covered by the long-term insurance program. Caregivers who reduce their working hours beneath 30 hours per week or who withdraw from the labor market are also credited with contributions into the statutory pension system at rate that depends on the level of care provided. In order to receive these benefits, the caregiver must provide nursing care at least 14 h per week.

Retrenchments in Labor Market and Social Support Policies

Changes in Unemployment and Social Assistance Policies: The Hartz Reforms

In response to growing unemployment rates, the German government implemented reforms to the three-pronged unemployment benefit and welfare program in Germany. These reforms, named the "Hartz Laws" after the chairman of the reform commission who proposed them, were implemented between 2003 and 2006 and changed the nature of unemployment and social assistance in Germany (Ochel, 2005). The Hartz reforms were comprised of three main components: (1) increasing the effectiveness of labor market services and policies through the reorganization of employment agencies and the policies that governed them; (2) encouraging the unemployed to seek jobs by implementing new sanctions, attempting to "make work pay," and by enforcing a principle of "rights and duties"; and (3) by encouraging a rise in labor demand through a deregulation of the labor market, especially in the temporary work sector (Jacobi & Kluve, 2006). In short, the Hartz reforms changed the German unemployment and social assistance system into a two-tiered system focused on welfare to work programs.

The Hartz reforms were implemented in four separate steps. The most recent of these reforms, called "Hartz IV," was implemented in January of 2005 and drastically changed the unemployment and welfare benefit program in Germany. The first of these changes altered unemployment insurance, also known as *Arbeitslosengeld I* or unemployment benefit I, by shortening the amount of time a person could receive assistance from 32 months to a maximum 12 months of assistance for those under the age of 55 and 18 months for those over the age of 55 (Fleckenstein, 2008; Ochel, 2005). Secondly, long-term unemployment assistance and social assistance programs were combined for those who were able to work to form *Arbeitslosengeld II* or unemployment benefit II (Fleckenstein, 2008; Ochel, 2005).

Unemployment benefit II is means tested on the basis of basic needs, family status, and willingness to work (Krause & Uhlig, 2012). Unlike the former social welfare system, unemployment benefit II covers individuals between the ages of 15 and 64 who are long-term unemployed and who are unable to meet their basic needs, yet able to work at least 3 hours every day without being hindered by illness or handicap (Ochel, 2005; Schneider, 2008). As of January 2012, single individuals without children receive cash assistance of \in 374 per month (Ronicke, 2012; Verein für soziales Leben, 2008). Spouses who live in the same household who are also receiving unemployment benefit II receive a standard of \in 337 per month. Families also receive assistance for children based on their age. Children aged 0–5 are eligible for \in 224 per month, between the ages of 6 and 13 \in 251 per month, and between the ages of 14 and 17 \in 287 per month (Verein für soziales Leben). Recipients are also able to have housing and heating covered just as long as the costs are considered reasonable or within acceptable price ranges. Additionally, unemployment benefit II covers the mandatory contributions to compulsory social insurance, which provides health-care coverage and, later in life, provides an old-age pension (Ochel, 2005; Ronicke, 2012).

Recipients of unemployment benefit II are pressured to participate in the labor market. To aid in transitioning recipients to work, a number of employment services are offered that can include job counseling, job placement, and vocational training (Schneider, 2008). As previously noted, an individual receiving unemployment benefit II is mandated to accept any aid to transition into the labor market and offered employment opportunity or they run the risk of being sanctioned. As stated by Ochel (2005) under Hartz IV, a "job cannot be turned down because it does not correspond to an individual's profession or education or because the conditions are less favourable than in the last job held" (Ochel). Jobs also cannot be refused if an employer offers to pay wages that are less than those outlined in collective bargaining agreements just as long as the wages offered are legal, at or above the minimum wage requirements for the district (Ochel).

Recipients of unemployment benefit II can be mandated to take community service positions. Community service positions are offered by municipalities, charities, and nonprofits and do not pay a market wage (Hinrichs, 2007). In return for working community service jobs, unemployment benefit II recipients earn a meager €1 up to €2 per hour over their standard cash assistance to compensate for additional costs caused by working. Due to the low compensation rate for community service jobs, they have become known as One-Euro jobs. One-Euro jobs by law are supposed to be "temporary jobs of public interest" that do not compete with regular types of employment (Hohmeyer, 2009; Hohmeyer & Wolff, 2012; Ochel, 2005). One-Euro jobs are designed to assist welfare recipients who are having difficulty in finding other types of employment but can also be used to test a recipient's willingness to work (Hohmeyer & Wolff, 2012). In the event that a recipient refuses an employment or job training opportunity, they will be subject to sanctions or a reduction in their cash benefits by 30 % for 3 months (Ochel, 2005; Schneider, 2008).

Many Germans have been unhappy with the labor market and welfare changes under the Hartz policies. Demonstrations have taken place, especially in East Germany, where there are a larger number of individuals unemployed and the chances of securing regular employment are lower (Hinrichs, 2007). The concern for many is that the Hartz IV reforms will force those who are unemployed and needy into menial jobs that provide meager wages and little opportunity for advancement

(BBC News, 2005). Critics of Hartz IV state that this reform has decreased the living standard for many of Germany's unemployed citizens, putting needy families at a greater risk of experiencing poverty. This is in part because benefits that are offered under unemployment benefit II are much less than those offered by the previous unemployment assistance program (Hinrichs, 2007).

Statutory Health Insurance

German law requires that all persons be covered by health insurance. As Germany has attempted to curtail its health-care costs, patients have been asked to assume a greater burden of the direct costs in terms of co-pays. Such co-pays, although relatively low in absolute terms, do represent a burden for low-income earners. For example, hospital treatment requires a \in 10 per day co-pay for the first 28 days; drugs require a co-pay between \in 5 and \in 10, depending on the pharmacy counter price. Posthospital rehabilitation treatment also requires a co-pay of \in 10 per day for a maximum of 28 days. A limit does exist on the maximum co-pay contribution limit, which is equal to 2 % of assessed gross disposable income. Co-pays are not assessed for children.

Vulnerable Families

As a result of these policy changes and the result of economic downturn in the wake of the global economic recession in 2008, there has been a rise in the number of families at risk of experiencing poverty and hardship. However, increasing poverty and inequality predates the recession (Deckl, 2011; Faik, 2012; Gernandt & Pfeiffer, 2006; Goebel et al., 2011). The implementation of Hartz IV reforms prior to the worst of the recession was viewed as resulting as much lower unemployment levels than predicted levels (a total increase of only 0.5 % between October 2008 and October 2009) (Delfs, Vollmer, & Wullerich, 2009). Nonetheless, the recession had a profound effect on threatening the economic security of many German families, since there was a serious reduction in labor demand that prevented the creation of new employment opportunities (Delfs et al., 2009).

The Federal Statistical Office, or *Statistisches Bundesamt* (2012e), which tracks national economic and social trends in Germany, reported that on average 15.6 % of all Germans were at risk of experiencing poverty in 2011, which represented an increase from the prior year (Statistisches Bundesamt). The chances of living in poverty are not equal for all German families but can differ drastically from family to family. Three main factors that contribute to a family's chance of experiencing poverty are parental employment, family structure, and geographical location. Single-parent families over any other type of family structure have a 43.0 % chance of experiencing poverty. This risk is extremely high as single-parent families are among one of the most likely groups to be poor in Germany, second only to individuals who are unemployed who have a 70.3 % chance to live in poverty (Statistisches Bundesamt). Geographical location can also be important to determining a family's chance of experiencing poverty because East Germans have nearly a 5.5 % greater risk of poverty and are more likely to be unemployed than West Germans (Statistisches Bundesamt).

Single-Parent Families

Current discourse surrounding at risk families in Germany has centered on the challenges facing single-parent families. Single-parent families are at greater risk of poverty. They also represent a large

percentage of all families, nearly 20 % (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2011). Additionally, the number of single-parent families has risen over the past several years from 1.3 million families in 1996 to 1.6 million families in 2010 (Bundeministerium für Familie, Senioren, Frauen und Jugend).

One of the major reasons that single-parent families are at risk for poverty is that single-parent households are predominantly headed by women (90 %) rather than men (10 %) (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2011). This contributes to family poverty because women, especially mothers, face several economic and labor market challenges that are not experienced to the same degree by men. The first of these challenges is that mothers tend to experience a wage punishment, or reduction in wages, due to having a child. The Organization for Economic Cooperation and Development (OECD) (2011) recently reported that German mothers may earn less than half the salary than women who do not have children. Researchers have suggested that mothers may experience wage punishment because of lost work experience from taking breaks from work to birth and care for children, because mothers may become employed in jobs that pay less but offer reduced or flexible hours, and because caretaking and domestic responsibilities may draw mothers away from the formal labor market (Kühhirt & Ludwig, 2012). When examining wage punishment among mothers in Germany, Kühhirt and Ludwig reported that maternity leave decreased mothers' wages by 4 % during the first year of leave, by 8 % by the second year of leave, and by 12 % the third year of leave.

The second major challenge for women in single-parent households is that they are less likely to be participating in the labor force and, when they are employed, are likely to hold part-time labor positions. Part-time work fails to provide the same benefits or economic security that is assured by full-time employment (Organization for Economic Cooperation and Development, 2012).

The inadequacy of the Hartz reforms to provide sufficient income to unemployed parents was recognized by the German Constitutional Court. In 2010, the Constitutional Court ruled in favor of those who challenged the Hartz IV reforms by noting that the payments allotted to children under the age of 14 did not comply with the constitution (Bundesverfassungsgericht, 2010). The court ruled that Hartz IV was unconstitutional because it did not necessarily guarantee a subsistence minimum that was in line with human dignity, meaning that those receiving the payments might not be able to meet a minimum standard of participation in social, cultural, and political life (Bundesverfassungsgericht). The court mandated that by December of 2010, standard benefit amounts must be realistic, adjust to actual need, and meet the necessary levels to secure a subsistence minimum in line with human dignity (Bundesverfassungsgericht). Also, the court mandated that additional funds be available to families and individuals receiving Hartz IV benefits that could be used for emergency, nonrecurring, or special needs expenditures. (Bundesverfassungsgericht).

Families and Domestic and Interpartner Violence

In 1999, Germany instituted the first plan to combat domestic and interpartner violence and solidified this plan in 2007 with the *Aktionsplan II der Bundesregierung zur Bekämpfung von Gewalt gegen Frauen*, or Action Plan II of the Federal Government to Combat Violence against Women (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2012a). Action Plan II outlines over 130 measures that the Federal Government uses to reduce violence. These strategies include increasing prevention, solidifying laws against violence, creating support systems that can assist those affected by violence, working with perpetrators of violence, providing training and awareness, and through supporting additional research on family violence issues (Bundeministerium für Familie, Senioren, Frauen und Jugend).

In Germany, women with disabilities, elderly women, immigrants, and children are at the greatest risk to experience violence (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2012a). Researchers have noted that additional factors that can increase the odds of adult women experiencing

violence include (1) having experienced or witnessed violence as a child, (2) lack of vocational or educational training, and (3) unemployment, especially if both partners are unemployed (Stöckl, Heise, & Watts, 2011). To address these findings, the Federal Government has recently implemented a number of policies and programs targeted to reduce family violence.

For adults who experience violence, a new program created under the *Hilfetelefongesetz*, or Help Phone Act, in March of 2012 now provides a nationwide telephone helpline that provides anonymous advice and information for callers (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2012b). The helpline was created to reduce the barriers that can prevent women who experience violence from seeking help or attaining needed assistance (Deutscher Bundestag, 2011). Also, unlike most shelters and/or women's help centers, the telephone line can be accessed at any time during the day or night which increases the chance of being available to victims of violence when they need it most.

New protections for children who experience, or are at risk of experiencing, violence are outlined in the Federal Child Protection Act. This act, implemented in January of 2012, is focused on both preventing and intervening with violence that occurs in the home and provides funding to strengthen the connection between schools, doctors, and other formal and informal systems utilized by children. Services for children and youth can include support services to help children participate in society, education for parents and children, home assessments for children suspected of experiencing violence in the home, and, if necessary, the removal of the child from a home. Under this act, a new program called Federal Initiative Network for Early Help and Family Midwives was created to reduce incidents of abuse and neglect. This program includes an additional pilot program that will examine early prevention measures and how helping at risk families reduce stress and build strong parent—child bond can contribute to reduced rates of family violence (Bundeministerium für Familie, Senioren, Frauen und Jugend, 2012c).

One noticeable gap in policies for women who experience violence is waivers under Hartz IV regarding employment requirements for women who experience violence. As noted above, women who lack vocational or educational training, who are unemployed, and whose partners are also unemployed are at risk of experiencing interpersonal violence. These individuals are also more likely to be subject the requirements and sanctions of Hartz IV. The lack of additional protections for single mothers, women, and families under unemployment benefit II can thus result in the unintended consequence of making it more difficult for unemployed women and their children to escape violent homes.

Families and Disabilities

Disability policy is important to examine when discussing German families because the family unit is most frequently responsible for providing care and financial support for their disabled loved ones. In acknowledgement of the important role that families play in the care of disabled family members, the German government has created a number of disability policies, laws, and benefits that help ease the financial, social, and care burdens that families with disabilities may experience. Despite these progressive policies, they may not completely buffer families from poverty in the event that a family member falls ill, becomes disabled, or needs long-term care.

In 1994, the German government took a major step towards acknowledging the struggles of individuals with disabilities through outlawing discrimination on the basis of disability (Geist, Petermann, & Widhammer, 2005). Since this constitutional change, German disability policy has continued to move away from the mere provision of welfare assistance to focusing on civil rights and the inclusion of disabled individuals in society and the labor market (Federal Ministry of Labour and Social Affairs, 2012; Geist et al., 2005; Heyer, 2002).

A recent report from the Federal Statistical Office notes that nearly 7.3 million people, or about 8.9 % of the population, in Germany are currently classified as disabled (Statistisches Bundesamt, 2012f). Under the Social Code Book IX, which outlines the rehabilitation and participation of disabled individuals in Germany, an individual is considered disabled if their physical ability, mental capacity, or psychological health is impaired longer than 6 months and hinders their participation in society (Federal Ministry of Labour and Social Affairs, 2012).

The Social Code Book IX provides protections to both individuals who are disabled and to individuals who are at risk of becoming disabled (Bundesministerium der Justiz, 2001). These protections include defending the right for rehabilitation; ensuring that disabled individuals are able to access needed services, benefits, and accommodations to participate in the labor market; and securing and coordinating participation in social and community life (Bundesministerium der Justiz). The severity of an individual's disability is important for determining the types of benefits, employment protections, and social programs that a disabled individual can access. Severity of a disability assessed by determining the percentage difference between the disabled individual's earning capacity and that of equally skilled individual who is not disabled (Burkhauser & Daly, 1994). For example, an individual who is considered 10 % disabled has an earning capacity that is 10 % that of an equally skilled individual who is not disabled and most likely experiences mild limitations that do not drastically interfere with working. On the other hand, an individual classified at a disability level of 100 % has no earning capacity and is unable to participate in the labor market due to the serious nature of their disability. Currently, those who are evaluated as having a disability level that is 50 % or higher are considered severely disabled, while those who are below the 50 % level are evaluated as disabled (Federal Ministry of Labour and Social Affairs, 2012). These two categories, disabled and severely disabled, are important because they are frequently used to determine what types of services and programs a disabled individual can access.

Disabled Adults. Like those who are considered long-term unemployed, many individuals with disabilities were drastically affected by the Hartz IV changes to social welfare. In January of 2005, nearly 90 % of individuals who had formerly been receiving social assistance were assessed as being capable of working at least 3 hours a day and were transferred to unemployment benefit II (Eichhorst, Grienberger-Zingerle, & Konle-Seidl, 2006). This change was due in part to the fact that social assistance provided support for individuals who were partially disabled and could work 6 hours per day, which pushed many individuals from social assistance into unemployment benefit II. The Hartz IV welfare reform used this change to attempt to increase the integration of disabled individuals into the labor market at a greater rate than the previous social assistance program (Rauch & Dornette, 2009).

The Federal Employment Agency, or *Bundesagentur für Arbeit*, works to provide employment assistance to individuals with disabilities with the provision of individual counseling, career preparation, educational and training opportunities, vocational rehabilitation, and financial assistance (Bundesagentur für Arbeit, 2011a). Under provisions outlined in the German Social Code Book III, "as many people as possible should have work" (Federal Ministry of Labour and Social Affairs, 2012). Although all German citizens can access the services outlined under the Social Code Book III, several are uniquely helpful for individuals with disabilities. These services can include an integration subsidy, reimbursement for the cost of vocational training, trial employment positions, and work aids that can assist a disabled individual when they are placed in a new job opportunity.

Although the policies and programs that address the needs of disabled Germans are undoubtedly helpful in helping reduce the risk of poverty among families with disabled adult members, the nature of these protections has changed over the last several years. Prior to the Hartz IV reforms, research indicated adults who became severely disabled were more likely to leave the labor market. For those who continued to work, disabled individuals experienced little wage punishment or work hour reduction (Lechner & Vazquez-Alvarez, 2011). Following the Hartz IV reforms, some evidence suggests that the new regulations have been disadvantageous for disabled Germans. Rauch and Dornette (2009) noted that the new regulations make it very confusing for individuals with disabilities to access

services because those with disabilities are eligible for rehabilitation, vocational training, labor market integration, and social assistance benefits that are overseen by different federal agencies. Secondly, Rauch and Dornette also point out that the new definition of employability, which includes all individuals who can work 3 hours a day or more, ensures that many severely disabled Germans are now considered employable and may not be eligible for the same types of benefits or employment protections as prior to the reforms. Lastly, Rauch and Dornette argue that severely disabled individuals, who are now considered among the long-term unemployed, may be much more difficult to place in employment. This means that disabled individuals may be more likely to have to take service provision positions, or One-Euro jobs, which are inevitably some of the lowest paid jobs that have the poorest working conditions and provide little opportunity for advancement (Rauch & Dornette).

Disabled Children. For German families who have disabled children, there are a number of social protections and programs that can help with the provision of care and help buffer the family from poverty or economic hardship. The first major benefit that parents of children with disabilities can access is extension of the Child Benefit up to 25 years of age if he or she is not able to support themselves, or earn enough to provide for basic needs (Bundesagentur für Arbeit, 2012). When a disabled child becomes 26 years of age, they are considered an adult and are not covered under Child Benefit. Until then, the Child Benefit will provide tax breaks unless their son or daughter earns more than €8,004 annually (Bundesagentur für Arbeit).

When investigating the effect that a child's disability can have on families in Germany, Thyen, Sperner, Morfeld, Meyer, and Ravens-Sieberer (2003) noted that families often began to report difficulties with financial strain. Two factors that contributed to increased challenges with financial strain were mothers having to quit their jobs to provide care for disabled children and increased costs as the child got older (Thyen et al. 2003).

Future Prospects

The demographic challenges that Germany must meet in the coming decades are inevitable. Neither dramatic increases in the fertility rate nor significant increases in immigration will alter the fact that Germany must deal with population declines and the task of providing services and maintaining benefits to a growing number of more and more elderly individuals. The recent expansions to family policy will likely increase the overall productivity of the economy by facilitating the labor force participation of women, particularly women with high skills and high levels of education.

The second set of strategies that were implemented in the last decades, however, will likely make these demographic challenges more difficult. Strategies that blame the unemployed and poor for their plight simply hide the underlying structural causes behind the meager employment prospects facing a significant percentage of the working age population. These policy approaches do not address how to increase the overall productivity of the economy. Without a strong plan that guarantees all Germans are able to develop skills that contribute to increases in the productivity within the economy, the problem of long-term unemployment will continue. Additionally, the social exclusion that will result from the rising levels of poverty and inequality may result in social unrest. The investments that Germany views worthwhile in its family policy must be adopted in its unemployment and social assistance programs. Such policies would enable more and more individuals to add to the value of the German economy in a way that is consistent with real gains in productivity and real wealth. Unfortunately, the recent amendments in the constitution regarding balanced budget constraints and debt limits are likely to constrain Germany's ability to introduce these kinds of policies. A move towards Twenty-Euro jobs, rather than One-Euro jobs, would be a better path to help Germany deal with its demographic challenges in a way that would be beneficial to all Germans.

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Chapter 11 Family Patterns of Change in Italy: Challenges, Conflicts, Policies, and Practices

Giovanna Gianesini

Abstract A growing interest in families and family policy has led to significant new policies in Italy in recent years. Since the fall of 2008, in fact, international financial and economic turmoil has profoundly shaped and impacted the course of reform processes around the world. Considerable differences have emerged in terms of economic performance and the ability of individual states to respond to the crisis with appropriate social measures. Not all welfare regimes, in fact, have adapted to the changing society and labor market. In Italy, the process of welfare reconstructing has developed slowly, moving in the direction of a liberal work-family system that in reality is increasing inequalities (Riva, 2012). The deeply rooted cultural and political resistance to change, together with current budget constraints (Kazepov & Genova), conservative gender-specific division of labor within the family, and a familialism ideology (the male breadwinner being the primarily responsible for the well-being of all family members), has made welfare state reforms hard to implement. However, due to the European Union political and normative initiatives, recently interesting changes especially in workfamily policies have taken place in the country. One of the major problems facing Italy today is tension over whether to allocate more resources to job development or to the expansion of social protection, which adds up to the pressures of globalization and the Europeant Monetary Unit, the lack of infractructures, the need for institutional reforms, the issue of federalism, the discrepacy between the north and the south, the major problems of povery, housing, education and social exclusion, the integration of immigrants and a pattern of income distribution that ia smong the most unequal in the OECD countries. There is tension over whether to allocate more resources to job development or to the expansion of social protection. The chapter overviews the latest updates in family policies and practices and critically discusses their implications and their consequences.

Keywords Social policies • Family policies • Italian welfare • Governance • Policy recommendations • Policy development • Active aging • Domestic violence • Family-work balance • Parental leave • Childcare policies • Marriage-separation policies

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Sociohistorical, Economic, and Political Context

In recent years, Italy, with a current population of 60.6 million, a population growth estimated at 0.04 %, mostly due to immigration, and the fifth-highest population density in Europe, about 200 persons per square kilometer unevenly distributed by region, underwent a deep social and demographic change that weakened family's functions and increased its vulnerabilities. Budget constraints, different political orientations, a growing consent for a federalist reform of the state, and external pressure by the EU integration process have recently forced the Italian government to reallocate and rebalance social expenditure according to the principle of vertical subsidiary (Kazepov et al. 2006). The principle of subsidiary allows central authorities to redesign social policies toward more generous models while allowing more freedom to local practices (Sundstrom, 2003).

Unfortunately and unlike other European countries, Italian policies on the family work against the desire to have a child as the structures are lacking. Youth and unemployment rates are high, careers are de-standardized and uncertain, and inequity has become a structural feature of the Italian economy. Many of the country's structural problems are interlocked, with inadequate bridging between policies and social absorbers. Paradoxically, the introduction of nonstandard work arrangements (fixed term, interim, part time) in the Italian context ended up increasing family vulnerability rather than facilitating family and work balance. Childless couples (20 % of all households) and one-child families are becoming the dominant groups, divorce and separation are rising slowly, marriage rates are falling, foster family care is unusual, and fertility is low (Zanatta, 1998). Nevertheless, Italians are most likely to belong to a three-adult living arrangement, due to the presence of an adult child or a grandparent living at home.

The Italian welfare system follows the conservative or corporative model where social protection is dependent on the individual position on the labor market and the family supplements state interventions (Kazepov et al. 2006). This *subsidiary* has been defined *passive* (Kazepov, 2004) as the family plays a pivotal role in the production of welfare, but the state does not support it. As a consequence, the pressure of families and particular women, overloaded with caring responsibilities, is really high. Maternity leaves, a liberal social provision, in Italy have a distinctly social conservative effect because of the incentives they create for women to leave the workforce during childbearing years (Luck, 2006).

Despite numerous, recent and historical, attempts, a comprehensive reform of social assistance has not been fully implemented. Political affiliation has strongly impacted existing and new social policies. The complex pattern of political power structures and social relations has, in fact, influenced the political favoring of measures addressing family and gender issues. The solution chosen by governmental authorities has been to develop policy programs in support of particular and selected groups with high risks for social exclusion. However, the large geographic and socioeconomic differences, gendered patterns of social inequalities, the practice of means testing, and high level of economic inequalities further contributed in producing weak and fragmented social policies (Henneck, 2003). The emphasis on vertical redistribution (as opposed to horizontal, which should be a guiding principle in family policy) may encourage lower-income women in particular to stay at home, when they receive pronatalist benefits that pay more and give longer leave for third births. Means-tested allowances are more likely to benefit single wage earners more than working wives (Kamerman & KahnA, 2000).

This year, the National Social Security Institute (INPS) along with the National Institute of Statistics (ISTAT) and the Ministry of Labor and Social Policy presented some data with over 300 indicators, broken down at regional level, produced by Italian official statistics on the issue of social cohesion to support policymaking on urgent issues such as labor, human capital, work/family reconciliation, health, welfare and security, poverty, and social exclusion in our country. The information is organized in three sections: *socioeconomic section*, offering an informative picture of sociodemographic and economic life and labor market; *family and social cohesion section*, collecting data on

human capital, work/family reconciliation, health, poverty, and social exclusion; and *expenditure* and interventions on social cohesion, with data on general government social spending, social protection, active and passive labor-market policies, and local authorities' social services.

Family Characteristics

The year 2012 is of particular interest for understanding family patterns of change in Italy, being the European Year for Active Ageing and Solidarity between Generations and hosting the Seventh World Meeting of Families. The Seventh World Meeting of Families held on May 30–June 3, 2012, in Italy represented an opportunity to compare experiences and reflect on the Pope's recent words on the family. The family in the Italian Catholic tradition is a cornerstone (Bergamini, 2012) that starts from the marital relationship, not from the children. In marriage, the individual has to relate with another person different in gender, sensibility, and family history, while in the relationship with children, similarity prevails, as the extension of oneself. Today, as soon as the phase of falling in love, which by its nature tends to emphasize the aspects of similarity, ends, the other emerges in his or her diversity and the relationship tends to collapse. Marriage is the encounter of two different personalities, and the challenge is for love not to seek homogenization but to strive for a constructive relationship (Bergamini). Family is a rapport reached by different people by different routes, a relationships that holds together the diversities, and a profound and mysterious bond requiring affection and respect. Unfortunately, today, couple has no ties with the story that generated it, because everything is flattened out to the present forgetting the sense of history. Instead, the family needs an enriching encounter and a broader horizontal and vertical fraternity that embraces siblings, friends, and grandparents (Bergamini). Modern culture works against relationships and attempts to eliminate the possibility of the bond that unites the individual to the other. In this time of crisis of bonds, a child needs to be able to relate and identify not only with his/her father and mother but also with the relationship that exists between them, understood only when seen enacted. In Italy, family and social bonds are still cultivated and have a strong impact on people's life. The Mediterranean model of family consists of a moral engagement to support all members of the family and reciprocity between parents and children. This intergenerational pact represents a precious tool especially when resources are restricted (Micheli, 2005). Policymakers should tone on it for implementing interventions and services but without excessively relying on families as a surrogate or substitute of social public assistance.

A Review of Family Policies in the Country

Family policy is administered across several public agencies in Italy as there is a vertical fragmentation in the four-tier government: national, regional, provincial, and municipal. At the national level, this includes the Ministries of Family and Social Solidarity, Labor and Social Security, Finances and Budget, Education, Interior, and Health. Social assistance policy is established in a National Social Plan drawn by the central government and the regions every 3 years which guarantees standard services nationwide and defines the distribution of costs and the criteria for access (International Reform Monitor, 2012). However, social assistance today is still moderate and discretionary and provided mostly by local rather than national government (The Clearinghouse on International Developments, 2012) with emphasis on voluntary and nonprofit organizations. Family issues continue to be marginal in the policymaking process where preference is for giving back the family its rightful responsibilities. Over the years, the Ministry of Family and Social Solidarity, has instituted an annual observatory and commission on children, families, poverty, and immigration and is supposed to promote and finance research and intervention proposal, but with limited results (International Reform Monitor, 2012).

Traditional expectations concerning family responsibilities and the gender division of labor have for a long time inspired policies and behaviors in Italy. Only equal opportunity demands, changing women's attitudes and EU recommendations, have changed the country's legal regulations and its policy measures addressing family relations and responsibilities. The outcomes of these changes have depended on the overall political culture, the existing institutional framework, women's movement and trade unions, and left-wing political parties in a period of social unrest and social change. Those policies, however, were unsuccessful in modifying the subsidiary approach to family policy, inscribed in family law, because workers and pensioners still remained the central focus in defining social expenditure (Knijn & Saraceno, 2009).

The Italian legal framework has a constitutional basis. Article 29 of the Italian Constitution stipulating that "the Italian Republic acknowledges the rights of the family as a natural society based on marriage" represents a barrier to the acknowledgement of a legal status to any form of partnership not based on marriage, in spite of the increasing number of cohabiting couples and the visibility of the homosexual movement. The only second-order change in family legislation occurred in 2004 with the introduction of shared custody in case of marital separation as the norm and not the exception, thus strengthening the rights of fathers in the name of gender equality and of the rights of children. Article 37 of the Constitution stipulates both gender equality in the workplace and that "work conditions must grant women their crucial family responsibilities and grant mothers and their children adequate protection" (Knijn & Saraceno, 2009).

Unfortunately, traditional family roles, a strong Catholic tradition, and a weak national government have resulted in a limited and fragmented welfare state that has long avoided explicit family policies (The Clearinghouse on International Developments, 2012). In Italy today, looking after children and elderly remains a family responsibility, leaving the family of origin and entering the job market are delayed (7 % by the age of 25 vs. 75 % in Europe), and public assistance to families is scarce. Women are encouraged to stay at home by practical difficulties in resolving work-family conflict (Henneck, 2003) and by strong informal incentives to leave the workforce for their child-rearing years. Despite recent equal opportunity policies, in the reality of facts, women discrimination in the workplace, although illegal, is rampant. During job interviews, female candidates are always asked to disclose their age, family status, and number of children; at hiring are often required to sign a letter of resignation to be used by the employer in case of a pregnancy and, upon returning to work after a maternity leave, are too often forced to quit the job for diminished job responsibilities, limited career opportunities, isolation, mobbing, and social pressure.

The Italian historically weak states (Ferrera & Hemerijck, 2003) had followed a peculiar path from government to governance where the family is expected to substitute for welfare measures and services (Trifiletti, 1995, 1998, 2003). Although governance is a key feature of the transformation of contemporary social policies (Daly, 2003), in Italy, the absence of coordination and the monopoly of the Ministry of Labor have negatively impacted the agenda for social issues. Regions have been invested with the entire and exclusive responsibility for social assistance, with no national standards, shared means, and control. Thus, the universalism lacking at the national level is somehow recovered at the local level (Trifiletti, 2009). A solid and promising institutional framework for the reshaping of social services was set up, but the long implementation rules resulted in a largely incomplete reform. Today, Italian social policies continue to be evasive and delayed (Boeri & Ferrera, 2001), and the country scarce political interest in the EU agenda for social issues is mostly due to the traditional weakness of the political system and difficulties in implementing medium- and long-term strategies.

The law for "the realization of an integrated system of social intervention and services" (Law 328/2000) first approved in 2000 by the Italian Parliament replaced the 1890 legislation partially correcting the structural imbalance in allocation of public resources between "social assistance" and "social insurance" and establishing local networks for providing social assistance and policy measures (The Clearinghouse on International Developments, 2012). This reform of social assistance services was an innovative turning point, but the constitutional revision of 2001 completely disarticulated and

undermined the frame (Sabatinelli, 2009, 2010). As the national government has been traditionally weak in addition to the problem of vertical fragmentation due to Italy's four-tier government (national, regional, provincial, and municipal), most of the responsibility for child and family policies is either regional or municipal. At the national level, cash benefits, family allowances and maternity and parenting benefits, are the most significant social measures, while tax benefits (exemptions for spouse and dependent children) and social assistance are modest, of marginal importance, discretionary, and provided by local, not national, government. Maternal and child health services, infant and toddler care, child welfare, and related social services are largely the responsibility of regional and local governments, while education, including preschool, is the most important responsibility of the national government.

The "White Book on Welfare," published by the Ministry of Labor and Social Policy in 2003 (www.welfare.gov.it), reemphasized the aim of a social policy recognizing the family as an active subject and a primary actor in the welfare and proposed reforms. It took a markedly different approach to welfare policies, hypothesizing a profound revision of the social policy scheme and measures, and a rationalization of the contradictions created by the decentralization and devolution of previous years. Unfortunately, the quality of families' life remained the same. The White Book represented a change of direction with regard to the construction of a "comprehensive" welfare, kind of a "new moral economy of welfare," with more freedom of choice and increased responsibility given to the private sector, but still inconsistent and ineffective (Tosi, 2003). Italy is the epitome of categorical, decentralized, and targeted social policies. As a result, family policies are inconsistent across the country and firm national data are often unavailable. Moreover, economic disparities between north and south further exacerbate the problem of standard of living inequities nationwide. Philosophically, the church/state tension continues to surface in various child and family policy debates. Despite an explicit preference for a targeted policy strategy with a priority on the poor, Italian health and preschool education continues to stress the benefits of universalism, although current resource constraints may affect some universal services, especially health services (The Clearinghouse on International Developments, 2001).

In 2012, Italy still has no explicit family policy nor a social coherent policy focus on family members or the family as a unit. Instead, Italian social policy is directed toward certain categories of families and family members, in particular children, pregnant women, poor families, and families with a disable child. In some ways, Italy's social policy has traditionally been more child than family oriented, lacking coherence, and with a limited and fragmented welfare due to a strong Catholic tradition coupled with a weak national government, on the one hand, and strong regional governments coupled with an industrialized and affluent north on the other (International Reform Monitor, 2012). The Italian family is synonymous with Italian society, and social policy is family policy in Italy (Sgritta, 2002). The more generous family policies of the north were the result of overall geographic and social changes, in particular lower birthrates and much higher female labor force participation rates (The Clearinghouse on International Developments, 2001). Existing Italian national family policies stress cash benefits for maternity and parenting but not for broader social support, and health and education but not personal social services except for early childhood education and care. The Plan of Action for Children and Adolescents drawn up by the Ministry of Solidarity in 1996 had, in fact, recommended the following guidelines: to develop adequate knowledge of the condition of children and adolescents; to reduce the gap between the north and the south with the aim of reducing child poverty, which is largely in the south; to promote greater attention to children as outlined in the UN Convention on the Rights of the Child; to increase the participation of children and adolescents in social life; to oppose the exploitation of children; to promote the development of services for children; and to prevent child poverty (Department of Social Affairs, 1996). Yet, Italy's benefits to families and children were low at 3.7 % of GDP (gross domestic product) in 1999 compared to the EU average of 8.5 %. In 2004, Italy spent 26.1 % of GDP in the provision of social protection and benefits to its citizens mainly to provide old-age and survivors' pensions (61.3 %) and public health services (25.9 %). While the latter is below the European average, the former is much higher and in 2012 reached 11.5 % of GDP. The high pension expenditure can be

explained by the lower expenditure on unemployment benefits (2 %) with respect to the EU average (6.5 %), as unemployment compensation is based on early-retirement policies rather than unemployment benefits. The public spending on education in Italy was reported at 4.58 % in 2008, while public health expenditure was 6.64 % in 2008 and 7.35 % in 2009. In 2012, the expenditure for families, home, and social exclusion is 4.7 %, also far below the European average. In May 2010, the Italian government announced a budget bill of €24 billion in cuts and savings in public expenditure. This law, highly criticized, decreases by 70 % the budget for family policy (from €185 to €52 million) and by 66 % the youth policy budget (from €94.1 to €33 million). It also abolishes the social policy fund reserved for regions (€187 million). From January 1, 2012, the retirement age for female public employees has been raised to 65. The new pension system extends, from 2012 onwards, the contribution-based regime to all workers, and substantially reforms both the old age and the early retirement schemes envisaging, among other things, an increase in the retirement age of women working in the private sector. In addition, the mechanism linking the eligibility criteria to changes in life expectancy has been further strengthened. As a result, the statutory retirement age for pension will be 67 for all workers in 2019 and higher than 70 in 2060. The average retirement age will therefore increase from 60-61 in 2010 to about 64 in 2020, 67 in 2040 and 68 in 2050. The retirement age becomes, this way, linked to life expectancy and is potentially unlimited, so young people will lose forever any certainty about their pension rights.

Social Policies in the "Save-Italy" Decree

The recent Monti's "Technical" Government, nominated in November 2011, approved some urgent dispositions for growth, equity, and establishment of public expenses called "Save-Italy" Decree, (Decree-Law 201), discussed and approved by the Chambers (Law 22, n. 214). In line with laws already approved by the Berlusconi government (Law 111 and 148), these extraordinary measures restricting tax deductable expenses for public health, mortgage payments, assistance to disable, and any other forms of social economic benefits should save an estimated four million euro in 2012, 16 in 2013, and 20 in 2014 and beyond. Minister Tremonti presented to the Chamber on July 29, 2011, a draft law (n. 4566) for a radical transformation of the fiscal and social system. Article 10 of the draft specifically pertaining to social expenditure determines the criteria for access to social benefits, social pensions, social card, and all social security services and constituted a "providential delegation." However, these cuts in social benefits are defined as "redistribution" in favor of families with numerous children, women, and youths; thus, the Social Policies Fund (69 millions EUR in 2012 and 44 for 2013) will not receive new funds. This so-called redistribution of social benefits, with imposed limits (numerous families, women, youth), does not include individual not self-efficient. The family economic index (ISEE), is composed of an income, assets, and property index, based on the number of family members and the presence of underaged children, disabled, and elderly, and determines the allocation of social benefits such as the social card (for discounts), the allowance for families with at least three children under the age of 18, maternity check for mother with no other means, free or semi-free school books, scholarships, university benefits, and discounted energy bills (electricity and natural gas). A low ISEE guarantees at the local level benefits like day care, school cafeteria, home-based social and health assistance, university tuition fees, rent, public transportation, trash, and public employment. Only the minimum retirement pension, social pension, and disability checks are by law granted with no reference to the family ISEE. The Ministry of Labor and Social Policies (Article 24 paragraph 27) created a Fund for financing interventions for increasing, both quantitatively and qualitatively, youth and women employment in the amount of 200 million for 2012 and 300 million for 2012, however, as for today, few policies have been proposed and implemented. The Manifesto for the welfare of the XXI century (2010), produced by social policy academics to defend welfare state

interventions, argues that such welfare cuts risk to damage a social situation already extremely weak (Antonucci, 2012). The document briefly reports the most salient social issues (social inequalities, generational issue, and inclusion of migrants) with no empirical data and systematic review of social policy dynamics in the country, only proposing a list of the potential functions of the welfare state in Italy within wider European perspective.

Family Policy Targeting Family Functions

Welfare policies, through the redistribution of social resources, should reduce and manage the social risks connected with the transformed new patterns of change and interdependencies in social life (Sundstrom, 2003). Specific national and cultural contexts illustrate how gender relations are articulated within the family and in the labor market depending on the conditions provided by welfare policies. Thus, family policies matter for individual and families and shape the organization of everyday work, parenting, and household tasks. The stratifying effects of the welfare state and citizen rights along gender lines influence men and women's possibilities to choose between family obligations and employment differently. Genderspecific family spheres have been slowly dissolving due to the increased number of dual-earner families and female employment. Women's access to paid work provides the right to individual social citizenship without deriving it from motherhood and marriage and increases the negotiation power within the family (Luck, 2006). Power differential is critical in adult relationships, and the dynamic of relationships, in terms of power imbalance, is a key factor in understanding the presence of domestic violence, despite and beyond any typification or categorization of the individuals involved (Gianesini, 2000).

In Italy today, intergenerational kin networks fill the gaps of the welfare system and are the most important and reliable resources for economic and care support (Sundstrom, 2003) not only for women but young adults and elderly. The Italian conservative welfare regime is familiaristic; thus, most welfare and care issues are referred to the family unit with social assistance delivered on ground of family failure rather than market failure (Saraceno, 1998). The family has the legal and moral responsibility to secure the economic and social wellness of their members. Consequently, family policies in the country are passive and underdeveloped, strengthening the familiaristic features and producing differences in men's and women's access to social rights. Although the political definition of gender relations is not explicit, policy outcomes show large gender inequalities.

Beyond some structural factor, in Italy, public institutional support is either not available or too expensive (Riva, 2012), leaving families to rely for child and elderly care on informal arrangements mainly provided by grandparents, relatives, or immigrant care workers. The modest monetary child benefits and tax credits are policy measures that depend on income, household structure, and age of the children (Villa, 2005).

Family Policies Targeting Marriage

Family in Italy continues to represent a source of stability and strength in an unpredictable world, with unstable governments and shifting unwealthy economy. The divorce rate is still relatively low (below 15%), and couples are required to be legally separated for at least three continuous years before being eligible for divorce. Both consensual and judicial separation are legally granted in Italy, depending on mutual agreement or unilateral decision. Divorce is granted after legal separation or other reasons such as a spouse committing a criminal offense or the relationship never been consummated. Because of the financial costs involved and women financial disadvantage in divorce, separated couples often do not purse legal divorce status (Henneck, 2003) and separation rates outnumber divorce rates (Fig. 11.1).

SEPARATIONS AND DIVORCES

1971-2010

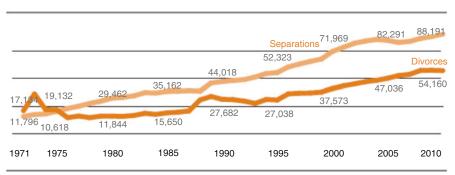


Fig. 11.1 Separation and divorce trend in Italy (1971–2010) (*Source*: ISTAT (Italian National Institute of Statistics), Italy in Figures, 2012)

Once divorce is granted, the judge determines child custody and financial support. However, too often unemployment or working part-time women granted child custody do not receive any child support payment from the father of their children although court ordered. This represents a deterrent to separation or divorce as women are not guaranteed the proper economic support for themselves and their children from the other party. Moreover, the idea that continuity of relationships between children and both parents after divorce is in the best interests of children has only recently penetrated Italian judicial culture. Recent bills intending to make joint custody legally binding have introduced family mediation into the judicial system (Ronfani, 2001). Nationally, social policy contains no provisions for same-sex partners, and the government has been urged to make public its proposals for a law to regulate cohabitation.

Domestic Violence and Stalking

In Italy, recently, the domestic violence problem has been experienced more severely, and the legislative and material assistance and the psychological remedies have been slowly implemented. As it represents a peculiar type of violence, characterized by very frequent recidivism, with close bonds between the victim and the perpetrator, it requires a specific follow-up and protection of the victim. In the country, the legislation on conjugal violence is recent, and Italian judges have not yet changed their familistic attitude and rarely apply these laws. Domestic violence, in fact in the country, is a difficult and uncomfortable topic to discuss as the Catholic tradition considers violence within the home an isolated and private problem rather than a social one (Grrrl, 2010). As previously discussed, the persistence of patriarchal attitudes, gender stereotypes, the portrayal of women in the media, and women public humiliation as sexual object even endorsed by the country ex-Prime Minister Berlusconi represent an impediment to the implementation of a comprehensive, coordinate, and concerted strategy to combat all forms of violence against women (CEDAW, 2005). Unfortunately, in the Italian culture, violence within the family is still viewed as a normal way of dealing with conflicts and keeping the social status quo; thus, it is accepted and condoned. Violence against women is a gender-based violence that is deeply rooted in relationships of inequality between women and men and in men's desire to control (Barrazzetti, Garreffa, & Marsico, 2007). It should also be reminded that the notion of honor killing disappeared from the Italian Penal Code only in 1981 (Law n. 442) with abolishment of the "honor motive" and of "shotgun" marriages in criminal proceedings. Italy's first battered women's shelter opened in 1980, but until 1996, Italy did not have a law against sexual violence. Acquiescence, silence, retaliation, suicide, murder, and divorce were the strategies of resistance utilized by women to combat intimate partner violence. The norms against sexual violence (Law n. 66) passed in 1996 represented another major turning point as it defined violence against women as an offense against the person and no longer as an offense against public morality. In 1998, the provisions against the exploitation of minors in prostitution, in pornography, and in sex tourism as new forms of slavery (Law n. 269) further strengthened the protection of personal dignity and liberty, especially with regard to minors, and introduced new offenses in Italian Penal Code (Article 600): child prostitution, child pornography, possession of pornographic material, and tourism aimed at the sexual exploitation of children. However, only in 2001 "Measures against intra-family violence" (Law n. 154) specifically addressed domestic violence and provided for protective measures such as the removal of the perpetrator from the household. Furthermore, in 2006, a bill of law called "Awareness-raising and suppression measures on crimes against the family on grounds of sexual orientation, gender identity, and any other cause of discrimination" was proposed by Equal Opportunities, Family and Justice Ministry (Barrazzetti et al., 2007).

Finally, in 2009, urgent measures for public security, sexual violence, and persecutory acts (n. 11 and n. 38) were passed. Rape and sexual abuse, in case of physical/psychological inferiority or mystification (Article 609-bis), are now punished with 5–10 years in prison. Sexual acts with minors under the age of 14 or 16 when the perpetrator is a parent, tutor, or cohabiting relative is punished with 3–6 years in prison, while punishment for group sexual violence is higher, 6–12 years. Stalking and persecutory acts (Article 612-bis) are punished with a jail period from 6 months to 4 years or more if victim and persecutor are separated/divorced or in an intimate relationship. Such jail period can be increased by half if the victim is a minor child, a pregnant woman, or a disable person or the persecutor is armed or misstated. Precautionary measures can only be enacted when any other measure results inadequate. Consequently, women are too often left at the mercy of their violent partner without protection. In Italy, every year, 100 women are killed by their male partner, and in 62.4 % of the cases, children witnessed the aggression. One woman in every three, between the ages of 16 and 70, had been victim of male aggression in her lifetime. ISTAT data for 2006 showed that in the 12 month pre Gli ultimi dati Istat sono relativi al 2006 e alla fascia di eta' 16-70 anni. Raccontano che nei 12 mesi precedenti alla rilevazione il numero delle donn in 2006, 1.150 million women (5.4 %) were victims of violence, of which 3.5 % suffered from sexual abuse and 0.3 %, about 74,000 women, have been raped or attempted raped (CEDAW, 2005).

Policies Targeting Childrearing

Maternity and Parental Leave

National legislation established a mandatory 5-month paid and job-protected maternity leave for all wage-earning mothers at the time of pregnancy and childbirth. The first law was enacted in 1912, and the legislation subsequently was amended several times, to cover agricultural workers, domestic servants, and recently professional women and the self-employed. The leave begins 2 months before expected childbirth and ends 3 months after with a cash benefit replacing 80 % of wages provided through the social security fund. All full-time working mothers are also entitled to 2 h a day of rest time during the first year after birth. In the case of maternal death or severe disability, the rest periods can be taken by the father.

After several years of effort, a parental leave policy was enacted early in 2000 (Law 53/2000) that entitles either parent to take up to 10 months' leave at any time until the child is 8 years old, following

maternity leave. The 10-month leave is extended by an additional month if the father takes at least 3 months of the leave. Parental leave is a family entitlement that can be shared by both parents or used exclusively by one of them. During parental leave, parents receive a benefit equivalent to 30 % of earnings. Employers receive state incentives to offer part-time employment opportunities to parents following leave. Small firms, which have to temporarily replace the workers, may receive a tax benefit. Parents have the right to take job-protected leave, paid at 30 % of earnings, to care for a seriously ill or disabled child under age 3. Adoptive and foster parents of children under age 6 have the same right to the 3-month leave following adoption and the optional 10-month leave after, for children under age 3. In the reality of facts, however, male workers are strongly discouraged from taking parental leave by employers and forced to face unpleasant consequence (mobbing, less responsibility, less workload) if they do so, and parental leave is still taken by women at least 95 % of the time (Trifiletti, 2009).

Childcare and Preschool Programs

Public care services at the pre-elementary level are unevenly distributed and largely inadequate. The compulsory paid maternity leave was implemented to keep the demand for the service low. Designed solely for education purposes and not to facilitate the employment of mothers, these services are not accessible enough to be an alternative for working mothers. Childcare, serving children aged 3 months to 3 years, covers the full work day, opens from 7:30 am to 6:30 pm, and is publicly funded and largely publicly operated with income-related fees. Working mothers are given priority as well as single or poor mothers with children or a disable child. Yet despite these illegibly criteria, most of the children are from middle- and upper-class families, and given the shortage of places, most children of working mothers are still cared for by relatives or domestic helpers providing in-home care. Regional and local governments are the responsible agencies for funding and operating the programs. Thus, quality varies enormously, with excellent services in the north and center of the country (The Clearinghouse of International Developments, 2012).

The Italian preschool program, serving children aged 3–6, open from about 8:30 a.m. to 4:30 p.m., is largely financed by the national government and under the responsibility of the Ministry of Education, free and voluntary. However, private programs, many of which under religious auspices, account for 1/3 of the facilities. In recent years, the increased demand for public preschools has been mostly due to smaller families and parents' concern about the growing isolation of young children and awareness of the value of group experience and child's right to social development and parental belief that state schools were of higher quality, more convenient, and a better preparation for primary school. Over 90 % of Italian children are enrolled in preschool programs, which is among the highest rates of enrollment in the European Union. Almost 60 % of the children in the country attend public preschools, while only 20 % are in church programs and 10 % in other private programs. Compulsory primary school begins at age 6 (The Clearinghouse of International Developments, 2012).

Child and Family Allowances

In Italy, child benefits are means tested, tax exempt, and contingent on employment status, provided for children up to age 18, with no age limit for disabled children, and among the lowest in Europe. Child benefits, contingent on employment, are paid to employees and calculated in inverse function to the household income and in direct proportion to the number of family members (International Reform Monitor, 2012). Family allowances, on the other hand, are cash benefits provided to low-income employees and pensioners based on the presence and number of children in the family.

Originally, they were universal and a large portion of the population received them. Over the years, the number of potential beneficiaries has declined, and of those receiving benefits, more than 50 % are now old-aged pensioners. Moreover, since they are not indexed, they lost almost 40 % of their real value between 1988 and 1996. In the 1960s and 1970s, family allowances constituted about 5–10 % of a worker's wage for a couple with two children but, by the early 1990s, were worth practically nothing. At the end of the 1990s, legislation reducing family allowances for those with income over a certain level was enacted. Between 1996 and 1999, the number of beneficiaries has increased, and the benefit level has been raised by about 20 % and by 25 % in cases of families with a disabled child (or other relative). A new means-tested benefit was introduced in 1999 for all families with more than three children below 18. This creates increased assistance to low-income families but also increases the financial disincentive to work, for those who qualify. A nonrefundable tax credit and survivor's benefits are available for children. Social assistance is discretionary, financed and delivered by municipalities, and varies greatly across the country (see Table 11.1 for an overview of Italian family policies).

Family-Work Balance

The main guidelines of public intervention in Italy still do not offer favorable conditions for work and family reconciliation, despite recent reforms of the labor-market regulations (Law 20/2003 and Decree 276/2003) promoting flexible forms of contracts and part time (Riva, 2012). In fact, Italy still records one of the lowest part-time employment rates in Europe (14.8 % compared to 18.6 % Eu-27 and 21.4 % Eu-15 average in 2010). The law acknowledges parental leave entitlement on an individual basis for both parent affirming fathers' care rights and responsibilities. However, due to a deeply rooted gender relations model, which drives fathers to prioritize their jobs and professional career over their own children, the scarce generosity of the leave provision, and a low support and flexibility at the workplace level, in 2010, only 6.9 % of working fathers used at least 1 day of parental leave (Riva). Despite the current social and cultural changes, the Italian leave policy model remains the "short leave male breadwinner" (Luck, 2006).

It appears that the Italian attempt to reconciliate working time with family tasks takes place and is defined primarily at the workplace level. Many rights and social benefits are entitled only to those holding standard employment contracts, thus producing a strong segmentation in the labor force, and flexibility is practiced more to company's advantages than to improve the quality of work and family for employees (Riva, 2012). The diffusion of flexible working hours is limited, and work-family life agreement is unevenly distributed among companies and sectors (Riva).

The reconciliation of work and family commitments in Italy, in fact, has emerged as a relevant concern under the influence of EU directives and recommendations, from materialism toward the improvement of women's condition on the labor market (Riva, 2012) and consequently characterized by being employment rather than social policies. Depending on the government's orientation (center left vs. center right), policies had focused on increasing public childcare provision (Law 285/1997 Provision for the promotion of the rights and opportunities for childhood and adolescence) or on promoting flexibility in the workplace (White Paper of the Welfare State, good life in an active society, Ministry of Labor, Health and Welfare, 2009) or on bargaining at the company level (Italy 2020 Agenda for women's inclusion in the labor market, Ministry of Labor, health and Welfare and Ministry for Equal opportunities, 2009) (Riva). The center-right government maintains a neo-familialist approach and interprets reconciliation policies as synonymous of employment policies and not as an element of gender equality (Riva). After the Berlusconi government that drastically lowered social investments in Italy, the new technical government led by Prime Minister Monti approved urgent dispositions for financial stabilization and welfare policies aimed at re-qualifying and integrating

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Italy	
Family or child allowances	Family allowances are payable to families with dependent children under the age of 18. The spending is allocated by population size from 0 to 17 years inclusive Common eligibility by age assumptions apply
Family or child allowances (means-tested) and Allowance for households with at least three children	Payable to dependent children under the age of 18 (no age limit if disabled). Allocated to children aged 0–17 years inclusive. Figures for the means-tested family allowance are to be interpreted with caution as low income couples with no children can be eligible for this benefit. Benefit for families with three or more children are paid to families where at least three children are under the age of 18. The spending is allocated by population size from 0 to 17 years inclusive
Income in the event of childbirth (non means-tested and mean tested)	Paid to mothers either side of birth (lave for employed is 1 or 2 months pre- and 3 or 4 months post-birth; for the self-employed: 2 pre- and 3 post-birth). Parental leave of 6 months is also available to parents (mother or father) with a child below the age of 3. An additional 4 months (so 10 months leave in total) can be taken before age 8. The social spending is allocated up to age 8 by splitting the amount into month shares by year of age. With 1.5 months in the prenatal years, 3.5 months in year 0. Six months between years 0 and 2, and 4 months between 3 and 8. The latter two amounts are tapered assuming that most families take leave earlier. Amounts are also adjusted for replacement rates in the compulsory (80 %) and non compulsory (30 %) period. Common elicibility by age assumptions ambly
Other periodic cash benefits (means-tested and non-means tested)	These benefits are mainly workers' benefits. The cash means-tested benefits focus on services delivered to a range of people and so only three quarters of that share will be given over to the spending profile. The 25 % removed is to cover elderly families that may not care for children 75 % of the investment is used and given over to children aged 18 and below by shared population size (the family allowance dependency limit) Common eligibility by age assumptions apply
Child day care (pre-primary education) Child day care	Spending is allocated by enrollment in pre-primary institutions as reported in the OECD Education Database for 2007 Child day care services are mainly taken up by families with children aged 0–3 because from age three maternal schools provide almost free and universal service which can run for 8–10 h per day (Scoula Materna). It is still possible for some older children (4–5 years of age) to receive care for reduced hours The expenditure is divided between children aged 0–2, and increased to account for higher enrolment in by the older children, 17 % of spending is allocated to newborns, 33 % to 1-year-olds and 50 % to 2-year-olds
Other benefits in kind for families (means and non-means tested) Accommodation for families Education	Allocated by population in ages from zero to 17 years inclusive. Common eligibility by age assumptions apply Allocated by population in ages from zero to 17 years inclusive. Common eligibility by age assumptions apply The OECD Education Database provides spending amounts by ISCED level of education and enrolment figures by years of age. For tertiary education spending on those aged over 27 years of age has been removed (total amount * total enrolment/under age 27 enrolment rate) before spending is allocated

Source: OECD, Doing better for Families, 2011

public social assistance. However, it has been calculated that the government will have drastically reduced social investment from 1.594 tp 144 million between 2009 and 2012 between 2007 and 2013 (Gori, 2011). Social actors strongly responded to this welfare cut with a dossier on how the public economic and financial policies are destroying social policies and investments for social rights (Black Book on Italian Welfare).

In Italy, the labor market is the main provider of work-family support and involvement, and commitment of employers becomes a crucial condition for success. Consequently, the issue of family reconciliation continues being a private/individual responsibility with a shift toward a collective bargain negotiation and company policies. However, the coverage at company level is still limited, depending on circumstances, economic investments, facilities, sector, and territory, thus fundamentally biased, non-universalistic, and patchy. A need for a genuine welfare community emerges that views reconciliation policies as a social citizenship right, universally recognized (Riva, 2012).

Health

Italy had a universal national health service established in 1978 that in 1993 was turned into an incometested alternative. Children up to age 12 are still covered as well as pregnancy, chronic/rare diseases, and Family doctors, doctors on guard during weekends, evening hours, and holiday, routine prevention screenings, hospital services, and emergencies (assessed for severity with color green and red) are free of charge, while a means-tested co-payment is required for all other services. The National Health System, planned and financed at the national level, is delivered and managed at regional and local levels, often closely linked with other social services. There is a significant difference in access to health care and quality of care between the north and the south and between urban and metropolitan areas.

Active Aging and Solidarity Between Generations in Italy

As Italy undergoes profound demographic change, a falling birthrate (Table 11.2) and increasing life expectancy, active aging becomes an increasingly important topic in the fields of employment, welfare, health care, social relations, and economics, as it poses some major challenges for governments and society. The major demographic revolution in Italy in recent decades pertains with the radical transformation in the age structure of the population. There are already over half a million more "grandparents" (over-65-year-olds) than "grandchildren" (under-20-year-olds), and it has been reliably estimated that this difference could exceed six million within 20 years (Department of Family Policies, 2012). These shifts in age structure, a typical symptom of a country's demographic maturity, need to be accounted for in social policies not to become a source of family instability.

The European Union declared 2012 to be the "European Year for Active Ageing and Solidarity between Generations" pursuing continuity and synergy with the experiences of the European Year for Combating Poverty and Social Exclusion (2010) and the European Year of Volunteering (2011). The European Union (European Commission, 2012a) has called upon the member states to promote a national and European debate on the subject aimed at drawing work programs illustrating the national activities, policies, and initiatives planned for the year (European Parliament and Council Decision 940/2011/EU). As a response, in Italy, the Prime Minister's Office and the Department of Family Policies proposed a *National Work Program for active, lively, dignified aging in a supportive society* looking at the European context, the demography in Italy, and exploring the institutional activity and commitment at national level. The themes presented ranged from employment and working conditions to lifelong education and training covering; participation in society; voluntary activities; transfer

Table 11.2 Fertility in Italy (years 1961–2011 with a 2020 projection)

Average number of children per woman	
1961	2.41
1981	1.60
2001	1.25
2011 (estimate)	1.42
2030 (projection)	1.49
Births per 1,000 residents	
1961	18.3
1981	11.1
2001	9.4
2011 (estimate)	9.1
2030 (projection)	8.1

Source: ISTAT (Italian National Institute of Statistics), Italy in Figures, 2012

of knowledge from the elderly to the young; potential or latent conflict between generations; smooth, guided transition into retirement; education concerning healthy, active lifestyles; urban mobility and infrastructures to promote a healthy, independent life.

The National Family Monitoring Centre, the technical and scientific institutional reference framework, is now drafting new national family policies and updating the information concerning the main demographic, sociological, economic, and family policy developments (Department for Family Policies, 2012). Over the 2011–2012 2-year period, the Institute for employee' development and professional training, within the Ministry of Labor and Social Policies (ISFOL, 2010), has analyzed specific labor-market targets improving the efficiency, effectiveness, quality, and inclusivity of labor market in preparation for the Europe 2020 strategy and ensured fulfillment of the commitments made by the Italian government in the course of the second round of assessment of the Madrid International Plan of Action on Ageing (MIPAA), launched in 2002 under the auspices of the UN Economic Commission for Europe (UNECE) and on the basis of the decisions taken at the 48th session of the UN Commission for Social Development (2010). The European ESF-Age Network has promoted the development and dissemination of active-aging policies through a more efficient use of the European Social Fund in the area of sustainable employability and work ability (health and safety at work, working conditions, Work Ability Index, lifelong learning, VPL, intergenerational transfer/mentorship, human resource management, career guidance, mobility, work processes and organization, life/work balance) and transition from unemployment to work (public and private employment services, job-to-job transfers, entrepreneurship, social undertakings, new jobs, etc.).

In line with these recent EU policies on aging, the Italian Ministry of Labor and Social Policies promoted social experimentation in the areas of social inclusion and action to combat poverty, child protection, non-self-sufficiency, and active aging, and the Ministry of Health developed avenues for research and action related to preventing a decline in quality of life in the final stages of existence. The "National Health Plan 2011–2013" (Italian abbreviation PSN) introduces the concept of active aging into overall health strategies. Explicit support for the well-being and mental health of the elderly is also provided through the inclusion of those concepts in the "Action Plan for Mental Health" and through future participation in the "Joint Action on Mental Health," which is to be launched in the course of 2012 (Mental Health Europe, 2012). An initiative promoted by the Equal Opportunities Department within the Prime Minister's Office is to examine the effects of aging in greater detail and from a female perspective, in order to enable guidelines to be drawn up with a view to developing strategies for women's active, dignified aging (Italian Department for Family Policies, 2012).

Age Platform Italy, which provides national coordination for Age Platform Europe, (http://www.invecchiamentoattivo.politichefamiglia.it) has further stressed the importance of establishing a "Coalition for 2012" to prepare and submit to the Italian Parliament a draft law on active aging (Deidda & Tedeschi, 2012).

Immigration

Italy is the only European country without a consistent law on asylum rights. The latest legislative reform on immigration, the "Bossi-Fini" (Ministero dell'Interno, 2002) law passed by the centerright-wing government, for regularizing the situation of illegal immigrants already in the country was in reality designed to deter migrant access to the country. Although the law attributed an important social responsibility to employers that had to guarantee a decent life to immigrant employees, with the offer of an employment contract being bound to the offer of accommodation, the law did not eradicate the problem of illegal immigrants. On the contrary, its provisions include limiting personal freedoms of asylum seekers, in total contrast with the Italian Constitution, and in violation of the right to legal defense when refugee status is denied. The administrative detention centers (CPTs), instituted in 1998 by the then center-left-wing government (Turco-Napolitano law on immigration), are in the reality of facts detention structures with no access to legal assistance, personal freedom, and medical assistance in clear violation of human rights (Raimondi, 2005). Italian deportation procedures with no right to legal defense have been too frequent criticized and even condemned by the European Court of Human Rights that in 2008 (judgment Saudi vs. Italy) reaffirmed that the ban on deporting people to countries where they are at risk of torture or ill-treatment is absolute and unconditional.

Recommendations for Policy Development

Contemporary families face the challenges of a globalized world characterized by different societal level of policies, cultural patterns, and welfare regimes. They are always under pressure as they have to deal with the economic constraints of a global crisis and every day struggles in managing children education and care and balancing continuous internal and external requests during all the family life cycle. In Italy, specific patterns of social change have represented peculiar challenges for Italian families – the redefinition of gender roles, the need for reconciliation between family and work, and the presence of immigrants taking up the role of caregivers – and a second demographic transition has caused tensions and conflicts due to inequalities in access to social services and inadequate negotiations among genders and generations. These conflicts require interventions in terms of policy measures and practice, through the development of structure and strategies specifically directed to the family at the national rather than territorial level.

In Italy, family law has been an autonomous field for more than a century (Girard, 1995) traditionally oriented around familial solidarity, sibling interdependence and equality, and intergenerational continuity which resulted in the earlier emergence and higher legitimacy of maternal and child benefits. Legal relationships arising from marriage subsist not only between spouses, in fact, but also between in-laws. A number of the provisions dealing with the rights and duties of marriage and parenthood, like the one determining support obligations and marriage prohibitions, refer to the "interest of the family" as a factor which must be taken into account before a particular act can occur or a certain decision can be made. However, this strong cultural commitment to the family did not translate into a vigorous national family policy (Girard). In Italy, a universalistic, citizenship-based welfare (health and education) coexists with extremely particularistic (pension, child allowance),

occupation-based social benefits, with a considerable new trend toward the latter. However, Italian social expenditure can barely provide support to the poorest part of the population, despite some "welfarist orientation" (Boeri, 2000).

Territorial socioeconomic differences, thus, have led to decentralized, nonhomogeneous, and clientelistic social policies in the country due to this great variation in unemployment, poverty rates, and labor-market regulations. Policymakers should devise their interest toward widely shared and empirically specified social problems (i.e., gender inequity, income policies, pension system, employment measures and contracts) rather than partisan interests and vague norms (Regini & Colombo, 2008).

In a rapidly changing world, while a multitude of new challenges emerge and affect families and individual life, the welfare state is subject to crisis in many parts of the world. Interventions in support of children and their families result from a social debate in the context of both social policy orientations and social policy culture and depend on a complex set of factors.

The development of welfare policies should be affected not just by national and local interpretation of social and economic events but also by the real demands of real families. Policy orientations, in fact, intertwine with different styles of conceiving family, social benefits, and social support and cohesion (Fargion, 2012). The institution of marriage in modern society is no longer the main mechanism by which income is distributed to women and children: households headed by unmarried women have increased as well as divorce and cohabitation rates. Consequently, family responsibilities can no longer be ignored in the workplace (Henneck, 2003). As women's welfare derives in Italy from family dependency and family responsibilities and it restricts their ability to gain fully economic independence, a defamiliarization of welfare obligation is needed for female independence as well as efficient programs promoting family's empowerment and the family's capability to keep on generating social capital (Rossi, 2012).

Italian politicians need to account for new public demands that facilitate adaptation to new challenges with not only economic preoccupations but ethical concerns (Sundstrom, 2003). In a period of renegotiation, restructuration, and changes of welfare policies, family law should demarcate a zone of altruism, solidarity, and economic welfare in a world of competition, alienation, and meritocracy (Girard, 1995). In Italy, an in-depth understanding of social problems requires an urgent, updated rethinking of causes, mechanisms, and solutions, applied to policies and services. Italy unfair and illegitimated social model should increase its social expenditure with no means-tested provision of social services and welfare benefits, combining companies' request for flexibility with families' workfamily reconciliation needs, thus recognizing mutual interests. Policymaking at the national level should involve all social parties to increase policies' effectiveness and acceptance and avoid fragmentation and unfair redistribution (Regini & Colombo, 2008). The improvement of the efficiency, effectiveness, and equity of the welfare system in Italy can be achieved by a greater coordination among social policies' actors, greater transparency in financing the welfare state (Boeri & Ferrera, 2001), and concrete proposals and initiatives. Recent literature and researches have indicated some potentially fruitful indicators (European Commission, 2011a). The first annual review of Employment and Social Developments in Europe (European Commission, 2012b) proposed that a mix of employment and social policies is necessary to ensure a long-term recovery from the current economic crisis that has aggravated Europe's structural weaknesses in terms of income inequality and disappearance of medium-paid job crisis. Raising participation in employment, better social spending, and fairer taxation of top incomes and wealth can contribute to mitigating inequalities. The review stresses that social exclusion from the labor market prevails for elderly, single parents, and low-work intensity households, the so-called working poor. Improving the employability of older workers and encouraging active aging are set out as essential for reaching the EU employment rate target of 75 % by 2020. Active-aging policies are needed to discourage early retirement, stimulate lifelong learning, adapt working conditions to the needs of older workers, and provide care for the elderly. The review and its policy recommendations belong within the framework of the Europe 2020 strategy, the EU's growth strategy to be reached by 2020 for a sustainable and inclusive economy that reinforces the priorities of high levels of employment, productivity, and social cohesion (European Commission).

Conclusions

A culture of responsibility determines a set of high expectations for Italian parents and excessive family ties that heavily weights on families (Krause & Marchesi, 2007). Italy thus has experienced a grave delay in national family policy implementation. The recent debate on social cohesion and social policies and the Italian response to the new EU public policy awareness of the multidimensional and interdependent nature of social exclusion is today still inadequate. The social welfare system in Italy provides a comprehensive array of nonuniversal benefits and services to families, generally low and inefficient (Morgan, 2006). The extent to which a country makes childcare services available and accessible and provides funds to meet the demand of working mothers reflects the political and cultural beliefs about the centrality of parental care (Henneck, 2003). Welfare policies play a decisive role in individuals' and families' opportunity structure and life changes throughout their lives (Sundstrom, 2003). Moreover, they are social phenomena that speak to ideologies as statements of the ethical state. Policymaker's efforts, in fact, redefine the state boundaries and express a moral orientation in relation to modernity (Krause & Marchesi, 2007).

The Italian welfare lacks institutional explicit, comprehensive, and generous family policies, despite a rhetoric defense of the family to include any kind of kinship along intergenerational lines (Riva, 2012). Social protection benefits to support children and families and institutional support are weak (an investment of 1.4 % of its GDP compared to a 2.3 % of other EU countries); thus, fertility and women employment rates are the lowest in western countries (Riva). Work-family policy deficits are especially visible in the provision of childcare and dependent elderly care services, leave facilities, and child and cash benefits (Plantenga & Remery, 2005, 2009). Attitudes toward female employment and the division of labor between men and women in Italy are reflected in political ideologies and welfare political models. The quantity and quality of family policy measures depend on the political implications for gender and socioeconomic situation, political majority, and historical and cultural heritage (Sundstrom, 2003) and traditions. The degree of state control versus local autonomy is also relevant for the outcome of social policies and the maintenance, reinforcement, or alteration of gender relations and differences in definitions of citizen rights. Especially in Italy where the subsidiary principle and its familialistic policies are central, female employment, regarded as a private matter, is still low and depending on care responsibilities rather than job opportunities and individual qualifications. Within-county variations and relativity show that state control is important and relevant for the outcomes of social policies and that the process of policymaking defines citizenship rights. The rhetoric of subsidiary in defending regional political, administrative, and cultural variations is used in Italy to preserve social diversity (Ferrera, 1996, 1997, 2000, 2005) and is both embraced and criticized. The demands of political parties and social groups for a larger degree of universalism in social and family policies have not been successful, and their claims did not make the public debate or political agenda. Ethnographic research revealed in Italy a social context in which the small-family norm is now widespread and the nation struggles to achieve a durable and confident modernity. The Italian system still has to fulfill the three main objectives of any social protection system: reducing extreme poverty and social exclusion, providing coverage against drop in income, and increasing the benefits from participating in the labor market (Boeri & Ferrara, 2001).

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Chapter 12 Family Policies in Spain

Antía Pérez-Caramés

Abstract This chapter presents an overview of social policies addressed to family protection in Spain, starting from a historical perspective and focusing in the socio-economic, political and demographic factors that influence the processes of decision-taking and implementation of these policies. Both the characteristics of the Spanish welfare state within the larger Southern European welfare model as well as the impact of Franco's dictatorship are pointed out as the main contextual elements that allow us to understand the general traits of current family policies in Spain. We will present an analysis on maternity and paternity leaves, childcare services, conciliation policies, fiscal measures towards families, economic benefits, long-term care policies and programmes for fighting against gender violence. The chapter ends with some recommendations, proposals and suggestions for the future development of family policies in Spain.

Keywords Family policies • Spain • Social care • Gender equality

Introduction

Throughout these pages, we will find a synthesis of the policies developed in Spain regarding family protection, focusing exclusively on explicit family policies as defined by Kamerman and Kahn (1978; see also Kamerman, 2009), as well as including all policies, measures and programmes which aim deliberately at the improvement of the welfare of children, of individuals in their family roles and of families on the whole. That is, family policy must put together, on the one hand, the regulation of rights and duties within the family and between the family and all the other social institutions and, on the other hand, the supply of services and economic benefits (Rodríguez, 1994). Starting out from this definition, we will thus analyse the policies of protection to maternity and paternity and their relationship with employment, the policies destined to ensure a minimum standard of living for families with

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¹ By implicit family policies we will thus mean all policies that do not have as their main aim modifying family life conditions, but which have important effects on them. We do not mean to understate here these implicit family policies, as, in the Spanish case, they have been abundantly shown, (please see for example Flaquer, 2002). We nevertheless understand the aim of this chapter to be that of introducing the reader to those policies that are specifically aimed at families.

A. Pérez-Caramés

children, the childcare services, the policies of conciliation of work and family lives and also the services and benefits to care for individuals in a dependency situation, understanding in this latter case that, as explained by Saraceno and Keck (2010; see also Saraceno, 2011), long-term care policies contribute to shape the intergenerational relationships and obligations of the families.

The present chapter is structured as follows. Firstly, we will set out the main sociohistorical, political and economic factors which frame the development and current configuration of family policies in Spain, paying particular attention to the Spanish welfare system and the role of families in social care, as well as to the main social processes and actors that have had an influence on the design of family care policies. We will then analyse the existing policies in each of the intervention areas that are usually gathered under the same dome of family policies. Thirdly, we will comment on the process of implementation and assessment that family policies in Spain have followed, focusing on the assessment mechanisms and the main challenges that are pending in relation to this matter. Finally, conclusions that aim to synthesise a group of recommendations and examples of best practices in the development of policies for families in Spain are presented.

Impact of the Sociohistorical, Political and Economic Context on the Families and Policymaking in Spain

Welfare State and the Role of Families in Spanish Social Care

The Spanish welfare state has been classified, first, as belonging to the category of conservative states, according to the typology brought up by Esping-Andersen (1990), as it has a strongly contributive basis that links social rights to the social, working and occupational status of individuals. However, the proposal for classification that this Dutch researcher suggested got a substantial torrent of criticism, which allowed both to draw attention to the specifics of the welfare states in southern Europe countries and also to qualify the role of women and families in social care.

A group of researchers (Ferrera, 1996; Sarasa & Moreno, 1995) consider that, despite being welfare systems with a contributive basis, countries like Spain, Italy, Greece or Portugal have the feature of the pre-eminent role given to the family as regards providing social care, thus distinguishing them from France or Germany.

A second series of hard criticism towards Esping-Andersen's typology came with the researchers of gender and social policies (Langan & Ostner, 1991; Lewis, 1992). Stemming from a critical analysis of the use of the concept of decommodification by Esping-Andersen, these authors took the contribution of families to social welfare back from oblivion (Daly, 1994; Orloff, 1993), as well as stressing the fact that women's social rights were second rate, as they depended on their husbands' involvement at work.

From this reflection comes one of the most productive analytic categories in the analysis of welfare states from a gender perspective – the male breadwinner model (Lewis, 1992; Lewis & Ostner, 1994) which, in its purest form, prescribes formal work to men and house and care work to women, thus causing substantial gender differences as regards the entitlement to social rights, levels of public spending and investment on services and involvement at work. Added to this concept, we have that of defamilialisation. Suggested by McLaughlin and Glendinning (1994) for replacing the gender-blind concept of decommodification, this term indicates 'the terms and conditions under which people are engaged in families, and the extent to which they can uphold an acceptable standard of living independently of the (patriarchal) family' (p. 65).

With these new analytical tools, the characterisation of welfare states and, particularly, Mediterranean welfare states, such as the Spanish one, becomes more accurate. Thus, the familism that distinguishes the welfare states in southern Europe is an ambivalent familism, according to Saraceno

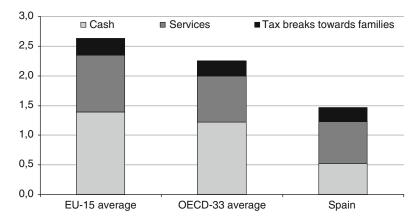


Fig. 12.1 Public spending on family benefits in cash, services and tax measures (% of the GDP), 2007 (*Source*: Author's elaboration based on information from the OECD Family Database. *Note*: There is no data regarding tax breaks for Greece, so the EU-15 average in this case has been calculated for the 14 other countries)

(1994, 1995), because, on the one hand, families are the main providers of social welfare and one of the highest-regarded institutions in these countries and, on the other hand, there is a very meagre development of policies destined to its protection (Esping-Andersen, 1999; Navarro, 2006, p. 52).

Thus, investment in family care by the Spanish welfare state is way below the OECD and EU-15 averages. As we can see in the following figure, the average spending as related to the GDP is lower for the three mechanisms considered – economic benefits (cash), services and tax breaks, although in the latter Spain is closer to the European and the OECD averages (Fig. 12.1).

The system by which families confer themselves on this beneficent role lies, more than in the figure of the male economic supplier, in the solidarity of relatives from the extended family, as well as in the essential responsibility of women for giving care (Saraceno, 1995, pp. 279–280). That means, Mediterranean welfare regimes involve the most gender inequality, as they consider women primarily as in the role they have in their families – reproducing and caring, leaving them unprotected towards the market in the case of economic need, as they do not promote reconciliation between family roles and work roles (Trifiletti, 1999).

And actually, this absence of a support to families and the consequent delegation of care work to women have, as a basic result, the very low female involvement at work, one of the lowest in the European Union. Moreno (2005, 2007), who analyses the relationships between welfare models and employment paths, characterises Mediterranean welfare states as countries with scarce part-time employment offers and a low level of tertiarisation of family services. This becomes obvious when we analyse the differences by sex in employment rates. In the following figure, we compare employment rates depending on sex and age groups in Spain in the last years, and as we can see, male employment rates are, always and for any age group to be compared, highly above female rates (Fig. 12.2).

Family Policies in Spain During Franco's Dictatorship and the Period of Transition to Democracy

The impulse given to family policies by Franco's regime in Spain, as well as its own direction and the symbolic dimension they acquired during those times, has marked the subsequent development that these policies have had during the democratic period.

A. Pérez-Caramés

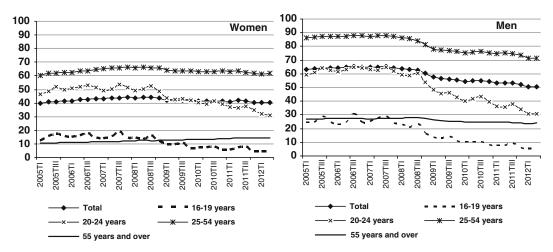


Fig. 12.2 Employment rates by sex and age groups, 2005–2012 (*Source:* Author's elaboration based on information of Encuesta de Población Activa (Labour Force Survey))

With Franco's dictatorship and the influence granted in social care matters, at least during the first half of his rule, to Falange and the Sección Femenina, the Church recovers its prerogatives regarding family forming (marrying) and women's rights as citizen suffer a backward movement (Manrique, 2007). Francoism encourages a patriarchal family ideal which is based, on the one hand, on the impulse of natalist measures (Nash, 1991) and, on the other hand, on the strengthening of a strict division of roles between men and women, under the belief that women working outside home meant a threat to the stability of the marriage and of the family (Meil, 1995, p. 52).

During what some authors call the peak of Francoist family policies, between 1939 and 1959 (Iglesias & Meil, 2001), 'family benefits' were introduced,² which consisted of monthly paid cash to employees depending on how many children under 14 years of age they had, and which did not vary in amount, so they did not change according to different levels of income in families (Iglesias & Meil, 2001, pp. 35–36; Valiente, 1996, p. 153). In the early 1940s, 'birth awards' were established, rewarding those families with the highest number of children, a clear natalist message from the regime.

Few years after that, the 'dependants bonus' is created (1945). Aimed to employees and almost totally paid by employers, this extra pay, quite high in a moment when salaries were generally low, comes from the notion of 'family salary', assuming thus an acknowledgement of the worker's 'dependants', consisting of his wife, his children and his elders living with them.

The second stage in the Francoist family policy development (between years 1963 and 1975) is marked by the loss of influence of the Falange and the rise of the technocrats of the Opus Dei. This is how the Act Ley de Bases de la Seguridad Social de 1963 abolishes the family bonus, although the wife support benefit was kept (Iglesias & Meil, 2001, pp. 56–57; Meil, 1995).

As far as tax relief is concerned, its protecting scope was very small, not only because few people had to submit the appropriate return forms but also because there was little or no progressiveness at all and the reductions per child were made exclusively in the case of large families. In short, family policies during Francoism were focused on the promotion and preservation of the 'traditional family', with a breadwinning male and a housewife, the latter with maternity being prescribed as her main obligation, encouraging and rewarding, this way, large families.

The role given to family in the rhetoric of the Francoist dictatorship was precisely one of the causes mentioned by many authors as explaining the abandonment of family policies during the transition

² Spanish Act 'Ley de Subsidios Familiares de 18 de julio de 1938'.

Table 12.1 Indicators of the second demographic transition in Spain within the context of the OECD and EU-15

		Fertility rates				
		1970	1995	2010	_	
	OECD average	2.67	1.69	1.74	_	
	EU-15 average	2.41	1.54	1.70		
	Spain	2.90	1.17	1.38	_	
		Percentage of b	irths out of	wedlock		
		1970	1995	2009		
	EU-15 average	6.25	23.75	36.63	_	
	Spain	1.36	11.09	30.32		
		Cohabitation rate and other forms of partnership (recent years)				
		Single, living alone	Married	Cohabiting	Others	
	OECD-25 average	15.20	49.90	6.80	27.90	
	EU-15 average	14.25	46.72	6.99	25.35	
	Spain	8.60	53.60	3.30	34.50	
		Household com				
	Couple families	Single-person households	Sole-parent fa		nilies	Other private households
			Total	Of which sole-mother households	Of which sole-father households	
OECD-25 average	57.59	27.71	9.10	84.53	15.47	7.03
EU-15 average	57.93	28.78	8.59	84.08	15.92	4.71
Spain	62.90	20.30	9.90	81.10	18.90	6.90

Source: OECD Family Database, 2011

Notes: Data regarding cohabitation rate and other forms of partnerships and household composition for the EU-15 average does not include information for Sweden. There is no information available either for the distribution of sole-parent families as headed by the mother or the father in Belgium. The averages calculated have been adjusted accordingly

and first years of Spanish democracy (Valiente, 1995, 1996; Cousins, 2005). Not only was there a need to leave policies behind and, particularly, the family ideology of the preceding regime, but the ways for social and family organisation of Spanish society had experienced deep changes too, so the Francoist family policy, as well as old-fashioned, had turned obsolete.

Indeed, after a quick and intense first demographic transition, the behavioural patterns of the Spanish population started to point towards the individualisation process brought by the second demographic transition. In the mid-1980s, a decline of fertility rates starts, placing Spain as the second country with the lowest fertility rate, after Italy, way under the generational replacement index (2.1 children per woman) and classifiable as one of the countries with the lowest-low fertility (as defined by Kohler et al., 2002).

In parallel with this, the regulations allowing divorce and dissociating it from the Catholic Church³ gave cause for the birth of new family forms, and, in general, the processes of modernisation and individualisation boosted a pluralisation and diversification of family forms in Spain (Table 12.1).

³ The first rule regarding this is the Ley 30/1981, modified in 2005 to allow a faster speed in separation and divorce paperwork.

180 A. Pérez-Caramés

In spite of these new regulations dissociating family forming and breaking processes from their religious side, the development of care policies towards child upbringing costs or those family forms more prone to poverty tended to be scarce during the years following transition and practically until Spain joined the European Union, when the impulse given by the Community institutions, mainly when it comes to work and conciliation policies, would revive the political interest in social care for families.

Brief Evolution of Family Policies in the 1980s and 1990s in Spain

Authors such as Flaquer (2001) or Iglesias and Meil (2001; see also Meil, 2002), experts in the analysis of the development of family policies in Spain, hold that during these last years, conciliation policies have been replacing policies for public compensation for family responsibilities in the Spanish social policy agenda. A result of the rejection of the Francoist heritage and symbolism that imbued family policies, in Spain, there has been a false contradiction, especially among left-wing parties, between policies to support families and policies which sought to promote the incorporation and permanence of women in formal work (Meil, p. 53; Cabré, 1990), to the detriment of the development of family policies.

As a result, the balance of family policies during the two first decades of the democracy recovered in Spain is quite poor. To the secularisation of the processes of family forming and breaking we have mentioned, we can add the regularisation of the first maternity leaves and their extension, in the early 1980s, from 12 to 14 weeks, and to 16 weeks in 1989. The Estatuto de los Trabajadores being passed also means the possibility to reduce the working hours for maternity reasons to a third or 50 % with the appropriate proportional salary reduction and the introduction of a breastfeeding leave that makes it easier to reduce the daily working time by 1 h, as well as to take 1 year off albeit with no guarantee of keeping the job. Moreover, mothers will be able to give 10 from their 16 maternity leave weeks over to fathers, which is seen, in the beginning, as a measure to encourage joint responsibility in looking after children.

Also, improvements are made in order to avoid problems for women when they return to work after a leave of absence which is taken to look after the children, establishing the obligation to keep the job for the woman for the first year of leave and keeping also the job link for 3 years, which is the maximum length for this type of leave.

In short, family policies in the 1980s and 1990s have favoured the acknowledgement of rights above the implementation of political measures, such as budget sums for cash benefits or social services (Parella, 2000, p. 436).

A Review on Spanish Family Policies

We must start this introduction by setting out the main changes that occurred in Spain regarding the definition of the institutions of marriage and family. As mentioned in the previous section, the main milestone for this is the separation between the Church and the state in the formation and dissolution of marriages, especially the passing of the Act that regulates separation and divorce, which will bring about the expansion of family forms such as single parent or reconstituted ones.

The two following alterations which we will mention vary in scope, motives and magnitude. Firstly, in 2003, the concept of 'large family' is modified, in order to update it according to the

recent evolution of fertility and families resulting from divorce processes. Secondly, in the year 2005, the Civil Code is altered to enlarge the right for homosexual couples to marry and adopt.

In the year 2003, the concept of large family is modified, after remaining unchanged since the late years of the Francoist dictatorship. It had been regulated under a pre-constitutional regulation⁴ which was also clearly obsolete when it comes to the derived current processes of large family formation. Thus, the Act Ley 40/2003 for protection of large families aims to, on the one hand, redefine the concept of large family to fit better to the reduced fertility rates seen in Spain since the mid-1980s⁵ and, on the other hand, to host under this definition large families formed from divorce processes, resulting mainly in reconstituted families, as well as single-parent large families. On the other hand, this new regulation also contains adoption and fostering in the definition of large family.

As regards social benefits for large families under this new rule, that means, not counting those common to the rest of families or tax breaks for children to care for, which we will tackle later, there is provision for a 45 % bonus in National Insurance contributions if a childminder is employed as long as, in the case of general families, the parents are doing work in the labour market. Besides, they have preference when applying for social housing, studies and grants and educational benefits. A reduction, and even exemption in some cases, is established for the fees in state education as well as public transport.

The approval of same-sex marriage, as well as the right to adopt, was possible in Spain thanks to the alteration of the Civil Code in what concerns the definition of marriage undertook during the first term of office of the socialist government led by President José Luís Rodríguez Zapatero. In that moment, Spain joins the other pioneer countries in the acknowledgement of maximum institutionalisation of unions of same-sex people, only preceded by the Netherlands (2002), Belgium (2003), Canada (2005) and the state of Massachusetts in the United States (Gómez, 2008).

This reform, achieved by the influence of the LGBT movements in Spain, according to some authors, goes beyond acknowledging the rights for pensions or legacy and means that '(the) battle is fought around family/marriage as a concept' (Gimeno & Barrientos, 2009, p. 24), that is, it means there is a questioning of the symbolic order that surrounds the institution of marriage.

The approval of same-sex marriage has not lacked controversy in Spain. When it was put to the vote in the Spanish lower house, the Congreso de los Diputados, in June 2005, the parliamentary group of Partido Popular voted against it and so did Unió Democràtica de Cataluña, a Catalonian nationalist party of Christian Democrat undertones. This opposition, along with the abstention of other parties and the absence of some PSOE members of parliament when the voting took place, marked the beginning of the resistance in the street that would take place later orchestrated by the Partido Popular, the Catholic Church via the Conferencia Episcopal (synod) and Foro Español de la Familia. The law regulating this right has been subject to an appeal on unconstitutional grounds because of the pressure exerted by these three fronts and, mainly, because of the campaign carried out by Partido Popular. The Spanish Constitutional Tribunal has sentenced in November, 2012 the constitutionality of same-sex marriage.

⁴It is the Act Ley 25/1971, de 19 de junio, de Protección a las Familias Numerosas (Large Family Protection).

⁵ In this sense, a large family is defined as that formed by one or two parents with three or more children, whether or not these may be common to both of them and reducing this number to two children if either of these is disabled. Two categories of large family are also established- (a) Special: those with five or more children; (b) General: all the rest. Those families with four children and salaries that do not exceed 75 % of Minimum Wage will be considered special large families.

⁶ Foro Español de la Familia is a social organisation contrary to abortion and same-sex marriage, and it defends the 'traditional family'.

Childcare Services

The development of childcare services is linked, on the one hand, to children being regarded as a collective good, which assumes the need that the state is involved and responsible for their care and, on the other hand, with the legal definition of the ages of voluntary and compulsory education.

Only until the passing of the LOGSE ('Ley de Ordenación General del Sistema Educativo', Act for the general regulation of the educational system) in the year 1990 was this possible in Spain. This Act establishes that education includes ages 0–6, corresponding to what is called 'Educación Infantil', even though this is a voluntary period. Besides, there are two cycles for these school years – one for children younger than three and the other for children between three and six.

Nevertheless, the schooling rates per age show substantial differences between children under three and those between 3 and 6 years of age. Thus, according to the statistics from the Ministry of Education, in the school year 2009–2010, only 7.6 % of children under one were in education, this rate becoming 27.6 % for 1-year-olds and 44.8 % for 2-year-old children. From age three onwards, the net schooling rates reach and surpass 99 % (MECD, 2012). Besides, only half of the schoolchildren under three go to state centres.

The Government has hardly got involved in the development of the Educación Infantil centres, most of them belonging to municipal authorities. From the slightly over 7,000 Educación Infantil centres existing in Spain today, only half of them are state owned, and among them, 65 % belong to town authorities. This implies that, beyond the deep territorial inequalities in the access to these services (González, 2004), people with lower incomes will encounter greater difficulties to ensure the outsourcing of care for their children under three.

In fact, there is an obvious direct relation between mothers' employment and schooling rate in the first cycle of Educación Infantil. In the school year 2009–2010, over 60 % of children under three whose mothers had a job went to school, in comparison with those of unemployed mothers, who were below 30 %. Furthermore, the higher the mothers' level of education, the greater the schooling rate, being 30 % in children under three whose mothers had completed primary or lower education and 58 % in those whose mothers had completed higher education.

So how do Spanish mothers do it then to make their work compatible with childcare? If we consider that the fathers' involvement in childcare is still scarce in Spain, a good part of the strategies turn to the intergenerational solidarity among women, that is, the help of grandmothers, mainly maternal grandmothers (Fernández & Tobío, 2005). The use of paid domestic help, albeit growing, partially thanks to the peak of female immigration into Spain, is still scarce, being the main conciliation strategy in 10 % of the cases only (Fernández & Tobío, 2005).

Cash Transfers and Tax Treatment of Families

The development of family policies via tax measures has replaced, to a certain extent, the little attention paid in other areas, such as care services for children under 3 years of age (Zufiaur, 2007). That is, until the relatively recent strength of conciliation policies, the Spanish family policy was particularly focused on tax breaks on the basis of family dependants. As an obvious result of this, the main problem brought by directing help for families through this route is that it excludes those people and families most disadvantaged, that is, those who do not achieve the minimum required to have the

⁷ Regarding this, Alberdi (1997, p. 82) notes that 'when there is no explicit definition of family policies, these can be deducted from the analysis of income taxes reflecting support to certain forms of cohabitation or, on the contrary, withdrawal of that support while raising the taxes to other forms of family organization'.

obligation of doing the income tax return, which nowadays is Euro 22,000 gross per year. However, within the all the cash transfers to families, tax breaks are still more generous than the rest of cash benefits of the system, which we will also deal with in this section.

In this section we will mainly deal with the tax treatment received by families in the personal Income Tax, as we understand it to be that with the largest scope and effect for family units.⁸

There are three main ways to tackle family taxpaying. The main intervention tool is the actual definition of the taxpaying unit (the individual or the family) and the dependants (children, elders, dependent or disabled individuals, etc.). Then there is the establishment of exemptions for certain family benefits and allowances, which get to increase the available income for the families, as these are free of tax. Last, there are the actual tax breaks according to the dependants in the family that have been established in the first place. Here we will study separately each one of these mechanisms.

As far as the contributing unit is concerned, this corresponded to the marriage unit until a sentence of the Constitutional Tribunal in 1988 established that income tax had an individual nature. Yet, the coexistence of joint and individual tax returns was allowed, and actually the former was encouraged by having established variable deduction, which offered advantages to those families in which the income differences between both spouses were considerable, discouraging thus women's work (Pazos, 1999). Instead, family forms that were growing substantially throughout the 1990s and all of the twenty-first century, such as single-parent families led by a woman, got no tax benefit of any kind, nor did they get any additional benefit from the Social Security (Pazos, p. 12). Even with the income tax reform of 1999, which replaces variable deductions with the family minimum, consisting of a reduction in the tax base according to ancestors and descendants who depend economically, as well as their disability status and their age, the favourable treatment to unequal incomes within couples paying taxes jointly is not eliminated.

With regard to the family benefits and allowances that are free of tax, the following are currently considered9: state benefits for birth, multiple birth or adoption, children to be taken care of, orphanage and maternity; the cash benefits established by public institutions for fostering disabled individuals, over-65-year-olds or minors, as well as the economic allowances received to fund the stay of over-65-year-olds in residences or day centres; public grants and those given by non-profit organisations to read regulated studies; the annual payments for food received from the parents in case of separation or divorce; the work income derived from benefits in the shape of income by disabled people (contributions to pension schemes, mainly); and public cash benefits received for care and attention within the family environment to dependent individuals.

The family minimum tool per descendants and ancestors is then the main acknowledging tool for dependants in the family in the Spanish tax system. Currently, the minimum for descendants is Euro 1,836 for the first child, 2,040 for the second, 3,672 for the third and 4,182 for the fourth and following children. Likewise, the minimum for over-65 ancestors or for the disabled will be Euro 918, and, if the ancestor is over 75, it will be Euro 2,040. There are also other minimums set on the basis of disabled people being present in the household. This acknowledging system of dependants in the family is more beneficial according to the number of children rather than being progressive. Besides, as the possibility of joint taxation is kept, single-parent families turn out to be penalised by this tax model (De Villota, 2007).

⁸ Even though it is true that, as stated by some authors (Zufiaur, 2007), in order to tackle in a comprehensive way the tax treatment of families, their consideration in the Inheritance and DonationTax, in the Heritage and Heritage Transmissions Taxes, in the Estate Tax and in the Companies Tax should be taken into account too.

⁹ Regarding this, please refer to Act Ley 35/2006, de 28 de noviembre, del Impuesto sobre la Renta de las Personas Físicas y de modificación parcial de las leyes de los Impuestos sobre Sociedades, sobre la Renta de no Residentes y sobre el Patrimonio (art. 7).

Another of the existing tax breaks consists of a reduction in the differential deduction of Euro 1,200 per year for every child under 3, applied to all working mothers. This amount can be paid in a pro rata manner, with Euro 100 per month. ¹⁰ This is obviously a regressive measure, as it is only applied to incomes subject to taxation and the amount is fixed independently of the income.

Around the middle of his second term of office, socialist President José Luis Rodríguez Zapatero announces a birth-encouraging measure consisting of a cash benefit per birth or adoption of Euro 2,500.¹¹ This tool, which soon would be named 'baby cheque', consists of an income tax deduction for those people who must do the return and a non-contributory benefit of the Social Security of the same amount for those not obliged to declare taxes. That is, this measure does not depend on income, so it lacks any kinds of progressiveness. This 'baby cheque' was then eliminated with the first budget cut measures taken around the middle of 2010 towards the end of the second term of office of the socialist President José Luis Rodríguez Zapatero.¹²

Now we will focus on the issue of cash benefits per child. According to Obiol (2006, p. 98), these can be defined as 'a group of diverse measures aiming to balance out the economic cost that upbringing and educating children means, in order to avoid the possible negative impacts of this cost on the family income and with it a decrease in the quality of life of families with children under age in their care'.

In Spain, these direct economic benefits, that is, cash transfers from the Social Security, date back to the Francoist family benefits, which we have studied in the previous section, but were modified by the Act Ley 26/1990 which establishes non-contributory benefits. The amount of the benefit varies according to the number of children to care for, as well as their degree of disability, if applicable, and the families' income level; yet the average benefit is around Euro 25 per month, placing itself as the second lowest in the European Union, after the Greek, according to the latest data from MISSOC¹³ (2006).

Because of their low amount of money, but especially because of their weak protective intensity (researcher Obiol points out that they reach less than 15 % of families in care of underage children), nowadays these benefits per child cared for have become more of a device to fight poverty and protect the disabled than an actual measure that makes up for child upbringing costs (Flaquer, 2000; Obiol, 2006).

Apart from these benefits per child cared for, there is a specific benefit per birth or adoption for large families, single-parent families and disabled mothers. This benefit consists of a sole payment of Euro 1,000 and is not universal but means-tested. In the case of large families, this benefit is added to the cash benefit per birth or adoption of a third or following children, of a single amount of Euro 450.76 and of which all those families with incomes slightly under Euro 10,000 per year can benefit. That is, it is again a measure against poverty rather than one that compensates for the costs of childcare.

Policies for the Conciliation of Work and Family Lives

Policies for the conciliation of work life and family life recorded an emergence in the public policy agenda in Spain in the mid-1990s, thanks to the impulse that this objective has received in the EU, surrounded by a demographic concern for the sustainability of welfare schemes and, particularly, the

¹⁰This measure was approved with Real Decreto 27/2003, de 10 de enero de 2003, along with another set of modifications of the income tax.

¹¹ This measure appears in Ley 35/2007, de 15 de noviembre, por la que se establece la deducción por nacimiento o adopción en el Impuesto sobre la Renta de las Personas Físicas y la prestación económica de pago único de la Seguridad Social por nacimiento o adopción.

¹²This provision appears in Real Decreto-ley 8/2010, de 20 de mayo, por el que se adoptan medidas extraordinarias para la reducción del déficit público.

¹³ Mutual Information System on Social Protection in the EU member states and EEA (Eurostat).

pensions system, and as a result it was decided to increase the contributing basis of the various member states by means of incorporating and stabilising the work participation of women. We do not intend to state here that the conciliation policies have not had a certain development previously in Spain as well as in the European Community in general. The fact is that, with a varying degree of success, it has been the change of direction and the aim in them to get round the interest in gender equality and aim at the promotion of employment (please see, regarding this, the existing link between conciliation policies and the so-called European Employment Strategy) and of birth rate¹⁴ which has made it easier to have the role it has now in the public agenda and also the fact that it has been a conservative government in Spain that has passed an Act to regulate the, until then, disperse regulations regarding conciliation.¹⁵

The Act Ley 39/1999 (to promote the conciliation of family life and work life of workers) gathers and transposes a variety of European guidelines regarding maternity and paternity leaves, parental leaves, leaves of absence and reduction of working hours to look after the children and occasional leaves for family reasons. Despite the ambitious intentions of this new regulation, the fact is that the main substance of the different existing leaves for the care of children and the elderly remains virtually unaltered, for which some researchers do not hesitate to talk about a lost opportunity (Fernández & Tobío, 2005; Salido & Moreno, 2009). Actually, Bustelo and Peterson (2005, p. 33) made an analysis of the discourse used in the text of this Act and concluded that the approach made regards conciliation as a 'problem' that entails the need to 'help' women so that they can combine their productive and their reproductive work, placing this problem, thus, in the work environment and not in the private one.

Emphasising more the need to encourage joint responsibility with care work, the Act Ley Orgánica 3/2007 (for the effective equality of women and men) incorporates a series of measures of positive action, at the same time that it improves the different maternity, paternity and parental leaves that existed until that moment.

As regards maternity leaves, their duration is still 16 weeks¹⁶ gathered in the Estatuto de los Trabajadores of 1995, and six of them are compulsory, having to be taken after birth, while the other 10 may be used before or after birth and are voluntary. The conditions are similar in the cases of adoption and fostering. Those exact 10 weeks are the period of time that can be given over to the father, as part of a 'delegated' paternity leave that we will talk about later.

The leave means keeping 100 % of contributions until a maximum limit of Euro 3,230 per month. The financing of maternity leaves is done by employers and employees, through their National Insurance contributions. Even though all female workers can go on this maternity leave, the Act Ley 3/2007 has improved the conditions for applying for the benefit which permits maintaining the salary. Firstly, the minimum period of contribution is made more flexible, having been fixed until then to a minimum of 180 contribution days within the 5 years before birth. Now there is no minimum period of contribution for mothers younger than 21 years of age, and for mothers between 21 and 26, a minimum of 90 days is demanded within the seven previous years, or 180 throughout all their working lives; for mothers older than 26, 180 days within the seven previous years are necessary or 360

¹⁴ In this respect, it is interesting to consider the analysis made by Stratigaki (2004, p. 30) about the cooptation of the concept 'conciliation of family life and work life' from community institutions, as, even though in the beginning this could be a tool for the promotion of feminist objectives such as the sharing of family responsibilities between women and men, it has finally been destined to satisfy a market target, which is the encouragement of more flexible ways of employment. This problem is also observed by Spanish researchers (about this please see Borràs et al., 2007).

¹⁵The scattered rules we refer to do not only come from the existence of a variety of unspecific regulations, but also by the superposition of three competency fields- the European, that of the State and that of the Autonomy (Villa, 2004).

¹⁶ This length is extended if the birth is multiple (two more weeks per child) or if the child is disabled (2 weeks).

throughout their working lives. Besides, for women who do not comply with the minimum period of contributions there is a special benefit, equivalent to 100 % of the IPREM¹⁷ during 42 days, counted from the birth (Panizo, 2007, pp. 173–176).

Regarding paternity leaves, until the Act Ley 3/2007 de igualdad efectiva entre mujeres y hombres (of effective equality between women and men) was passed, it can be said that they did not exist as an independent figure with full rights, as only 2 days of paid rest were acknowledged with 100 % of the salary for working fathers because of the birth of their child. Fathers could use 10 weeks of the maternity leave though, if mothers let them have them. That is, it was clearly established that the responsibility in baby care for the first months was the woman's, as she was thus the one who held the maternity leave which she could, should she choose so, partially share (only 10 of the 16 weeks could be passed on to the father) with the father. It was a regulation that discouraged joint responsibility. Ley 3/2007 introduces this way and for the first time a paternity leave in similar conditions to those we explained for the maternity leave and which has a maximum length of 13 days that, added to the existing two, make a total of 15 days of paternity leave, still quite far from being equal in length to maternity leave.

The Act Ley 39/1999 being passed means including a leave of absence for looking after a relative in a dependency situation, and, despite being something fresh with regard to care leaves in Spain as well as in Europe, the bottom line means, according to the researcher Bibiana Escuredo (2007, p. 80), considering the carer a mere resource or instrument in the hands of the formal system, 'as gaining the right to leaves or leaves of absence is related to the situation and need of the dependent person and some aspects are not taken into account (...). With this policy, carers are freed from part of the productive work so that they can take care of looking after their dependants (...)'. As a matter of fact, the payment these people receive for looking after a relative (between Euro 300 and 520.69 per month) is set according to the degree of dependency, without any consideration whatsoever towards the working, personal or family circumstances of the person who goes on a leave of absence.

This leave of absence for looking after a relative has a maximum length of 2 years, during which the working day can be reduced between an eighth and a half in order to look after a relative until the second degree of consanguinity or affinity. The salary is reduced in proportion with the working day reduction, and it is complemented by the amount mentioned above. For the first year of the leave, the workers go on paying National Insurance contributions, so they keep having access to the health system and they add on to the contribution period. This leave implies the guarantee of preserving the job category, but not the workplace.

Long-Term Care

The passing, in late 2006, under the socialist government's rule, of the Act Ley 39/2006 de Promoción de la Autonomía Personal y Protección a las Personas en Situación de Dependencia (of Promotion of Personal Autonomy and Care for Dependent Persons), commonly known as Ley de Dependencia (Dependency Act), means a radical change in the policies made until that moment to give care to those people who cannot take care of themselves alone. Before starting the System for Autonomy in Care and Long-Term Care (Sistema para la Autonomía y la Atención a la Dependencia) (SAAD), resulting

¹⁷The acronym IPREM means Indicador Público de Renta de Efectos Múltiples (Public Indicator of Income for Multiple Purposes), and it is an index used in Spain as a reference for the awarding of numerous social benefits. It was proposed in the year 2004 as a substitute of the one used until then, the Salario Mínimo Interprofesional ('SMI', Minimum Wage) and is set every year in the Act Ley de Presupuestos Generales del Estado (national budget). Generally speaking, the path IPREM followed since 2004 has had less growth than SMI, which means an indirect way to restrict access to social benefits. Thus, in this year, 2012, IPREM is the same amount as in the two previous years (2011 and 2010): Euro 532.51 per month. For comparing purposes, SMI in the year 2012 (identical to the one in 2011) is Euro 641.40 per month.

		Number	%
Services	Prevention of dependency and promotion of personal autonomy	20,490	2.1
	Tele-assistance	134,451	13.7
	Home help	124,014	12.6
	Day/night centres	65,559	6.7
	Residential care	126,160	12.9
Benefits	Linked to the service	65,269	6.7
	Family care	443,998	45.3
	Personal assistance	1,071	0.1
Total		981,012	

Table 12.2 Distribution of benefits for dependent care by type of service or benefit (year 2012)

Source: System for the Autonomy and Care for Dependency (SAAD), IMSERSO. Data from 1 August 2012

from the development of Ley 39/2006, the long-term care model in Spain was distinguished by its duality, as it counted by a mainly informal component, based on the centrality of women's unpaid work, and another public component, of a subsidiarily assistential nature (Rodríguez, 2005).

Along with the acknowledgement of the invisibilised contribution of women to care work, the Act also aimed at enlarging the fragmentary, scarce policies of attention to dependency, which until then were disperse and had a very varying intensity of coverage depending on the territorial variable (Sarasa, 2007).

As well as developing a system to assess the different degrees of dependency in people, the law sets a catalogue of services and cash benefits from which the dependent person can choose or even combine. Regarding services, the law considers the following: (a) service of prevention of dependency and promotion of self-autonomy, (b) tele-assistance, (c) home help, (d) day and/or night centre, and (e) service of residential care. As far as cash benefits are concerned, three options are considered: (a) cash benefit linked to the service, which will be given to pay for the stay in a day centre or a gerontological residence when the place of residence of the person does not have enough public positions; (b) cash benefit for the care within the family environment, theoretically of exceptional nature and which would be granted to the dependent person in order for them to be looked after by a relative; and (c) cash benefit for a personal assistant, which will be given to people of active age so that their education and participation at work are made easier. The legal text emphasises in particular the primacy of the development of services on the granting of any type of cash benefits, clearly mentioning the exceptional nature of the care benefit within the family environment.

Nevertheless, currently, with almost 800,000 beneficiaries of dependency benefits, it is proven that approximately half of the awards¹⁸ consist of a cash benefit for care within the family environment (45.3 %), with a much lower service development, as shown by the corresponding rates to home help service (12.6 % of benefits) or day/night centres (less than 7 %) (Table 12.2).

These benefits for care within the family environment had a double aim – on the one hand, to allow that the dependent person may be assisted in their home by someone near and, on the other hand, to reach a certain acknowledgement of the work done by the women who looked after a dependent relative. With this purpose, the cash benefit for care within the family environment meant to be registered with the Social Security system by establishing a specific agreement¹⁹ which any person who was not working in the formal work market or who was retired, disabled or being paid some kind of cash benefit

¹⁸The total of awarded benefits is 981,012, which means a rate of 1.24 benefits per person, because of the possibility of combining some services and/ or benefits so that they can be had together.

¹⁹ That agreement was included in the Real Decreto 615/2007, de 11 de marzo, por el que se regula la Seguridad Social de los cuidadores de las personas en situación de dependencia.

(such as unemployment benefit or widow's pension) could subscribe. That means, the family carer was turned into some sort of semi-worker, who could contribute for a future retirement, even though they could not have any kind of acknowledged work protection or right. It has been this legal figure precisely which reinforces women as family carers and considers care as a task that does not reach the rank of being actual 'work', the one that has received most criticism (regarding this, please see Bosch, 2006; Pérez, 2006), the latter being noticed even in the assessment report on the gender impact of this law that the actual Ministry of Labour and Social Matters was carrying out (MTAS, 2006).

One of the main challenges this ambitious system was facing was its financing which, according to one of the best experts in long-term care policies in Spain, had to be sufficient, stable and sustained in time (Rodríguez, 2007, pp. 80–83). The scheme initially anticipated consisted of a tripartite financing, in which a third of the costs would be taken by the state government, another third by the appropriate Autonomous Region and the last third would be funded by the users, thus establishing a copayment system which varies mainly according to the degree and the level of dependency and the income level of the beneficiary.

Nevertheless, the latest cuts on the welfare state that are being made now in Spain, especially by the current conservative government, seriously affect the viability of the long-term care system. In mid-2010, still under a socialist government, a group of measures of budget cuts is applied, meaning the suspension of retroactivity in the award of new dependency benefits.²⁰ Considering the existing time gap between the application and the award and the fact that the beneficiaries are often also people of old age, to eliminate the retroactivity of this benefit means impairing the access to this benefit. In late 2011, a retroactive adjustment is decided in the calendar of access to services and benefits,²¹ which varies depending on the degree and level of dependency of the applicant and which, in practice, means to exclude from the right for care those people who are not in a severe situation of dependency.

Finally, in summer 2012, another group of measures of social cuts is approved, and as far as dependency is concerned, it means a considerable budget adjustment, as the maximum amounts of cash benefits that Autonomous Regions can set are reduced²² and the amounts for the minimum level of funding of the System for the Autonomy and the Care for Dependency (SAAD),²³ which depend on the state government, are limited too. The compatibility between services and benefits is restricted too. Besides, the contributions to the government from family carers are suppressed, so either these people pay for their contributions or their work goes back to being cloaked in invisibility.

²⁰ This provision appears in the Real Decreto-ley 8/2010, de 20 de mayo, por el que se adoptan medidas extraordinarias para la reducción del déficit público.

²¹That calendar appears in Real Decreto-ley 20/2011, de 30 de diciembre, de medidas urgentes en materia presupuestaria, tributaria y financiera para la corrección del déficit público. In it, the exercise of the right guaranteed by the Dependence Act is postponed up to 4 years, holding back even more the access to the resources the lower is the degree of dependence. The Real Decreto-ley 20/2012, de 13 de julio, de medidas para garantizar la estabilidad presupuestaria y de fomento de la competitividad suppresses the level scale, so nowadays the measure of dependency is solely carried out according to three degrees – major dependency, severe and moderate dependency. As a result of this latest Real Decreto, the calendar to access benefits and services for care is adjusted.

²² Maximum amounts are fixed as follows: Between Euro 300 (moderate dependence) and Euro 715.07 (major dependence) for the cash benefit linked to service and the one of the personal assistant; and between Euro 153 and Euro 387.64 in case of the cash benefit for care within the family environment. In the latter, the average reduction applied is 16 % from the maximum amounts of the year 2011.

²³ These minimum amounts are set, for the new applicants, as follows: Euro 177.86 for people with major dependency; Euro 82.84 for those with severe dependency; and Euro 44.33 for moderate dependents. This means an average reduction of circa 20 % from the minimum amounts of last year 2011.

Policies Against Gender Violence

Policies to fight gender violence are usually not included in family policies, as one of the achievements of Spanish feminism in this matter has been the change of interpretative frames in the policies designed for this, changing from the expression 'domestic violence' and the idea that it happens within families and so is a behaviour that belongs to the private sphere to using the expressions 'gender violence' or 'violence against women', thus acknowledging it as a structural element of patriarchal power and, as a result, discrediting it (De Miguel, 2008).

In this sense, policies designed in Spain regarding this have covered three areas of action: prevention, punishment and protection of women victims of gender violence. In this area of intervention coming from social politics, there have been considerable advances in Spain, despite the number of women murdered by their husbands, ex-husbands, partners, or ex-partners being still high. We will now make a brief synthesis of the regulation and measures implemented.

The landmark regarding regulations on fighting against gender violence is the Act Ley Orgánica 11/2003, because it assumes the establishment of parameters of coordination between the different institutions involved, mainly the State (Administración General del Estado), the Police and the Judiciary.

Before this rule, the main measures take place in the judicial sphere, with consecutive reforms in the Spanish Civil Code that contribute to a complete definition of the phenomenon (including, for example, psychological violence in the Ley Orgánica 14/1999 as modified in the Criminal Code), an extension of the aggressors' typology (in the 1995 Criminal Code the relationship similar to marriage and in Ley 14/1999 those cases in which cohabitation has already ceased are incorporated) and, above all, a greater punishment for the aggressor (gender violence goes from being considered an offence which meant imprisonment from 5 to 15 days in the criminal regulations of 1971 to the establishment of a custodial sentence from 6 months to 1 year in the 1995 Criminal Code). Besides, these judicial reforms also meant preventive measures or measures for protection of the victims, regulating mainly the possibility to establish estrangement measures.

In parallel with this, there is the work done by Instituto de la Mujer ('Women's Institute', a body dependent on the Ministry of Labour), which creates in 1998 a lasting tool for all-round attention to the problems in gender violence: the Action Plans Against Domestic Violence. These plans last several years and include a group of action measures in this field with an all-round, cross perspective, that is, coordinating the different spheres and powers involved. These plans have a growing budget, which ensures the effectiveness of the measures they provide for.

The Act Ley Orgánica 11/2003 unifies the judicial measures and regulates in particular the estrangement measures, coordinating thus judicial and police authorities. It is a clear antecedent to Ley 1/2004, de 28 de diciembre, de Medidas de Protección Integral contra la Violencia de Género (of all-round measures against gender violence), which, for the first time, in its statement of motives acknowledges the structural and extra-domestic nature of the problem stating that 'gender violence is not a problem within private boundaries. Quite the contrary, it comes out as the most brutal symbol of inequality in our society. It is a violence that acts on women merely for being women, for being considered, by their aggressors, as lacking minimum rights for freedom, respect and decision-making ability'. Moreover, the Act creates judicial institutions made to approach gender violence, such as courts of violence against women (specific jurisdiction) and the public prosecutor of violence against women. Tools for protection based on technology are also regulated (tele-assistance) and measures of social protection in the form of cash benefits that ensure that the economic dependency of women does not obstruct the way out of the violent situation.

Ultimately and, in spite of the fact that there is still a long way to go in this matter, the advances made are remarkable both in defining the problem and in approaching it in an all-round, coordinated way from the public institutions.

Assessment and Implementation of Family Policies in Spain

In Spain, in general, there is very little assessment of social policies and their effects on social and gender equality. If the situation is deplorable for all social policies, in the case of family policies, characterised by their dispersal and lack of structure, the existence of mechanisms that help their assessment is still smaller. The reason for this phenomenon must be sought, on the one hand, in the high degree of decentralisation existing in Spain as regards managing and providing social services, as the powers in this matter are transferred to a great extent to the Autonomous Regions, but the municipalities have their share of responsibilities in giving care to their citizens. To the existence of territorial differences, we have to add the already traditional difficulties of synthesising, standardising and homogenising the existing information about social benefits and services, which is a task that makes the availability in Spain of complete, reliable statistics difficult.

The improvement of the statistical information system for this is, thus, a growing demand by Spanish researchers, as is the making of more panel surveys or even taking part in surveys with great research potential in this field such as Generations and Gender Programme (GGP). Nevertheless, we will present in this section a brief synthesis of the most recent works that allow for the assessment of implementation processes and of the results of family policies in Spain.

In the field of conciliation, the research works done in Spain about the influence of conciliation policies in the life of families with children conclude that the impact has been very weak and that private arrangements still prevail over public solutions (Tobío, 2005).

On the variables that explain the profile and motivations of Spanish mothers when hiring childcare services for under-3-year-olds, the contribution of González and Vidal (2005) is remarkable, as they, using data from the seventh wave of the European Community Household Panel (ECHP), carry out a logistic regression to predict the likelihood that a family uses care services. Among their results, we have to mention that one of the factors that affect the likelihood to use care services is the number of children. Besides, mothers with steadier jobs and indefinite term contracts are more likely to hire care services, whereas those with more precarious positions in the labour market are discouraged to do so. Moreover, living in extensive families significantly reduces the possibility that the family resorts to care services.

The research about use of parental leaves, maternity and paternity, in Spain, is a currently fruitful land. Researchers Escobedo and Meil (2012, pp. 9–11) in a report prepared for the International Network on Leave Policies gather some of the most recent works. A great part of them have been possible thanks to the existence, from the year 2006, of a statistical source, the Continuous Sample on Working Lives, which contains information about 4 % of the Social Security contributors for whom it also gives information regarding their work situation and income level. These research works are focused on a variety of aspects, such as the impact of a leave of absence on employment, or the variables that explain the use of parental leaves by fathers and mothers (regarding this, please see Escobedo, Flaquer, & Navarro, 2012; Escot, Fernández-Cornejo, Lafuente, & Poza, 2012; Lapuerta, 2013; Lapuerta, Baizán, & González, 2011; Meil, 2011).

Regarding long-term care policies, we regard the consideration of self-assessment mechanisms as excellent, from the very process of deliberation for drawing up the Dependency Act. This way, as part of the initial analysis of requests and needs, a survey about population in a dependency situation was made by the National Statistics Institute and published in the Dependency in Spain White Book (IMSERSO, 2004) with a complete study on the situation of policies for people in long-term care and the proposals of policies to intervene in this matter. By implementing the Act, a Service for Autonomy in Care and Long-Term Care is also created, for the compilation of punctual, complete statistical information about the services, the benefits and the population who benefit from help for dependency. Some assessment and law follow-up reports have already been published as well, including some criticism and proposals for improvements, although the current cuts that this part of social policies is suffering now in Spain spread serious doubts about the possibility of implementing any of the measures there included.

On the other hand, studies have also been made about the influence of awarding services or cash benefits on the decision made by women when they have to decide on the time they use to look after elderly dependants (Sarasa, 2008), or about the relationships between formal and informal care (Vilaplana & Jiménez, 2010).

Conclusions

If we had to define the Spanish system of family protection on the basis of encouragement to policies that give time, money or services to the families to look after children and elders, in Spain it would be, without a doubt, the policies that give time for care. They predominate as well as they try to minimise as much as they can the harm to employment rates (Delgado, Meil, & Zamora López, 2008, p. 1096). In the Spanish case, the need to increase care services, both for children and the elderly and thus allowing an improvement of the terrible current employment situation, particularly among youth, is usually mentioned. It would also ensure conciliation and child welfare. But, despite the fact that the development of these services would be urgent, it is advisable to note that a proper combination of policies that give as much time as services and money is the only guarantee for men and women to freely decide whether they will do productive work or care work (Lewis, 2006).

We will now mention some of the criteria that in our opinion must be considered when designing and improving family policies in Spain, as a result of the detailed analysis we have presented of the diverse protection forms currently existing.

Firstly, it is necessary to incorporate policies and measures that encourage the joint responsibility of men and women when sharing housework and carework. Quoting Borràs, Torns, and Moreno (2007, p. 94), the solutions to the challenges brought by family policies 'must not tolerate the absenteeism of male individuals or, to put it in other words, the excessive presenteeism at work that such people are socially proud to show off'. On the other hand, any measure implemented in family policies must consider the effects it will have on gender equality, social equality and the welfare of children and elders (Fernández & Tobío, 2005). Family policies must be neutral towards the various ways in which a family may organise their living together, not favouring some of them over others, because 'not acknowledging the principle of plurality or neutrality towards matrimony condemns the forms of cohabitation outside the institution of marriage to suffer situations of obvious discrimination' (Parella, 2000, p. 436).

Among the recommendations and measures that we gather here, as a synthesis, there are the following:

- Establishing a systematic assessment system of family policies and, in general, of social policies, which allows to see their impact on the lives of individuals and families and which has consequences for the review and improvement of the designed measures and tools.
- Increase and improvement of the existing statistical information on family policies, as well as on gender and intergenerational relationships and trajectories.
- Increase of the length of paternity leave so that it becomes the same as maternity leave and establishment of an incentive system that favours joint responsibility in the childcare time sharing of both spouses.
- Development of care services for children under 3 years of age and also for people in a dependency situation. This measure would encourage the creation of employment, as well as allow a better conciliation of work and family. Besides, working conditions and contracts should be improved in this type of services, and a greater acknowledgment of the training needed to work in this type of services should be promoted, in short, a tendency to professionalisation, in the sense given by Torns (2005).

• Substantial increase of benefits per child cared for so that they represent a rate which is relevant to the family income and can compensate, at least partially, childcare costs.

- Extension of maternity leave to at least 20 weeks and breastfeeding leave to 1 year.
- Equality of leaves to care for dependent relatives with leaves to care for children in length as well as in guarantees to keep the job.

Sustainability of life and care should be placed in the centre of the design of social policies, particularly those that have a direct or indirect impact on families. This implies recognition of the value of care-related professions, and it will foster the creation of employment in Spain.

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Chapter 13 Family Policies in Portugal

Maria das Dores Guerreiro

Abstract This chapter analyses family policies in Portugal, a country taking part of the Southern European welfare regime. From a longitudinal analysis focused on the key dynamic changes at historical and political level, the chapter seeks to show how these factors contribute for understanding the Portuguese specificities in social welfare, particularly in family policies. The strong participation of Portuguese women in the labour market, as a result of heavy male emigration drain, together with the younger generation of males' participation in the African colonial war since 1960 to mid-1970s, led to the development of childcare services more than other southern countries. On another hand, the low levels of salaries paid in Portugal make many families living in poverty relying on family policies to survive, even if their adult members have a job. The chapter also focuses the backlash that is occurring in family policies developed since the second half of the 1990s, as a result of the severe economic crisis the country currently faces, and presents some recommendations on public policy design that could contribute to improve family well-being.

Keywords Southern European welfare • Family policies • Public policies • Portugal

Introduction

The social welfare typologies that are most widely disseminated in Europe classify Portugal in the Mediterranean or Southern European regime, with a social protection system that is underdeveloped or has shortcomings compared to that of other countries with continental or corporative roots, such as Austria, Belgium, France or Germany (Dulk & Huiskes, 2007; Esping-Andersen, 1999; Ferrera, 1996; Kovacheva et al, 2011). However, a comparison with the other countries that employ the Southern European model – Greece, Italy and Spain – highlights specificities of the Portuguese case that it is important to contextualise on the structural and cultural levels, especially where family life is concerned (Silva, 2002). The present chapter thus seeks to analyse family policies in Portugal, beginning with a brief historical and political presentation of the country's situation. The idea is to offer an understanding of the particularities that characterise that situation at the level of both the family and the public policies targeted at it.

196 M.d.D. Guerreiro

A Historical Overview of an Old European Country

Portugal is a country with around ten million inhabitants and is one of the oldest nations in Europe. After its foundation in 1143, it expanded in the westernmost part of the Iberian Peninsula until the fourteenth century. The maritime discoveries that followed placed the Portuguese in the vanguard of the globalisation processes, with a recorded presence on every continent. Portugal remained a monarchy until 1910, when a republican regime was established. At the time, a number of important measures were taken to modernise and democratise the country as well as to reduce the church's influence over the state. Until then, Catholic marriage dispensed its civil equivalent, which was first instituted in 1867. With the First Republic, the civil ceremony was made a legal requirement for marriage, under which wives had the same status as husbands. Divorce became a possible way of dissolving the marital bond.

The political, economic and social disruptions of the First Republic in 1926 soon gave way to the so-called Estado Novo (New State) – a dictatorial corporative regime that lasted until 1974. The regime's political orientations during this nigh on 50-year period largely determined the country's fate in the twentieth century and are still having repercussions in socioeconomic terms in general and for family issues in particular. In the 1930s, Portuguese law regulated the family and reinstated the man as the head of the household, to be obeyed by his wife and children. In 1940, the Concordat with the Holy See once again recognised Catholic marriage, made a civil ceremony unnecessary and prohibited divorce (Torres, 1996). The family was regarded as a primordial unit in the social order. As the 'household fairy' (Alcañiz & Guerreiro, 2009), the wife was under a legal duty to ensure the well-being of the household's members, under a patriarchal male authority. The domestic woman was an ideal for the political regime, which forbade the use of contraception and advocated large families. Throughout this period, the fertility rate was high and posed a problem due to the large number of poor families. The state was not in favour of strong social protection policies and left the provision of minimum assistance to the needy to private charitable institutions, which were generally religious in nature. Members of the extended family had mutual obligations to look after one another.

The population was mostly rural until the 1960s and many women worked on family farms, while others worked in the underdeveloped industrial and service area, especially personal and domestic services, and also in retail and public administration. The low level of development of the countryside meant that younger strata of the population were attracted to the cities on the coast, where there were jobs in industry and services (Costa & Machado, 1998), or else emigrated to other European countries.

Although it did not take part in the Second World War, between 1960 and 1974, Portugal waged a colonial war in Africa that deeply marked the young generations of the time. Men who were called up to fight interrupted their normal lives for 3 or 4 years, and many were asylum seekers to escape the draft. The fact that a substantial part of the male workforce was being sent off to war in the African colonies or leaving the country to escape the war, resulted in more women taking jobs as factory workers or service employees. The democratic revolution on 25 April 1974 ended the political dictatorship and the colonial war, ushering in a new period for Portuguese society, in which family law and the population's lifestyles were redefined. The 1976 Constitution of the Portuguese Republic and the 1977 amendments to the Civil Code were important milestones in these changes. With Portugal's incorporation into the European Union in 1986, to a large extent family policies came to reflect a combination of European guidelines, the structural and cultural aspects of Portuguese society and the ideological orientations of the political parties that led the successive different governments. At present, the serious economic crisis that Portugal is going through and the tripartite intervention of the IMF (International Monetary Fund), EU (European Union) and ECB (European Central Bank) are having a major effect on the various public policies addressed at families. According to Thévenon (2011), family policies are embedded in specific institutional and historical circumstances, which influence their configuration. An analysis of family policies in Portugal must therefore take account of these various events and their implications.

Families in Portugal: A Longitudinal Portrait

The country's modernisation and democratisation, above all from the mid-1970s onwards, led to drastic changes in family values and conceptions on both the legal and the practical planes. The 1977 revision of the Civil Code redefined the status of spouses, abolishing the figure of 'head of the household', and charged both members of the couple with the same duties and responsibilities. A new Divorce Law (1975) permitted the dissolution of Catholic marriages.

A comparison between indicators for 1960 – the period in which Portuguese society began to modernise to a greater extent – and data for 2001 and 2011 clearly show that the transformations in the family have been major ones. This is quite apart from anything else, because the number of families has increased considerably, while their average size is getting smaller and smaller. Families have been reducing the number of children they have, and the single-child format is tending to predominate (Cunha, 2007). Portugal has thus gone from a situation of excessive childbirths, with a fertility index of around 3.2 in the 1960s, to the current phase in which generational renewal is not occurring and the fertility index is both at its lowest level ever and one of the lowest in the European Union.

The average age at which mothers have their first child is continually rising and is near 30. The same is happening with the age at which young people of both sexes first marry, which is also increasingly later in life. Longer studies and the difficulty finding a job that constitutes a minimally secure source of income are delaying the entry into formal marriage. Indeed, we should note a drastic fall in marriage rates (3.8 %), which are contradicting the Portuguese tendency to formalise the conjugal bond that existed practically throughout the twentieth century, with figures around the 6 % (Guerreiro, Torres, & Lobo, 2009). Catholic marriage is also losing in importance, and the exclusively civil marriage format has been in the majority since the middle of the first decade of the twenty-first century. However, this fall in the popularity of marriage does not signify a rejection of life in a couple, which is the predominant form of family in Portugal. The proportion of couples who cohabit before marriage is rising all the time, and many of them continue to live in the same way, without formalising their conjugality. In particular, the progenitors of nearly 80 % of children born outside wedlock live together. At the same time, above all following the recent law which liberalised divorce by mutual consent, the divorce rate has increased substantially to 2.6 % (Table 13.1).

A residence-unit-based analysis of the evolution of family structures over the last half century reveals that the number of persons living alone has grown considerably. There are two distinct profiles in its composition: young persons, a group that is growing exponentially but is still in a minority, and the elderly, above all widows who have lost their companion towards the end of their life path. The latter category requires particular attention at the public policy level, given that it includes many people with no family and in some cases no support network of any kind.

Over the years, family units formed by couples, with or without children, have been predominant and represent around 60 % of Portuguese families. This confirms the great value the Portuguese attach to life in a couple, compared to the populations of other countries (Guerreiro et al., 2009). Within an overall framework of accentuated demographic ageing like the one Portugal is experiencing at the moment, we should note the increase of childless couples, most of which are of the 'empty nest' type, with a majority of elderly persons, and a smaller number of younger couples who have delayed the beginning of parenthood. However, the most representative family type continues to be the couple with children – a configuration that encompasses nearly 40 % of the households in Portugal. We can thus see that although its numbers are falling, the nuclear family model still prevails over other configurations, which may perhaps be more visible, but are quite a lot fewer in numerical terms – single-parent families are one example. Although they are growing in number, the latter still represent less than 10 % of all families and are mostly made up of mothers and children. However, single-male-parent families are becoming more frequent.

Finally, both formats of the complex family structure appear to be continuing to exist: extended families, composed of a conjugal or parental nucleus with other persons, and multiple families, where

M.d.D. Guerreiro

Table 13.1 Demographic indicators and family structures in Portugal (1960–2011)

	1960	2001	2011
Average age at first marriage			
Women	24.8	26.1	29.5
Men	26.9	27.8	31.0
Average age at birth of first ch	ild		
Women	25.0	26.8	29.2
Marriage rate	7.8	5.7	3.8^{*}
Same-sex marriages			324
			266^{*}
% Catholic marriages	90.7	62.5	39.5
Divorce rate	0.1	1.8	2.6^{*}
Birth rate	24.1	11.0	9.5^{*}
Fertility index	3.2	1.4	1.3
Ageing index	27.3	103.2	120.1
Births outside wedlock	9.5	23.8	42.8
Total number of families	2,356,982	3,650,757	4,048,932
Average size of families	3.8	2.8	2.6
Persons living alone	11.5	15.5	21.4
Couples without children	14.8	22.0	23.8
Couples with children	47.5	41.1	35.2
Single-parent families	5.9	7.0	9.1
Female parent	_	6.1	7.9
Male parent	_	0.9	1,2
Complex families	15.4	10.4	8,7

Source: Statistics Portugal, General Population Surveys (1960, 2001, 2011); Demographic Statistics; Employment Survey, 2010; *2010

two or more nuclei live together, with or without other people. In addition to families with elderly persons who require care, these complex families can also include new family arrangements, such as those where a separation causes a single-parent family to go to live with the single parent's original family. In some immigrant communities living in Portugal, it is possible to find various family nuclei residing together.

A characteristic that is peculiar to Portuguese families is that considerable numbers of adult offspring live at their parents' home. More than 15 % of young people between the ages of 30 and 34 still live with their original family – something that brings specific dynamics into family interactions. It is also important to note another family structure that cannot be identified through the co-residence indicator: couples who live in separate residences (living apart together) (Levin, 2004). These couples may be married or living in a de facto union, often following the dissolution of a previous marriage whose children now live with one of their parents. Other cases entail a gradual beginning of conjugality with cohabitation. In Portugal the only data on this type of household come from a small number of studies. At the same time, the law that legalised same-sex marriage has created the conditions needed for this officially new family format to also be quantified. Similarly, the number of step families, with or without children from earlier unions, is growing with the increase in divorces and remarriages.

The Family Division of Labour

Let us now look at the variation in the proportion of women activity rates over the last 50 years and in particular at the strong presence of young women in the labour market. Although women have

2011 1960 2001 Female activity rate 55.2 18.0 53.6 Age 25-29 19.8 81.2 85.4 Age 30-34 16.6 80.9 88.3 Age 35-39 15.3 80.3 87.0

Table 13.2 Variation in female activity rates (1960–2011)

Source: Statistics Portugal, 1960 and 2001 Censuses, and Employment Survey

always contributed to the family budget by working in various ways – formal and informal, paid and unpaid, at home and outside it – if we compare the present day with the 1960s, we can see an exponential increase in declared female professional activity. The latter is even more significant among young women, where it comes very close to the male activity rates for the same age groups. As we have already said, the colonial wars of the 1960s and early 1970s led to a shortage of male labour, which women made up for by replacing young male soldiers who were mobilised to fight in Africa. Since then, women have remained and reinforced their presence in employment. To some extent, the fact that employed women need help with domestic chores and childcare has created jobs for other women. While there has been a slight decrease in the intensity of male activity, that of women has progressively risen, falling back slightly only in recent years, due to the current economic and financial crisis (Table 13.2).

Changes like this in the world of work have had implications for the family, whose organisation has ceased to be based on a segmented division of roles – the 'male breadwinner' model, with the man earning the living and the women performing the function of housewife and carer. Paid work has taken its place as the leading model for the family division of labour. The new model can be called the dual-earner family, with both spouses contributing to the domestic budget on a full-time working basis. Data from the European Quality of Life in a Changing European Workplace project show that Portuguese women in the service sector are those who work the longest hours in Europe (44 h/week), albeit 2 h less than the men (46 h/week) (Fodor, Lane, Schippers, & van der Lippe, 2011). However, there are still asymmetries in the way in which men and women are integrated into the labour market, which continues to be marked by various different forms of professional segregation and inherent pay and hierarchical inequalities. Average monthly salaries for men are 156 Euros higher than the female equivalents (Statistics Portugal, 2010).

Nor is there a symmetric participation in the various daily tasks at the domestic level, with women shouldering more responsibilities – a fact that is reflected in their levels of stress with regard to the work-family relationship, which are among the highest in Europe (Guerreiro & Carvalho, 2007). At the level of domestic life and caring for children and other dependents, various studies show that male participation is still small. Fodor et al. (2011) found that women spent an average of 13.4 h/week on domestic chores, while men spent 6.8 h. Evidence of this is provided by the sense of justice expressed by the two sexes in relation to the division of domestic chores. When asked how they assessed the degree of fairness in their families with regard to the division of such tasks, almost 40 % of men and only 9 % of women said they felt they did less than they should (Guerreiro, 2009). However, there has been an increase in the number of men who take parental leave when children are born – around 20 % of the fathers of children born in 2010.

Research in the Family Area and Its Contribution to Public Policies

The information presented here results from a range of research projects conducted at Portuguese university research centres that have developed the social sciences in general and the sociology of the family in particular, since the 1980s. A number of academics have given a real boost to the sociology

200 M.d.D. Guerreiro

of the family and the study of family policies. The result of their work in these scientific areas has helped to inform and evaluate the public policies which, over four decades of democracy, have been implemented and recurrently adjusted to the Portuguese and European socioeconomic and political situations. One characteristic of the Portuguese sociology of the family is that it always pays attention to the diversity of social and economic situations in which families in this country live. The study of families has thus always been combined with that of the social classes, and this has resulted in various works of reference on peasant (Wall, 1998), entrepreneurial (Guerreiro, 1996), working class (Almeida, 1993) and middle class (Torres, 2002) families. Of the academic institutions that anchored both these projects and many others that followed over a period of more than 30 years, GREF (Group for Studies on the Family), which was created in 1986 at CIES (ISCTE-IUL) (Centre for Research and Studies in Sociology, University Institute of Lisbon), deserves a special mention. We should also note the recent (2010) creation of OFAP (Observatory on Families and Family Policies), in a partnership between the University of Lisbon's Institute of Social Sciences (ICS) and CIES-IUL. OFAP brings the firstgeneration teams together with a significant number of younger researchers, who are involved in a variety of projects on topics linked to family questions and in postgraduate teaching programmes.² It is undertaking recurrent studies designed to address family policies and is providing technical/ scientific support to ministerial bodies with responsibilities in this area. The fields that have been the object of research and intervention linked to public policies include topics such as the family itself, generations, gender, sexuality, domestic violence, work-family, child and elder care, children at risk and poor families. Participation in research networks and teams at the European level has also made an important contribution to both the development of the scientific knowledge about these matters and the exchange of good practices at the family policy level.³

Family Policies in the Twenty-First Century

As we have seen, public policies are constantly being amended in the light of current social, economic and political conjunctures. The various political parties that have led Portugal's national governments tend to adjust policies in accordance with their ideological orientations, and the family area is a fertile ground for changes of this kind. At the same time, we must bear in mind Portugal's membership of the European Union, which leads to the transposition of directives that also impact family policies. Also, the fact that the country's economic situation and the predominant lines of governance in this sphere can be more or less propitious to this or that way of expending public resources.

Marriage, Filiation and Divorce

The laws on marriage have undergone a number of transformations since the establishment of the democratic regime in April 1974. In 1977 the Civil Code was adapted to the principles of the new Constitution of the Portuguese Republic (1976), benefiting from the innovative inspiration of the alterations that other European countries were making in their legal regimes. One of the main changes

¹ GREF, CIES-IUL was founded by Ana Nunes de Almeida, Maria das Dores Guerreiro, Anália Torres and Karin Wall.

²Masters in Family & Society, and Families & Children, School of Sociology and Public Policy, University Institute of Lisbon (ISCTE-IUL).

³ European network Families and Work; EU funded projects: Transitions to Adult Life; Transitions to Parenthood; Quality of Life in a Changing Europe.

at that time was the democratisation of the married relationship, which became based on the principle that the members of the couple have equal rights and duties. To the rights/duties of faithfulness, cohabitation and assistance were added those of respect and cooperation. Both spouses have exactly the same obligations with regard to providing for their children's upkeep and education,⁴ and both are responsible for the governance of the life of the family – a duty which had previously fallen to the woman. The 1977 amendments to the Civil Code removed the discrimination against children born outside wedlock, ending the distinction between legitimate and illegitimate offspring and making the determination of filiation in relation to both father and mother a legal right and duty.

De facto unions – cohabitation – that last more than 2 years are recognised for the purpose of awarding maintenance benefits to the partner of a deceased person, if the surviving member of the couple has no other way of obtaining means of subsistence. This form of conjugality was strengthened in 1994 with the creation of the legal right to pensions on the death of or for the provision of assistance to a third party. Later, in 2001, ⁵ de facto union was made the equivalent of marriage for the attribution of various other forms of social support. The objective was to ensure the protection of anyone who, regardless of gender, has shared hearth and board for more than 2 years. The 2001 Law says that the surviving partner has the right to live in the family home for up to 5 years after the death of the spouse and to take over the contract if the property is rented. It excluded the possibility of adoption by same-sex couples – an exception that was maintained by Law no. 9/2010, which permitted same-sex marriage and changed the definition of the 'institute' of marriage itself to 'the contract entered into by two persons who wish to form a family by fully sharing their lives (…)'.

Another major change in the wake of April 1974 was that Catholic marriages could now be dissolved by divorce – something that had been forbidden by the 1940 Concordat.⁷ The 1977 adaptations of the Civil Code only included some slight adjustments in this respect, designed to privilege divorce by mutual consent, set a minimum 3-year duration for marriage and impose a 3-month reflection period following a couple's decision to divorce. In 1995⁸ it became possible for separated couples to opt for joint custody of their children, and divorce proceedings by mutual consent were made simpler for childless couples.⁹ In 2001 this measure was extended to couples with children¹⁰ who wanted to end their conjugality. More recently, in 2008,¹¹ a new Law permitted divorce without the consent of one of the spouses, thereby putting an end to litigious divorce proceedings. These latest legislative changes were quite polemical and widely debated in the media, which is tending to link them to the rise in the number of divorces, which is currently above the European average.

Domestic Violence

Violence in the family was a subject that remained confined to the private life of the people involved until the late twentieth century. The greater isolation of the modern family and the norm that third parties should not interfere between husband and wife partly explain the late acknowledgement of domestic violence in general and conjugal violence in particular as a social problem. The representations

⁴Executive Law no. 496/77 of 25 November 1977

⁵Law no. 7/2001 of 11 May 2001

⁶At the end of this period, ownership of the home passes to the deceased's heirs.

⁷Executive Law no. 261/75 of 27 May 1975

⁸ Law no. 84/1995 of 31 August 1995

⁹Executive Law no. 163/95 of 13 July 1995

¹⁰ Law no. 272/2001 of 13 October 2001

¹¹ Law no. 61/2008 of 31 October 2008

of the family as a place for affections and solidarities constitute normative and ideological assumptions that lead to negation of the fact that in certain cases, the family can be a context for oppression, violence and unhappiness (Dias & Guerreiro, 2010). Where children are concerned, although the idea that their socialisation must not be associated with any kind of violence has gradually become more widely disseminated, violence is present in many of their lives. It takes a variety of forms that have been identified in various studies focused on this reality: physical, sexual or psychological violence as well as violence based on negligence or a lack of the care needed to ensure the child's well-being. In Portugal the phenomenon of the mistreatment of children has been more visible since the mid-1980s, with sociological studies based on cases flagged by health professionals (Amaro, 1986; Araújo, 1986). The first studies on domestic violence appeared some time later, promoted by social scientists from different areas and by government bodies charged with promoting women's rights. More recently still, the problem of violence towards the elderly has also emerged from the shadows, with various formats that include recurrent questions of mistreatment in the shape of negligence or abandonment, physical mistreatment and financial abuse. Above all, since the end of the 1990s, specific legislation has been created for the victims of domestic violence. The First National Plan against Domestic Violence (PNVD) was established in 1999, within the framework of the 50th anniversary of the Universal Declaration of Human Rights. The Plan provided for the implementation of a range of measures linked to the following: (a) raising awareness of this social problem; (b) recognition of domestic violence as a 'public crime' – i.e. one that any citizen can denounce; (c) the creation of mechanisms to protect victims and prevent violence; (d) the social reinsertion of victims; (e) the training and qualification of professionals who intervene in this area; and (f) the promotion of studies designed to deepen knowledge of domestic violence and thus serve to inform public policies (Almeida, André, & Almeida, 1999; Lourenço, Lisboa, & Pais, 1997; Pais, 1998). Portugal stands out among the European countries with good practices in terms of the measures regarding the denunciation of domestic violence and the provision of support to victims – particularly women and their children, who can stay at shelters, which exist all over the country. Police teams are trained to deal with violent situations in which the victims are more vulnerable – namely, children, the elderly, women and disabled persons – and provide support, protection and forwarding to other services in the cases they become aware of. The Fourth National Plan against Domestic Violence is seeking to consolidate the earlier strategy and actions, acting in accordance with a philosophy of proximity, with the involvement of municipal authorities, social partners and civil society organisations. Turning to the situation of children and young persons at risk, we should note the existence of Child and Youth Protection Commissions (CPCJ), which operate at the municipal level and involve schools, health centres, welfare authorities, parents' organisations and so on in pursuit of the objective of promoting children and young people's rights and protection.

Family-Work Balance and Care

Portuguese families in general and women in particular have been faced with the need to reconcile family life with work since the 1960s, when women began to enter the workforce on a large scale. However, the law has included provisions for the protection of maternity since the nineteenth century. The legislation of that time forbade women from working in the 30 days following childbirth, although they were not entitled to any pay. The first law granting 30 days of maternity leave in industry dates from 1937. One third of these days could be paid, if the employer felt the worker deserved it (Pimentel, 2000). The law also allowed the mother to leave work to breastfeed. In 1962 the maternity leave for working mothers who had paid social security contributions for at least a year was increased to 60 days on full pay, with the right to half-an-hour each day for breastfeeding. In 1976 maternity leave

was extended to 90 days, in compliance with International Labour Organisation (ILO) Convention 103, which had provided for 12 weeks of maternity leave since 1952.

Before Portugal joined the European Union, legislation passed in 1984 stepped up recognition of both parents' rights to combine work with parenthood when they had a child. The law provided for the father to take the maternity leave if the mother was unable to do so due to illness or death. It allowed both men and women to take 15 days of leave to care for a child, spouse or parent, and established their right to reduce working hours or take unpaid parental leave up for to 2 years while the children were small. It also provided for the creation of childcare services compatible with the parents' work schedules – generally full time for both – at a time when the employment rate for Portuguese mothers was already very high and it was essential to develop a 'national network' of services to facilitate the balance between work and family.

With accession to the European Community in 1986 and the need to comply with European guidelines, Portugal has taken further steps in renewing its policies on the work-family balance and has moved towards convergence with the common denominators that have been defined at the EU level. In different networks with national representation in terms of research and the dissemination of policies, each country's good practices have been considered and some of them included in other countries' policies, in accordance with their specificities and depending on the degree of acceptance. Recognition of the father's personal right to take leave when a child is born has gradually progressed from the example set by Scandinavian countries. Portugal granted time to the father for the first time in 1995, when transposition of Council Directive 92/85/EEC of 19 October 1992 on the 'introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding' amended the existing Portuguese legislation and gave the father 2 days, while maternity leave has been increased to 98 days with full pay. However, while the father was at first only entitled to two justified absences, it subsequently became possible for him to take part of the mother's leave, by agreement with her and once she had taken her 14 compulsory days. All of these measures reveal the existence of a new, fairer attitude to parenthood.

A New Generation of Family-Work Policies and Shared Parenthood

The 1996 revision of the Constitution expressly recognised the rights of working mothers and fathers to a balance between work and family. In 1999, maternity leave was extended to 110 days. This was the golden age of Portuguese social policies, introduced when António Guterres was the Prime Minister by the Minister of Labour and Social Affairs and the High Commissioner for Gender Equality and the Family, at a time when Europe was particularly favourable to work-family balance policies and gender equality.

This phase culminated with a new generation of parental leave that began with the Portuguese presidency of the European Union in 2000, when Portugal included a Minister for Equality in its government. Law 142/99 of 31 August 1999 increased maternity leave to 120 days and granted the father the right to 5 working days of paternity leave. In addition to the latter, which had to be taken in the 30 days following the birth of the child, there were 15 days of paid voluntary parental leave for exclusive use by the father. The 120 days of maternity leave could also be shared by the father, provided that the mother took at least 6 weeks of them. Each parent was also entitled to take 3 months of unpaid parental leave and to work half-time for 6 months until the child was 6 years of age. The father or mother was also allowed to take up to 30 days off each year to take care of children aged under 10 and to work flexitime or shorter hours until the children were 12.

M.d.D. Guerreiro

Temporary Reorientations: Focus on Motherhood

A short-lived right-wing government that took office in 2002 favoured an essentialist outlook on the way of addressing gender roles and focused on the woman's work as a caring mother and an increase in maternity leave. As a result, the 2003 Labour Code provided for a choice between 4 months' leave with 100 % pay and 5 months with 80 %. The 3 months of subsequent unpaid parental leave was maintained, and the possibility for parents of children aged under 6 to work half-time was extended to 12 months. When this government fell in 2005, and after a new revision of the Labour Code, there were new amendments favouring shared parenthood and giving parents of newborn children who were not in the labour market a pecuniary social benefit.

Greater Recognition of Fatherhood

The 2009 revision of the Labour Code made changes to parental leave that were clearly based on an idea of more shared parenthood. It recognises the father's right to be more present and to care for the newborn child. What was previously maternity leave is now called 'initial parental leave' and consists of 5 months with 100 % pay or 6 months with 83 % if shared by both parents. If only the mother takes this time, it is reduced by 30 days. The mother must take 6 weeks ('mother's exclusive initial parental leave'). In addition, the father has an exclusive right to another 20 days ('father's exclusive initial parental leave'): 10 compulsory working days with 100 % pay and 10 optional days also paid in full. Each parent can also take 3 months of extended initial parental leave but with only 25 % pay, which is why it is not often taken.

These changes to the parental leave system suggest three points for reflection. On the one hand, the recently instituted system is clearly oriented towards recognition of a new role for the father, who is not only a breadwinner but also a carer from the first days of the newborn's life. On the other hand, it shows the importance of European directives and the so-called open method of coordination in improving policies and consolidating the European social model. Thirdly, although the father's role as carer has been extended, there is still a wide gap between the mother and father's statutory leaves (45 as opposed to 10 days, respectively). Furthermore, families' strategies for sharing leave times tend to lead the father to take the minimum time that will guarantee the maximum total period of parental leave. The job insecurity experienced by many young fathers – worse at present, in this period of major economic crisis and high unemployment – and the occupational and organisational cultures embedded in the workplace still indicate the prevalence of the male breadwinner model to the detriment of the role of the caring father.

Childcare Provisions

In comparison with other Southern European countries, the fact that in Portugal since the 1960s many women have been in work has promoted an increase in the offer of childcare. Until the mid-1990s, these services combined a public offer that only covered a small number of hours a day and a private offer which the state subsidised for low-income families, with longer opening hours. The imperative need to increase professional participation by women placed work-family reconciliation policies on the public agenda. Goals were set for the increase in the number of facilities, with acknowledgement of the need to extend operating hours in order to make them compatible with the working hours of fathers and mothers, who both generally work full time.

Portugal currently has a childcare system that covers more than 35 % of children between the ages of 0 and 2 years and preschool facilities for nearly 85 % of 3–5-year-olds (Social Charter, 2010; CNE, 2011). While the number of crèches already exceeds the European Union goal (33 %), preschool still falls short of the recommended 95 % level. Two movements are helping to increase the offer of such services in Portugal: the growth in the number of establishments on the one hand and the fall in the birth rates on the other. There is also a certain imbalance in the distribution of childcare services between the different regions of the country, with a shortage that is still significant in the major urban centres in general and Greater Lisbon in particular (CNE).

Eldercare and Disabled Support

While the proportion of children and young persons in Portugal has fallen, we are experiencing a runaway rise in the number of elderly persons who require care. Many of them belong to generations that did not enjoy the benefit of a social security regime linked to their professional path. Most receive pensions at the minimum rate, which position them in a situation of poverty. It was above all from the 1990s onwards that the need to create support services for elderly dependents, the responsibility for whom traditionally pertained solely to their own families, began to be seen as a pressing one. Since then, a number of programmes have been developing a variety of formats for responding to the problems of the elderly, in a combined effort by public entities; private not-for-profit organisations (IPSS), many of which have a religious base; and private for-profit organisations. Elder support services include day-care centres, residential structures and domiciliary support services, which together provide a coverage of 12 % – insufficient in some places, given the number of elderly persons who need care. The current executive (the 19th Constitutional Government) is betting on an expansion of domiciliary services, on the basis of the idea that we must create the 'conditions needed' for the elderly 'to remain safety and comfortably at home' (PES, 2011) and also promote an active ageing. The elderly can obtain services in the home that include meals, personal and home hygiene, assistance with daily chores, doctor's appointments, assistance via telephone, small home repairs and forms of entertainment and sociability. The price of the various types of service is proportional to the elderly person's income, starting from a minimum that may be equal to the amount of his/her pension or may also have to be complemented by his/her children or other family members or by the state if he/she has no family.

The main policy measures for disabled persons date from the 1990s. They are designed to ensure dignified living conditions for persons with disabilities and incapacity and their active participation in the various spheres of the life of society. Persons with disabilities are entitled to allowances, with which they pay for their rehabilitation support services. The interventions in this domain are based on a change of paradigm itself founded on the 2001 World Health Organization guidelines that emphasise the biopsychosocial model. Various programmes were developed in order to promote the rehabilitation of disabled persons. Of particular note are the more recent concerns with early intervention in childhood, the access to support devices in daily life, and employment and social integration programmes. The leading measures taken in the last decade especially include the First Action Plan for Persons with Disabilities of Incapacity 2006–2009 (PAIPDI) and the National Strategy for Disability 2011–2013 (ENDEF). The present government is seeking to use the Social Emergency Programme (PES 2011) to increase employability, ensure the presence of specialised professionals in institutions that provide support, improve architectural accessibilities and provide conditions that allow family members who care for persons with disabilities to periodically take a break and rest.

In the last few years, the tendency has been for the state to outsource the provision of various social protection services to accredited organisations. The interlocutors par excellence have been the National Confederation of Solidarity Institutions (CNIS) and the Union of Portuguese *Misericórdia* Charities (UMP), along with a number of associations that represent other not-for-profit or for-profit

private organisations. PES 2011 is particularly important in this respect. It is seeking to strengthen the partnership between the state and the various entities in the social economy, based on the creation of a National Solidarity Network (RENASO) that brings the organisations which belong to CNIS and UMP together in a single network.

Policies Targeted at Poor Families

Some of the country's structural characteristics – an economy that has not been modernised much and is based on a policy of low salaries, the low level of qualifications and the amount of long-term unemployment - have contributed to the large number of families in Portugal who are living in a situation of poverty. In the 1990s the poverty rate was around 20 %; it currently stands at 18 %. Eurostat (2010) data suggest that around 25 % of the population is at risk of poverty before social transfers. Pedroso (2005) says that one specificity of the Portuguese population is that the low salaries mean that the poor contingents include some working people. The minimum wage in Portugal is 485 Euros/month, the average wage is around 800 Euros/month, and about 40 % of wage earners in the sector private sector are paid less than 600 Euros/month (GEP, 2012). Following a 1992 recommendation by the Council of Ministers of the European Union, in 1996, Portugal recognised the right to a minimum level of income and launched the Guaranteed Minimum Income (RMG) programme, which was later renamed the Social Insertion Income (RSI) programme. This was intended to modernise and structure the Portuguese welfare state, based on a philosophy that sought to overcome the 'assistentialist' aspect of the traditional policies for fighting social exclusion and creating social insertion opportunities (Capucha, 1998). The beneficiaries of the RMG/RSI thus sign an insertion contract designed to promote the conditions needed to increase their employability through education/training programmes, health support, support with looking for a job, and so on. In 2010 this measure covered 527,167 beneficiaries, a third of whom belonged to single-parent families (Statistics Portugal, 2010). Here too there is a predominance of families with an above-average number of children and with members who suffer from health problems (disability, mental illness, drug abuse) or are long-term unemployed, sometimes accumulating several of these problems (Lourenço, 2005). Recent studies suggest that 27 % of children and young persons live in families who are in a situation of poverty (Bastos, 2011). Some of these children are the object of special interventions by institutions designed to promote the protection of children at risk, safeguard their well-being and ensure they grow up in a balanced way.

In addition to this key structural measure targeted at families with the least resources, we should also note the existence of a right to a family allowance of between 25 and 140 Euros/month, for children: (a) up to their first birthday, (b) between the ages of 1 and 3 years and (c) above 3 years, in each case limited to households with an annual income of less than 8,800 Euros.

Family Policy Implementation and Assessment

Over the course of this chapter, we have seen how the implementation of family policies in Portugal has been related with the country's situation in terms of political and governmental conjunctures, which imprint their ideological matrix on the design of the support that is targeted at families. At the same time, these policy measures seek to adjust themselves to the economic cycles that justify new forms of redistribution and greater or lesser restrictions in this or that area. The various governments' political programmes set out lines of action, the grounds for which lie both in the work of experts and researchers on the different problems linked to the family, who recurrently run up studies intended to

diagnose situations or assess intervention programmes and plans, and in the concrete experience of the stakeholders who deal with families and their problems in the field. The backcloth to these forms of intervention and social welfare promotion is to be found in guidelines issued by the European Union and other international bodies, such as the OECD, which constantly monitor indicators and make international comparisons. It has been on the basis of these principles that the conditions and the legitimacy needed to obtain resources which have made it possible to promote a family and social protection policy in Portugal have gradually been created. The studies on poverty in Portugal carried out at university research centres (Almeida et al., 1992; Capucha, 1998) have identified the matrix of problems and suggested clues to help guide the delineation of one of the policies that have been the keys to the structure of the Portuguese welfare system. In the disability area, we can particularly point, for example, to the Survey of Incapacities, Disabilities and Disadvantages (SNR, 1996), which found that nearly 30 % of persons over the age of 50 with disabilities had never had access to any measure designed to promote their rehabilitation. The same happened with the studies on the reconciliation of work and the family (Guerreiro, Abranches, & Pereira, 2000; Torres, Silva, Monteiro, & Cabrita., 2005), which served as the basis for the identification and quantification of the extent of the needs in terms of family support services and of the mismatch between childcare establishments' opening hours and mothers and fathers' working hours. In the area on domestic violence, the research on both the number of conjugal murders (Lourenço et al., 1997; Pais, 1998) and the number of children who appeared in hospital emergency rooms was also carried out at university research centres and served as starting points for the recognition of family problems that required public policy interventions. The family situation of the elderly and their unmet needs are becoming more visible thanks to studies undertaken in particular by postgraduate students, who have addressed these topics as part of their master's and Ph.D. work (Fernandes, 1997; Pimentel, 2007; São José, 2006). These studies are making it possible to put important subjects on the political agenda and serve as the starting point for both outlining and monitoring many policies. However, the results of these research projects are only as rich as the knowledge they manage to obtain about the concrete problems of families in Portugal and the comparisons they are able to make with the realities in other countries, with the identification of the good practices that exist in the various domains. Portugal's incorporation into the European Union, the European research programmes that have promoted partnerships between teams from several countries over a 15-year period and the networks that have sprung up as a result have all contributed greatly in this respect. The transposition of these experiences to other forums outside Europe – particularly through the use of real-time communication technologies that promote a joint (albeit virtual) presence – is already beginning to take its first steps and to demonstrate the advantages of an everbroader sharing of experiences when it comes to identifying good practices that lead to the well-being of families of every generation.

The evaluation of the efficacy of the various policies has not yet developed to any great extent – understandably, given that many of them are recent. However, it has been possible to monitor the impact of a few policies and readjust them accordingly. One such case was the measure that instituted 5 days of paternity leave in 1999. Studies in enterprises at the time (Guerreiro et al., 2000) found that it was difficult for fathers to feel a sense of entitlement to this right. The leave was thus made compulsory, so that each father could effectively feel a subjective sense that he was entitled to take the leave. Another case concerned the standards and rules applicable to homes for the elderly, crèches and kindergartens, in terms of their capacity, the composition of their teams of professionals and other requisites. A number of studies (Social Charter, 2010) identified generalised problems with compliance with the provisions of the law, and this led to the definition of new rules that were a better match to the current conditions in the field.

However, there have been no such evaluations in many other domains, and a range of difficulties is preventing any from taking place. One possible explanation may be political issues, in the sense that if the measures concerned have not produced the desired effect, the position of their promoters might be undermined. Another is linked to the difficulty gaining access to the measures' potential

208 M.d.D. Guerreiro

beneficiaries, sometimes in the name of the right to confidentiality and privacy – problems that very often face researchers in the family field. Overcoming these obstacles to obtaining greater knowledge about the efficacy of policies is thus a challenge we need to meet.

Conclusion

In this chapter, we have seen how family policies have evolved in Portuguese society. We have analysed the social, economic and political context in which they were developed and implemented, and this has helped us understand why the Portuguese welfare regime differs from those of other southern European countries. Historical, political, economic and social specificities contribute to our comprehension of the national reality at the level of the family and family policies. Traditional weaknesses have conditioned Portugal's modernisation. Also, once the country did not participate in the Second World War, the lack of the dynamics of development resulted from it. However, starting in the 1960s, for nearly 15 years, it faced a colonial war that affected the lives of thousands of young Portuguese men, who had to fight in Africa or go into exile abroad to escape it. Others emigrated legally. The women were left behind to contribute to the workforce required for a degree of modernisation of the economic structures at the time and were also left in charge of the household. This goes a long way to explaining why higher employment rates among Portuguese women and the development of policy measures designed to create child-care facilities occurred earlier than in other Southern European countries.

In the 1980s, accession to the European Union increased the focus on family policies, bringing Portugal closer to its partner countries. There are still structural traces in the economy, the production and redistribution of wealth and the population's qualifications and cultural values, which make Portuguese society one of unfinished modernity (Costa & Machado, 1998). Portugal is a society where traditional and modern segments coexist and where, after a process of modernisation and convergence in several important social policies, the serious economic crisis the country is now going through. The austerity measures the current government is being forced to take are bringing with them the risk of backward steps in public policies in general, including the family policies that have been developed in recent years but still require consolidation. Unemployment has risen substantially, to near 17 %, and GDP continues to fall, with families reducing their spending, all of which has led to a major recession in consumption which is generating still more unemployment. Public spending has increased, to a large extent, due to the increased cost of unemployment benefits. At the same time, public revenues have fallen, also as a result of unemployment and the inherent drop in taxes, notwith-standing huge rises in tax rates, particularly on essential consumer items. The combined rises in the prices of food, energy, rent and transport are having an intense effect on family budgets.

The possible recommendations in the face of this framework involve improving the management of public policies, ensuring that the available resources are expended fairly and in ways that constitute structural investment which will promote the development of our society and the well-being of our population and families. For example, the work-family reconciliation policies designed to promote services for children and the elderly population could constitute a kind of Keynesian measure that would leverage job creation. The resulting salaries would have a positive impact on the budgets of the families involved and stimulate the market while simultaneously bringing in more taxes and social security contributions from the new jobs. A complementary aspect is the need to ensure that all children – even those from families in a situation of poverty – are integrated into a universal preschool system, thereby giving them access to educational conditions that promote their success at school and a better occupational integration in the future, thus in turn breaking the cycle of the reproduction of poverty which affects so many families in Portugal. In addition, we need family and parental education programmes that help make the household a safe, harmonious space for all, without conflicts or risks for any of its members, thereby providing everyone with the ideal conditions for living their daily lives.

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210 M.d.D. Guerreiro

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Chapter 14 Family Policies in Moldova

Valentina Bodrug-Lungu and Mihaela Robila

Abstract Family policies in Moldova are heavily influenced by the sociopolitical context. In terms of demographic characteristics of Moldovan society, the declining birthrate and high emigration decreased the size of young population, which led to an increase in the share of elder population. In terms of economic development, the country has continued to be confronted with challenges. However, progress in family policies development has been registered. In the past several years, several significant social policies have been developed, such as the domestic violence law, introducing the paternity leave or policies supporting people with disabilities. This chapter systematically reviews Moldovan family policies and provides recommendations for further development.

Keywords Moldova • Family policies • Domestic Violence • Parental leave • Maternity leave • Paternity leave

Republic of Moldova lies in the eastern part of Europe, occupies an area of 33,843.5 km², and has about 3.656 million people, 47 % of them living in urban areas (CIA, 2012). In terms of ethnic groups, most of the people are Moldovans (76.5 %), Russians (11.3 %), and Ukrainians (5.5 %), and most (93 %) are Christian Orthodox (Census, 2004; CIA, 2012). After becoming an independent and sovereign state in 1991, the Republic of Moldova became a member of the United Nations (1992) and a member of the Council of Europe (1995).

The Sociodemographic and Family Characteristics in Moldova

The demographic situation of the Republic of Moldova has deteriorated profoundly and constantly since the 1990s, due to political, economic, and social changes caused by the social and economic transition. This situation is similar with the one in other southeastern European countries. The main reasons for the population decline in Moldova are the low fertility rate (1.55) and external migration

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(CIA, 2012). The declining birthrate unbalanced the age structure of the population and intensified the demographic aging.

The life expectancy at birth has been increasing for the past two decades and reached 69.1 years in 2010, about 1 year higher compared with 2003. Currently, the average life expectancy at birth is 65 years for men and 73.4 years for women, still lower compared with the European Union (EU) states. Women's life expectancy is higher than men's by 8.4 years. The average life expectancy in urban area is higher than in the rural one by 3.5 years for men and by 3.2 years for women (Report on CEDAW implementation in Moldova, 2011).

The declining birthrate and high emigration decreased the number of young population, which led to an increase in the share of elder population and demographic aging. In 2010 the share of population under the employable age was 17.8 % (2009 – 18.2 %), of employable age was 66.7 % (2009 – 66.5 %), and over the employable age was 15.5 % (2009 – 15.3 %) (Annual Social Report, 2010).

In 2010, the aging coefficient was 14.4 %. The aging process is more pronounced in the rural areas, where the share of the population age 60 and older is 15.2 % compared to 13.2 % in the urban area. Among persons aged 60 and older, the majority are women with a share of 16.8 %, men representing 11.8 % (Annual Social Report, 2010). The elderly women account for 17.9 % of the total rural female population. Therefore, the care for the population should be differentiated by age categories and will require deeper emphasis on older persons, in order to ensure an active and safe aging.

Life expectancy at the retirement age is 20.52 years for women and 13.88 years for men. The considerable aging wave will start in 2014, when in the age structure the share of persons aged 0–14 years will be the same as of persons aged 60 and older, after which the first variable is expected to decrease and the second one to grow constantly until 2050. Aging is a structural demographic trend with potential dramatic social and economic consequences, both for the state budgets and for the population, with pensions and health services being the most affected areas.

The Influence of Socioeconomic Context on the Social Policymaking Process

In the Republic of Moldova, during the last years, the economic policy implemented in all areas of activity aimed at supporting the social-economic stability, continuing the reforms and recovering the economy, extending the private sector, restructuring economic units, consolidating the tax discipline, reducing debts for the payment of wages and pensions, and providing social protection to the population. This period was also characterized by lengthy economic crisis and obvious unbalance of people's income.

In 2003–2010, the economy of the Republic of Moldova had a satisfactory evolution, with the economic reforms still being in progress. The economic growth ranged between 3 % and 7.8 %. An economic decline occurred only in 2009 when it was not possible to avoid the impact of the global economic and financial crisis on the Republic of Moldova, and the GDP decreased by 6.5 %. The data for 2010 show that the economy of the Republic of Moldova is gradually bouncing back with a 6.9 % growth (Report on CEDAW implementation in Moldova, 2011). Currently, the private sector represents over 70 % of the gross domestic product (GDP) and over 75 % of all the employees in the economy.

Remittances have become a major source of financial support for many developing countries, including Moldova, increasing the income of migrants' families and the investments in healthcare, education, and small business. Remittances have a direct impact on household welfare. In 2009 they have reduced the absolute poverty rate on average by 11.7 %. Despite their decline, remittances continue to play an important role in Gross Domestic Product (GDP).

There are still a series of problems that are impeding the achievement of the set parameters of economic growth: people's living conditions are unsatisfactory; incomes per capita are still among the lowest in Europe; the indicators of the living standards and the social indicators have the lowest values as compared to other countries in transition. In 2003 the average disposable income per family member covered 67.3 % of the subsistence level; in 2010 this amount covered 92.7 % of the subsistence

minimum. Meanwhile, the experts recommend a qualitative analysis of the ratio between the disposable income and the subsistence minimum. The Government will need to adopt a law on the minimum subsistence and, simultaneously, a new methodology for its calculation.

From a gender perspective, there is no significant difference between the poverty levels of men and women. Households managed by both men and women are equally exposed to poverty. Thus, analysis of data by gender shows that men and women are situated on almost the same level of poverty – at around 26 %. In the rural areas, there is a 20 % higher risk of poverty for both women and men than in the cities (The Second Millennium Development Goals Report, 2010).

Even though there is no serious disparity between the poverty rates of women and men, an analysis of the different ways poverty affects the most vulnerable population categories based on the Household Budgets Survey brings up a different perspective. Thus, the greatest gender disparities are seen in households which rely on unemployment benefits, those headed by men are less poor than those headed by women. Another discrepancy, although less significant, is the one between households managed by illiterate men or men lacking primary education and those headed by illiterate women and women without primary education, the former being much poorer. With regard to children, there are no significant disparities from the gender perspective for those under the age of 5 years, but for older children poverty among households headed by women in 2009 tended to be higher than among those headed by men (The Second Millennium Development Goals Report, 2010).

Similarly to the poverty level, the inequality level in the country had an uneven evolution. In 2009, for the first time in the past 3 years, the inequality level increased up to 0.309, which means an increase in the gap between the living level of the rich and of the poor. The most vulnerable categories of population exposed to poverty are the traditional ones: families with many children, families that live on incomes from agricultural activities, the elderly, and people with disabilities (Moldova from Social Exclusion to an Inclusive Human Development, 2011; Ostaf, 2011; The Second Millennium Development Goals Report, 2010; Vaculovschii, Vremish, & Craievschi-Toartă, 2011). In 2009, the incidence of poverty in households with persons with disabilities was 28.6 % (The Second Millennium Development Goals Report, 2010).

According to the Ministry of Economy, the economy gradually recovers from the crisis. Restoring external demand and the elimination of administrative constraints have contributed to economic recovery since 2010. After a rise of 6.9 % of GDP in 2010, first quarter of 2011, economic growth has exceeded all forecasts, reaching 8.4 % compared to same quarter of the previous year. Reviving industrial sector and increasing the volume of foreign direct investment and export growth at a rate higher than imports have made significant contributions to GDP growth (Monitor of the Government, 2011).

Family Policy Development and Implementation

When developing family policies, it is extremely necessary to use empirical research data on families (Robila, 2012). While the research on children and families during the communism was very limited in Moldova, in the past two decades, the research on family issues has been increased. Literature has been published on general characteristics of Moldovan families (e.g., Bodrug-Lungu, 2004; Gagauz 2011; Gagauz & Buciuceanu-Vrabie, 2011; Green Paper of the Population of the Republic of Moldova, 2009) as well as on specific issues, such as domestic violence (Asay, Bodrug-Lungu, & Robila, in press; Violence against Women in the Family in the Republic of Moldova, 2011), specific needs of children and elderly without care of family members left to work abroad (Cheianu-Andrei et al., 2011), reconciliation between work and family life (Reconciliation between work and family life, 2010), families taking care of children with disabilities, migrants' health (Moldovan Migrants' Health Impact, 2010), social exclusion, or aging (Elders in Moldova, 2010).

Family Policies Targeting Marriage

According to Article 48 of the Constitution of the Republic of Moldova, "family" is the natural and fundamental element of the society and it is entitled to protection by society and the state. Family rights are protected by law, except when these are enforced contrary to their purpose or contrary to the law. Family relationships, in particular the conditions and manner of concluding, terminating, and declaring the nullity of marriage; personal non-property relations, arising from marriage, adoption, forms, and effects of legal protection of orphans and children deprived of parental care or in other vulnerable situations; and other family social relations are governed by the Family Code, approved by the Law of the Republic of Moldova no.1316-XIV (2000) (with subsequent amendments), the Civil Code approved by Law no.726-III of the Republic of Moldova (2002) (with subsequent amendments), and other normative acts. These acts ensure the respect of the principle of monogamy; marriage based on free consent of men and women; equal rights of spouses in the family; mutual moral and material support; marital fidelity; priority of child's education in the family; care for the support, education, and safeguarding of the rights and interests of minors and other family members, who are unable to work; amicable settlement of all family life issues; inadmissibility of deliberate interference in family relationships; free access to court protection of the legal rights; and interests of family members.

According to the Family Code, all married persons have equal rights and obligations in family relationships, regardless of gender, race, nationality, ethnic origin, language, religion, opinion, political affiliation, wealth, and social origin. If the parents have children outside marriage, according to Article 58 of the Family Code, the parents have equal rights and obligations towards children, regardless of whether the children were born in marriage or outside of it or whether they live with the parents or separately. The rights and obligations of the parents, except as provided in this Code, shall lapse when reaching adulthood or obtaining full legal capacity by the child.

Only marriage concluded by state civil registration service creates rights and obligations between spouses. Article 11 of the Family Code provides the following conditions for conclusion of marriage: the existence of the mutual, uncorrupted consent, expressed personally and unconditionally by the woman and the man who are getting married, provided that they have reached the age when marriage is allowed. The persons who want to get married shall inform each other about their health condition. In order to implement the recommendations of UN Committee, the Government of the Republic of Moldova has modified the minimum legal age for marriage from 16 years to 18 years for women (for men, it has been 18 years) (Article 14 of the Family Code, with the amendments made by Law No. 120-XVI 2008). For good reasons, the marriage age can be reduced but with no more than 2 years and shall be authorized by the local government in whose jurisdiction the persons who want to get married reside, based on their application and the consent of minors' parents.

All questions in family life are settled by the spouses jointly, in accordance with the principle of equality in their family relationships. Each spouse has the right to continue or to independently choose his/her occupation and profession. Spouses establish their residence freely and independently. The relationships between spouses are based on mutual respect and help and on joint obligations of supporting the family and of taking care of and educating the children. In concluding their marriage, the spouses can choose between taking the surname of one of them or one formed by joining both names as common family names or keeping the surname they had before marriage. When registering a divorce, spouses may choose to keep the surname chosen when they concluded their marriage or to take back the surname they had before marriage (Article 17).

The legislature has provided cases when minors may become parents. Thus, Article 59 of the Family Code provides that minor parents have the right to live with their child and participate in their education. Also, the unmarried minor parents can recognize and challenge the fatherhood and motherhood in general bases. The minor parents who have not reached the age of 16 years may require the establishment of paternity by judicial way.

The issues related to the spouses' property are stipulated in a number of articles of the Family Code. According to Article 20, the assets acquired by spouses during the marriage are owned jointly by both spouses. Article 21 stipulates the right of the spouses to own, use, and decide of joint assets.

With regard to divorce, we note that the reasons for divorce are specified in Article 33 of the Family Code, namely, (1) marriage shall cease upon death or judicially declared death of one spouse and (2) marriage may be terminated by divorce (dissolution), based on the application of one or both spouses or of the guardian of the spouse who has been declared incapable. In the absence of agreement of the wife, the husband cannot ask for a divorce during her pregnancy and within 1 year after childbirth if the child was born alive and is living (Article 34).

Law no.167 (2010) added to Family Code the following: "if during the examination of the application for divorce, one spouse does not give his/her consent to the divorce, the court will defer consideration of the case, setting a deadline the reconciliation of one to six months, except for the divorces started on the ground of domestic violence, confirmed by evidence" (Article 37). Thus, the Government proves its political will to combat domestic violence. This is confirmed by the statement that the child is entitled to protection against abuses, including against corporal punishment by parents or persons replacing them (Article 53(4)); methods of education must exclude physical and psychological violence (Article 62(2)) which complemented the Labor Code by Law no.120-XVI (2008).

In the past 30 years, the percentage of children born by unmarried women increased three times. The number of births out of the wedlock by very young women, economically dependent women, and by those of mature age who cohabitate has increased. The number of out of the wedlock births by women 20 years old and younger increased over the years to 46.9 %(in 2009) of the total number of births in this age group. In cities half (50 %) of the children born by mothers aged under 20 years are out of the wedlock (47 % in villages). Among the factors determining the increasing number of births out of the wedlock are divorce, liberalization of social norms, economic instability, migration, and more tolerant attitude towards this phenomenon, especially at a mature age.

Domestic Violence

The violence against woman in families and the society is a violation of human rights of women, recognized in international legal treaties and in the national ones. In the Republic of Moldova, the Law on Prevention and Combating of Violence within Family no. 45-XVI, which was approved in 2007 and instituted in 2008, is an important step towards stopping violence and, it marks the recognition and implementation of international human rights commitments, including Recommendations of the Committee for the Elimination of Discrimination against Women. The Law defines the violence in the family and its forms, establishing an institutional framework with concrete responsibilities for the competent authorities, providing for establishment of assistance centers for the victims of violence and mechanism of settlement of violence cases by the possibility to submit requests, applying protection order, and isolating the perpetrator. This law stipulates that the prevention and combating of violence in the family is part of the national policy for family protection and support and is an important public health issue.

Moldovan Ministry of Labor, Social Protection and Family (MLSPF) initiated a process of harmonization of national legislation in force with the provisions of the abovementioned law. In this respect, the report on the compatibility of Moldovan legislation with the Law on Prevention and Combating of Domestic Violence was developed by a group of independent national experts, funded by UN agencies (e.g., UNFPA – United Nations Population Fund, and UNDP – United Nations Development Program) in Moldova, which included a series of recommendations to amend and supplement the national legislation. In 2010 the Parliament adopted the Law no. 167, proposing amendments and additions to a range of legal acts, including Criminal Code (Article 1012), Criminal Procedure Code

(Article 447), Family Code (Article 210), Civil Procedure Code (Article 451), Law on Social Assistance (Article 249), Law on Prevention and Combating of Violence within Family (Article 17), Law on Local Public Administration (Article .116), Law on Employment and Social Protection of Jobseekers (Article 312), and Law on Police (Article 56), ensuring thus the mechanism of implementation of legal provisions in preventing and combating domestic violence. Particularly important was the addition in the Criminal Code of sexual abuse committed against a family member (Article 172(2) b2) which will be punished by imprisonment from 5 to 12 years. By adopting these provisions, the state recognizes the criminal nature of domestic crimes.

As a result, concrete actions have been driven by rapid intervention and resolution of cases of domestic violence. In 2008, a coordinating group on prevention and combating of gender-based violence, including domestic violence, was established. According to Article IX of the Law no. 167 (2010) on amendment and supplementing of certain legal acts, the interministerial coordinating council was established for the prevention and combating of violence in the family for interministerial coordination of this area. The establishment of this structure ensures a more efficient coordination of the actions of various professionals and institutions in preventing and combating violence in the family.

During 2009–2010, the representative of MLSPF and General Prosecutor's Office participated in the development of the draft Convention of the Council of Europe on Preventing and Combating Violence against Women and Domestic Violence (CAHVIO). The adherence of the Republic of Moldova to CAHVIO constitutes a platform for adjusting the national legal and regulatory framework to the European standards. Thus, the state recognizes violence against women, including domestic violence, as a social problem for the Republic of Moldova and a violation of human rights. The prevention of this phenomenon has been recognized as an interdisciplinary and multi-sectorial process, which should be achieved through a set of policies.

The Republic of Moldova benefits of considerable support from the international community in the actions of preventing and combating domestic violence and human trafficking. In 2008–2010, UNDP, UNFPA, IOM, and OSCE Mission to Moldova, in partnership with the Government of the Republic of Moldova and the civil society, implemented the project "Protection and Empowerment of Victims of Human Trafficking and Domestic Violence," financed by the Japanese Government, through the UN Human Safety Fund. Under this project, specialists in 30 pilot sites were trained, many informative actions were undertaken, and community infrastructure was developed.

The issue of domestic violence prevention and establishment of the culture of nonviolent relationships are approached by different actions and information campaigns. Courses on "Family Life Education" and "Civic Education" in the preuniversity education system include "Family Violence" topics, and meetings with health and law experts are organized as extracurricular activities. University and preuniversity curricular provide courses on domestic violence (e.g., the "Domestic Violence" Course at Moldova State University, the "Counseling Victims of Violence" Course at Moldova Free International University/Master in Psychology). The research on domestic violence has also increased (e.g., Asay et al., in press). A study on domestic violence against women is being conducted by National Bureau of Statistics (NSB), and its qualitative and quantitative data will allow approaching the phenomenon in depth, in order to improve the services of preventing and combating domestic violence.

The Ministry of Labor, Social Protection and Family developed and approved the regulatory framework for the social service infrastructure for the domestic violence victims, the framework regulation on the organization and functioning of the centers for rehabilitation of victims of domestic violence (GD no. 129 of February 22, 2010), and the quality standards in the area. Currently, there are several centers in the country, providing services for the victims of domestic violence. Thus, the opportunities to access the protection services for the victims of domestic violence have increased. A project on supporting economically vulnerable women in Republic of Moldova that provides assistance to victims of domestic violence in finding employment and starting a business was started in 2011 and is funded by Orange Foundation and implemented by UNFPA in collaboration with MLSPF and NGOs. The work with perpetrators is carried out by the staff of the Police Units responsible for

the preventive record of family violence and organization of preventive measures with perpetrators. With the support of UNFPA, the Concept Paper on Perpetrators Rehabilitation services was elaborated. Currently they work on opening the center for their rehabilitation and on the development of legal-normative framework in the field.

At the same time, despite the actions taken to prevent and combat domestic violence, some gaps in terms of legal and regulatory frameworks and human and financial resources exit. Thus, the state must strengthen the links between the existing regulatory framework (particularly the procedure concerning the issue and enforcement of the protection order), its adjustment according to the needs of protection and support to the victims of violence, and strengthening of specialists skills, especially in the context of staff turnover. The development of the accreditation system of social services, including those for the victims of domestic violence, is on the agenda of MLSPF. The lack of national computerized data system remains a serious gap on which the authorities are working on now.

Family Policies Targeting Child-Rearing and Work-Family Balance

One of the key objectives of the Government activity is motherhood protection. The monthly rate of maternity allowance is 100 % of average monthly income earned during the last 6 calendar months, income from which social insurance contributions were paid. Establishment, calculation, and payment of maternity allowance are made by the economic unit where the employee has his/her basic job based on the individual employment agreement at the expense of the state social insurance budget. According to Article 250 of the Labor Code, pregnant women and breastfeeding mothers, according to medical conclusion, shall be transferred to easier work, which excludes the influence of adverse production factors, maintaining the average wage at the previous workplace. While solving the problem of granting an easier work, which excludes the influence of hazardous production factors, the pregnant woman should be released from performing labor duties with the preservation of the average wages for all the working days, when she did not work for that reason.

According to Article 16 of the Law no.289-XV (2004) on Allowances for Temporary Disability and other Social Benefits, the insured, unemployed wives in families where only the husband earns an income and unemployed women are granted maternity leave which includes prenatal leave of 70 calendar days and maternity leave for a period of 56 calendar days (for complicated births or birth of two or more children – 70 days), period for which the maternity allowance is paid. In case of a stillbirth or if the baby dies during the maternity leave, the maternity allowance is granted for the established period.

The partially paid parental leave can be used entirely or partially at any time until the child reaches the age of 3 years. The partially paid parental leave can be used optionally, upon written request, by the father, grandmother, grandfather, or other relative who is directly involved in caring for the child as well as by the guardian. Such leave is included when calculating the seniority, including the special seniority and the length of employment. Although the length of employment is not affected, the amounts of social security allowances based on which the pension is calculated are decreasing.

According to the data provided by the National Social Insurance Company (NSIC), the number of beneficiaries of parental allowances for children up to 3 years by categories (mothers, fathers, grandmothers, grandfathers, guardian, and other relatives) for the period 2003–2010 shows a significant prevalence of mothers, their rate ranging from 99.7 % (2003) to 98.65 % (2010). Despite the favorable legal framework, the responsibility for raising and educating children is vested in the mother, a situation caused primarily by the persistent traditional gender stereotypes. Moldova has paternity leave of 3 days.

Mothers who work part time or at home receive both wages and child benefits. In addition to maternity leave and partially paid parental leave until the age of 3 years, mother or one of the aforementioned persons may qualify for additional unpaid leave to take care of child aged between 3 and 6 years, period for which he/she keeps his/her job. At the same time, in the opinion of national experts,

the period of additional leave could be an impediment to women promotion rather than a measure to protect women. During the additional unpaid leave for childcare, the mother or another person looking after the child has the right to work part time or at home. The additional unpaid leave period is included in calculation of seniority, including special seniority, provided that the employment agreement has not suspended at employee's initiative. According to Article 86(2) of the Labor Code, no employee can be dismissed during the maternity leave, partially paid leave for childcare until the age of 3 years, or during additional unpaid leave for childcare aged from 3 to 6 years.

Under the regulation on the fulfillment of military service in the Armed Forces, women soldiers who are on maternity leave are not released from military service (they are transferred under the jurisdiction of the Ministry of Defense), and upon returning from leave, they are reassigned to positions in military units. However, some problems exist in this area. Thus, for women engaged in military service, the childcare leave period is included in overall seniority and length of employment, but not included in the calendar age of military service. This provision restricts the possibility to benefit the pension.

Family Policies Supporting Families at Risk

According to the national legislation, the state and the family are committed to ensure the raising, support, education, and protection of the child. The National Council for Child Rights Protection (NCCRP) is responsible for the development and implementation of policies for protection of the rights of the children and the family and ensures the inter-sectorial coordination both at national and local levels. Also, the Ombudsman for Children's Rights is an important tool in the promotion, protection, and monitoring of the rights of minors. Cases of children's rights violation are solved largely through guardianship authorities that are operating in each district/municipality. According to the law, starting with the age of 14 years, children can apply directly to these institutions if some of their rights are violated. Children also may address a complaint directly to the court of law.

The social policies for child protection are regulated by the National Strategy on Child and Family Protection (2003), and the Strategy and Action Plan for the Reform of the Residential Childcare System for 2007–2012. They stipulate, as a priority, the application of family-type and community-based protection forms for children in difficulty. Placement of the child in residential institutions is the last option, because of predominantly negative repercussions, affecting the psychosocial development of the child and his/her integration in society at the post-institutional stage.

The impact of labor migration of parents on children and elderly is complex; on the one hand it provides economic and financial benefits, but on the other hand, it affects the children and elderly left behind, which are often subject of social exclusion. To reduce the negative effects of migration and maximize its development benefits, the Government has established, among its priorities, the development of policies and initiatives in this field. Together with the actions of migration management and efficient use of remittances, an important direction is the protection of children and elderly persons left behind. In this context, the Government is implementing the National Action Plan on the Protection of Children Left without Parental Care (2010–2011). As for extracurricular programs and children's involvement, the decision-making, positive models of participation include Local Councils of Children, Child Rights Monitoring Group, establishment of teams of peer educators in healthy life promotion, etc.

The policies for social protection of family and child are directed towards encouraging the birthrate increase by promoting effective family support, modernization, and diversification of community services and family services to prevent institutionalization of children and enhance the quality of family's life, as the core of the society. Addressing the serious problems, currently faced by the family and the child that are determined by negative phenomena such as economic decline, population aging,

family's living condition instability, and the impact of illegal migration of parents seeking a job, is a priority objective of ensuring an adequate and effective social protection.

The national system of social protection of family and child, based on individualized approaches in promotion of the choice of forms and measures of protection, contains two main components: cash benefits and social services. In order to harmonize the national legal framework with the international one, several amendments have been enacted (Law no. 177-XVI of July 20, 2007) in the legal acts regulating issues of social protection of population groups. The amendments refer to the assignment of the status of child with disability before the age of 18, which will generate additional social protection for children with disabilities in determining the right and making the state social allowance payments and the payment of nominal compensations.

The reform of the juvenile justice system covers all categories of children, such as minors victims, and children witnesses of crimes. Also, primary and secondary mechanisms are developed to prevent initial or repeated of crimes by minors. The community services of mediation, probation, and community work are used as alternatives to detention. They are used in cases of less serious crimes, when the detention can be avoided.

The access of individuals and groups at risk to the system of state social guarantees is the key element in measuring the nondiscriminatory treatment and equal opportunities for all members of the society to receive Government aid to diminish the risk of poverty. The system of services has an important role in the social protection system, as it comes to complement, and sometime even to replace the system of cash benefits, contributing significantly to a more effective inclusion.

Social protection in the Republic of Moldova is in transition from the system of placing people with special needs in residential institutions to community-based social services. The establishment of services at the community level involves high costs, and the existence of a dual system does not encourage their development. The early stage of the deinstitutionalization process involves maintaining a dual system: the establishment of alternative services at the community level while maintaining the existing system until the full reintegration into the new system. In Moldova there are over 179,000 disabled people (49 % women) of which 15,000 are children. About 59 % of people with disabilities are living in rural areas, and about 65 % of people are between 40 and 59 years old (Annual Social Report, 2010).

In 2010, the Republic of Moldova ratified the UN Convention on the Rights of Persons with Disabilities, by Law no.166-XVIII. In this context, and to implement the reviewed European Social Charter, social inclusion of the persons with disabilities represents one of the priorities of the local and central public authorities and the civil society. To adjust the regulatory acts on social protection of persons with disabilities of the Republic of Moldova to the provisions of the Convention, Law no.169-XVIII (2010) approved the Strategy on Social Inclusion of Persons with Disabilities for 2010–2013, which defines the reform of the state policy in the field and contains the guidelines for the harmonization of the system of social protection of persons with disabilities to the EU standards and provisions of the Convention.

The Government has approved a series of concept papers relating to social services, including "Protected House" and "Community House." These services ensure placement in a dwelling of adults with mild mental disabilities with full legal capacity who have no home or need to improve their living conditions and who with periodic support, can have an independent life in the community. In 2010, the Ministry of Labor, Social Protection and Family jointly with the Ministry of Health, Family Doctors Centers and Sections/Divisions of Social Assistance and Family Protection conducted a study to establish the number of persons with disabilities who require care and permanent surveillance by another person. The results are used to develop policies and estimate the needed expenditures for the development of personal assistance social service. To ensure the right to social integration (in the following areas: social protection, employment, healthcare, educational, informational, accessibility to infrastructure, etc.) of persons with severe disabilities who require care and permanent surveillance by another person, MLSPF included in the draft law on the social inclusion of persons with disabilities,

which was submitted to the Government for consideration and approval, an article on the establishment and development of the "personal assistance" social service.

Despite the positive actions mentioned, the social inclusion, especially of children with disabilities, is difficult due to limited physical access to kindergartens, schools, universities, and other public institutions, which impedes the exercise of the right of such persons to education and participation in the social and cultural life of the society, which later has a negative impact on employment opportunities and social life. A national automated data system, including data disaggregated by gender, is currently under development.

In 2011, the Ministry of Labor, Social Protection and Family presented a road map for the formulation of a new methodology to determine disability in the Republic of Moldova. Developed with the support of the United Nations Development Program (UNDP), the road map will facilitate the launch of reforms to ensure social inclusion of people with disabilities in accordance with the provisions of the UN Convention on the Rights of Persons with Disabilities and its implementation by various central and local state institutions.

The development of the integrated social service system creates better opportunities for social inclusion of persons in difficulty, ensuring observance of their fundamental rights. In 2010, Law no. 123 on Social Services was adopted. This law establishes the general framework for the setup and operation of the integrated social service system, determining the duties and responsibilities of local and central public authorities, other legal entities, and individuals empowered to provide social services, as well as protection of the rights of beneficiaries of social services.

Currently, community-based social services are being established and developed as an alternative to the social residential services. They aim at maintaining individuals or families in need in an organizational framework in the proximity of the community with the main objective to prevent marginalization and social exclusion and to facilitate the reintegration of beneficiaries in the family environment and in the community. At the community level, there are a limited number of social services: home care, social aid canteens, financial support from the fund of social support of the population, and services of community centers.

The elderly are regarded as one of the main groups vulnerable to social exclusion due to the limitations in the personal autonomy (sensory and physic/locomotion difficulties) and in the ability to earn additional income. Thus, the elderly account for quite a large share, 24.8 % of the total population in continuous poverty, which is explained by the limited ability to obtain additional income and small pensions. Therefore, they are in position to ask for the support of children, relatives, and neighbors, enabling thus the social cohesion. However, it is more difficult to obtain a more consistent financial support for the resolution of emergencies.

Pensions are the main source of income of the elderly, meant to compensate the loss of income related to retirement, and at the same time, they show the payment capacity of the social insurance system. Pensions compensate for the previous income before the retirement only in the proportion of 26.3 %, representing about 55 % of the subsistence minimum for retirees. This leads to the conclusion that the elderly are facing serious problems in accumulation and redistribution of resources.

Over the past years, the legislation on pensions has undergone several changes. The first was made in 2010 when the Parliament decided that senior officials will receive a pension equal to 42 % of their salary, rather than 75 %, as it was before. Pension on insurance has increased for ministers from 2 to 4 years. In 2011, pensions were indexed by 7.8 %. The average pension per month for all ages is 900 lei (about 90 USD). Village workers earn an average of 570 lei (about 50 USD), while the remaining pensioners 641 lei (about 60 USD). Pension on insurance will increase gradually for 6 months each year, from 30 to 35 years for both women and men. Judges and prosecutors will be retiring as other public servants, with women at 57 years and men at 62. Military and police personnel will be retiring after 25 years and not after 20, as it was before. Thus, the Government has adjusted the pension system to the realities of social development and reduced the existing discrepancies. In accordance with Law no. 499-XIV (1999) on State Social Allowances for Some Categories of Citizens (as amended),

state social allowances are the amounts paid monthly from the state budget through the state social insurance budget to people that do not qualify for the right to receive a pension (the beneficiaries of social allowances are the most vulnerable people).

Conclusions

Family policy development, implementation, and assessment are complex processes, involving the coordination of multiple stakeholders, such as Governments, nongovernmental organizations, academia and other educational forums, families, and the society at large. The goal of this chapter was to discuss family policies in the Republic of Moldova, with a focus on policies targeting marriage, childrearing, and those supporting families at risk.

Family policymaking is a continuous process, with development, implementation, and assessment, being followed again by policy revisions and readjustment. Policy assessment is the mechanism though which, after development, family policies are evaluated for effectiveness and revised accordingly. The general recommendations for family policymaking include developing evidence-based family policies implementing systematic and explicit family policies and assessing their effectiveness by using multiple methods. Policy assessment provides an opportunity to know what is it working and what needs revisions and improvement. In a world that is confronted with economic challenges, knowing what is effective and what not is a necessity in preventing the misuse of valuable and limited resources. Like in any country, Moldovan families must be partners in all the stages of family policy development, implementation, and assessment in the Republic of Moldova. Developing policies and programs that support families fulfilling their functions contributes to healthy and functioning societies.

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Chapter 15 Family Policy in Russia: Folkways Versus Stateways Revisited

Zhanna Kravchenko and Irina Grigoryeva

Abstract Family policy in Russia has a long history of juggling with ideas of family autonomy and state intervention. During the Soviet period, the policies were aimed at stimulating fertility and female employment by providing institutional childcare and job protection. By the time the reforms broke through in the 1990s, the country was facing several consequences of the earlier policy design. Double burden of work and care carried by women was accompanied by virtual "crowding out" of men from the family domain. The dramatic turmoil in economic, political, and social life brought a new light on the issue of decreasing fertility and rocketing poverty. In this chapter, we focus on the interplay between several family policy sectors related to these challenges, present the current regulations, highlight their effects, and discuss possible directions for future policy realization.

Keywords Russia • Pronatalism • Neotraditionalism • Maternity capital • Dual-earner/female-carer model

Introduction: Family in the Context of Societal Change

In 1938, the journal *Social Forces* published an article by George M. Day entitled "The Family in Soviet Russia. A Study in Folkways versus State-ways." Twenty years after the October Revolution, the author made an attempt to reflect upon the change that was brought onto the family. The picture that was drawn in the article was meant to clarify the new meaning of such concepts as marriage and divorce, at some instances by comparing them to the American family. Day argued that public policy efforts were directed toward shaping the family into an entity that fits "its members to be worthy members of the socialist state" (Day, 1938, p. 556). In turn, the family, while challenged by the new forms of collectivity, socialization of domestic functions, and emancipation of women, was developing implicit forms of resistance at the level of everyday life, contributing to the "triumph" of the folkways.

Day's analysis was neither comprehensive nor systematic due to ideological differences and the lack of access to primary sources. It, nevertheless, was an attempt to grasp the trajectory of the processes occurring in Russia at the moment when some retrospective analysis became possible. Nearly

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20 years after the most recent radical wave of transformation shook the established social order in the early 1990s, we find ourselves at a similar point in time relative to the beginning of the changes. The aim of this chapter is to attempt to revisit the relationship between the family and the state in Russia and examine the current social contract between the state and the family focusing on the model of family life that is prescribed by means of public regulations.

During the Soviet period, the specific feature of the development of realization of family-related policies was their normative, ideological character. The content of public policies toward the family was reconsidered several times throughout the twentieth century, signifying ambiguous relationship between the two institutions and, often, a lack of coherent policy agenda. On the one hand, the state was always "interested" in family's contribution into social stability; on the other hand, the family was always feared as a source of potential opposition to the state's "political manipulation and ideological indoctrination" (Uspenskaya & Borodin, 2004).

At the revolutionary origins of the Soviet Russian state, the family modernization was closely linked to "solving" the problem of subordination of women in the domestic sphere and, to a lesser degree, with improving their position on the labor market. It was also problematized in terms of liberation from the traditional practices, e.g., religious ceremonies and norms. During the 1920s, women, however, were still assigned the role of a caregiver, which allows some sociologists claiming that *child-centered* family policies were in place (Golod & Kletsin, 1994). In the 1930s, these ideas were traded in favor of quite different policies that limited the freedom of private life by, for example, putting strict regulations on reproductive life and divorce, in order to increase birth rates and social control, which in turn would insure the industrial boom of the country on the verge of the World War II (Aivazova, 2001). This was the period when an immense ideological pressure that emphasized the priority of public life over private life and of work over family was put on Soviet citizens (Shlapentokh, 1991). As Lunacharskii, the first Soviet People's Commissar on Enlightenment, stated in 1927, a long-term partnership based on traditional division of family responsibilities and equal obligation to work was the only "necessary" family form.

With the beginning of the Thaw in the late 1950s, some freedoms were restored; however, a new ideological cliché of the "stable Soviet family" was formed, functioning as a mechanism of normative control of everyday family life (Iarskaia & Iarskaia-Smirnova, 2002). This propagandistic image of the embodiment of communist morals legitimized the double burden of paid and unpaid work for women and diminished opportunities for feminist protest within the official discourse during the following decades. In the late 1980s, the relationship between the state and the family was once again reformulated, with the "growing determination to make the family a major productive unit in the economy" (Shlapentokh, 1991, p. 270). The last period of the Soviet regime in the country was signified by a sound articulation of a neotraditional ideology in the public discourse, accompanied by reopened religious propaganda. This tendency continued during the 1990s–2000s, focusing the official policy discourse on "strengthening of the institute of family, revival and preservation of spiritual and moral traditions of family relations".

In this chapter, we examine in more detail the current framework of public welfare policies directed toward families in general and their specific categories in particular in order to understand the legacies of the past policy paradigms and the opportunities and challenges of the present. A brief overview of modern family forms and practices is presented in the next section, followed by a detailed description of the enacted regulations. We then discuss the ideological premises and implementation specificities of the policies and conclude with some suggestions for future policy formulation and realization.

¹ The President Decree No 1351, 09 October 2007 "On establishing the concept for the demographic policy in the Russian Federation for the period before 2025".

Family in Russia: Demographic and Sociological Aspects

Socioeconomic and political transformation was one of the significant factors that affected marital and reproductive behavior, intergenerational reciprocity and care, as well as morbidity, healthcare practices, and mortality in Russia. It has been found that, like in other post-Communist countries, Russian family patterns became less uniform and the overall structure of family got "thinner," demonstrating not only an increased freedom of choice in biography construction but also a generally higher individual control over one's live (Philipov, 2006; Sobotka, 2003). At the same time, demographers have noted that such processes as shrinking fertility, falling marriage rates, and increasing crude divorce rates were launched much earlier and only were exacerbated by the economic hardships in the 1990s (Avdeev & Moniier, 2000). Zakharov (2008) claims that the increasing frequency of cohabitation, growing age at marriage and the birth of the first child, and the increasing use of modern contraception constitute the patterns of family formation in Russia today. The process of ageing of the population is slower than in the West, in part due to high mortality and in part due to the slight increase in fertility registered since 2006 (Rosstat, 2011). The mean order of births has not changed over the late 1990s—early 2000s, and childlessness is still low.

Earlier research also revealed that some of the new socioeconomic hardships have in fact counteracted the effects of the second demographic transition. For instance, Kohler and Kohler (2002) found
that families that were affected by unemployment often had higher probability of having another
child. The increased shortage of housing and high real estate prices effectively slowed down the process of "nuclearization" of family pushing people to live together (Prokofieva, 2007). Today, extended
households are especially common for families of single parents, where support of relatives allows
parents combining work and care more effectively, as well as compensates for the absence of a second
income (Lokshin, Harris, & Popkin, 2000).

The economic restructuring had devastating effects for the living standard of the majority of families in Russia. Over the years, households were more likely to turn to informal networks of friends and relatives for assistance and cooperation, rather than to public authorities (Gladnikova, 2007), by intensifying downward and upward intergenerational transfers, financial and in kind. Such adaptive strategies as decreasing needs to adjust to shortage of resources were also commonly employed to cope with shrinking incomes (Lokshin & Yemtsov, 2004). More proactive strategies normally include increasing number of hours at work or searching for additional sources of income outside main employment (Muszynska, 2008; Nazarova, 2003). Stress resulting from the limited resources and extra workload causes tensions between family members.

Finally, one of the most striking consequences of the transformation of the Russian society is the deterioration of health condition of the population. Dramatically increased rates of mortality and morbidity are without a precedent in the modern history (Cockerham, 1997). Stress related to changes in financial and psychological conditions is found to be one of the important explanations for the health decline (Leon & Shkol'nikov, 1998). The abovementioned strategy of cutting spending on basic goods leads to malnutrition and worsening the consequences of already widely spread unhealthy lifestyle, accompanied by heavy smoking, high consumption of alcohol, and a little or no leisure-time exercise (Cockerham, 2000). Heavy drinking is considered one of the most influential factors behind the Russian morbidity and mortality crisis (Leon et al., 1997; Mckee & Chenet, 1995), especially after the state monopoly on producing and selling alcohol was abolished in 1992 and the quality of consumed spirit deteriorated rapidly (Stickley et al., 2007). The binge-drinking epidemic produces strains on family ties, feeding through into violence of family members (Carlson & Vågerö, 1998; Stickley, Kislitsyna, Timofeeva, & Vågerö, 2008).

Scholarly interpretations of these processes have varied. On the one hand, they were labeled as signs of irreversible crisis of family as a social institution, in its reproductive and economic functions, and as an important group for socialization (Antonov, 1999; Antonov & Borisov, 1990; Antonov &

Sorokin, 2000; Arkhangel'skii & Kuchmaeva, 1996; Borisov & Sinel'nikov, 1996; Matskovskii, 1995). On the other hand, the changes were problematized in terms of modernization of family and procreation behavior (Avdeev & Moniier, 2000; Golod, 1999, 2008; Varlamova, Noskova, & Sedova, 2006; Vishnevskii, 1992, 2006).

Family Policy: Regulatory Framework

The development of Russian family policy throughout the last two decades reflects the tendencies that were inherent in the overall development of welfare policies – from the socialist model, based on encompassing direct provisions via employment structures, to a model dominated by neoliberal ideas, with their emphasis on individual responsibility, reliance on social insurance mechanisms, informality in the welfare state organization, and residual assistance to those in need (Cook, 2007). As regards the earlier research on welfare state in the communist countries, the discussions focused on the issue of extensive paternalism and the absence of a social dialog between policymakers and the population (Deacon & Salazai, 1990). In the eyes of many scholars, the universal guarantees and benefits of the socialist regimes had little value as they occurred within a totalitarian state that had an undeveloped and inefficient economy. More recent studies have focused on the inherited lack of social representation and those vulnerabilities and/or strengths in the now open global economy that contributed to growing national wealth and expansion of social protection during the early 2000s (Cerami, 2009).

Another aspect that is often missing from the contemporary analysis is the fact that neoliberal rhetoric is rather disconnected from actual practice of policy realization. The transformation of the social insurance regulations during the last 10 years is the most illuminating example. In 2001, obligatory individual payments into national insurance funds were substituted by a unified social tax (единый социальный налог). As a result, the autonomy of these funds became restricted by the Ministry of Finance's distribution of incoming tax payments. Moreover, the state budget regularly covers the expenses of the funds, for instance, child allowances are officially financed by the Social Insurance Fund; however, in 2007 about five billion RUB were transferred from the national budget to cover the deficit of the fund (Proskurnina, 2006). Even more importantly, the focus on this payment as being an act of individual responsibility was diminished and an understanding of a difference between tax payments and insurance contributions has never really been made by the policymakers (Grigoryeva, 2010; Rimashevskaia, 2004; Roik, 2011). As a result, contrary to the liberal discourse, the policy preserved its redistributed paternalistic character which favors status privileges and discourages individual participation, disconnecting payments from the history of contributions. Furthermore, as Cerami (2009) pointed out, the sustainability of welfare state becomes dependent on sustainable flow of revenues from oil and gas exports into the Russian national budget.

Soviet family policy, framed within the paternalistic approach, was based on distinctive division between male and female social roles in public and private sphere, assigning women with work and family responsibilities while mobilizing men as "builders of communism" and delegating their family responsibilities to state institutions or other (female) family members (Ashwin, 2000). This approach created a specific context of rhetoric and politics that, on the one hand, instrumentalized lives of men and women and disciplined them through a system of economic incentives and disincentives (Rivkin-Fish, 2010) and, on the other hand, created and sustained structures of gender inequality and subordination. The dominance of state ideology in the sphere of gender relations permeated into the realm of parent–child relations, resulting in a relatively comprehensive system of early childhood education and care, job protection for employed mothers, and moderate income replacements during parental leave.

Once the policies of privatization and retrenchment challenged the welfare mechanisms of the command economy in the early 1990s, new elements of policy design and forms of implementation

were sought as a result of scarce finances and the break with socialist ideological priorities (Darmodekhin, 2001; Plotnikov, 2001). A decade of centralizing and streamlining administrative reforms combined with accumulation of financial resources allowed for carrying out several policy initiatives with a strong focus on stimulating families (specifically women) to perform their birthrate expectations. In the process of realization of these measures, Russian policymakers drew most of the attention to the renewal of family support as a key strategy for overcoming demographic and social problems and leveled down the issues of gendered power relations (Rotkirch, Temkina, & Zdravomyslova, 2007). Moreover, policies' symbolic representations were revealed to be "a vehicle for garnering state legitimacy while masking its role in sustaining gender inequality" (Rivkin-Fish, 2010, p. 715).

Marriage, Divorce, Parenthood, and Domestic Violence

The modernization of the Russian family practice created a new emphasis on conjugal relationships, somewhat overshadowing the childrearing task of the family (Golod, 2008). This trend is caused, in part, by the overbearing involvement of public care and education institutions during the Soviet times, which provided services from a very early age and often on a full-time basis. More importantly, it signified an explicit orientation toward success in non-domestic domain among women (Sizova, 2008) and a low value of care work in general.

The family law reform became an integral part of the overall revision of legislation after the collapse of the Soviet Union. The new Family Code was adopted in 1995 in an attempt to legitimize new socioeconomic relations, such as property rights, for instance, in existing marriages and after divorce, and revise the rules that were challenged by new condition (Khazova, 2009). While civil registration of marriage is still considered to be the only valid form of concluding marriage, religious forms of officiating are allowed and are to be regulated by the rules of the relevant religious denomination. Following the Soviet tradition, the divorce regulations are based on the no-fault concept and make the divorce procedure rather easy for consenting couples at the same time aiming to impose strict court control over child-related matters (Khazova, 2012). It is most common that the mother becomes coresiding custodian, while the father maintains the custody and may lose it in case of regular nonpayments of child support. Gurko (2008) argues that the procedures for maintaining a relationship between a non-co-resident parent and a child are not clearly defined, apart from financial obligations.

The amount and procedures for establishment of alimonies is interpreted as a form of child support rather than providing income for former spouse and is also defined in the Family Code 1995. The payment is managed by the employer of the payer; it is based on the net income and deducted on a monthly basis in the amount of 25 % for one child, 33 % for two, and 50 % for three and more children. Rzhanitsyna (2010), for instance, reveals that only 2.7 % of all payments are established by written agreement between former partners, almost 30 % of divorced women have an informal agreement about the amount, 15 % accept any payment their husband "can give" at a certain moment, and in 21 % of cases alimony is established by court. Because court decisions are based on officially declared (and taxable) incomes, and the latter are regularly falsified, the alimonies are not paid in the amount they should be or are not paid at all (Festi & Prokof'eva, 1997).

Buckley (2010) noted that complex processes of redefining society and policy after the fall of Soviet Union awoke discussions on topics around which silence hitherto prevailed. Intimate partner violence against women is one of such neglected issues, although the reported levels of violence are high. As many as 12,000–15,000 of women are reported to be killed by their intimate partners annually (Chernova, 2011), while 15–26 % of women indicated that they had some form of violence in their intimate relationships (cf. Bodrova, 2000; Vannoy et al., 1999). Despite active public discussions initiated by women rights' activists and parliamentarians already in the early 1990s (see Johnson, 2007 for more details), there is no specific law on violence in the family. It is possible to penalize

someone for certain acts of violence occurring in intimate relationships under Part VII of the Criminal Code. Article 117 (torture, causing of physical and mental suffering by means of systematic infliction of beating or other forcible actions) considers as aggravating circumstance if the victim is in some way dependent on the offender (Amnesty International, 2005); however, there is no specific definition of domestic violence or violence against women in the family, and generally no note is taken in the code of the relationship between the victim and the perpetrator. According to Amnesty International's research, gender neutral character of the Russian Criminal Code does not ensure gender equality in realization of rights and duties.

With the policy environment being generally inhospitable to addressing issues of gendered violence, civil society organizations played the main role in providing services for victims of domestic violence, managing information campaigns and instigating political debates. During the height of the nongovernmental movement in 2004–2005, approximately 150 organizations were registered as crisis centers largely financed by foreign donor organizations (Johnson, 2009). However, the introduction of strict regulation of civil society organizations in 2006² led to decrease in their numbers and organizational capacities (Johnson & Saarinen, 2011).

Work and Family Reconciliation

The public policy aimed at providing a framework for work/family reconciliation includes measures of job protection for parents (both women and men), replacements of incomes, and early childhood education and care provision. Leave from work is formally extended to mothers, fathers, and other relatives involved in home-based care provision. Maternity leave covers 70 calendar days before and 70 calendar days after the childbirth with 100 % of earned income during preceding 24 months up to a ceiling of RUB36,563 (USD1,142).³ The payment is funded by the employer and/or the Social Insurance Fund⁴; however, it may also be provided to unemployed mothers through contributions from the federal budget and the Mandatory Social Insurance Fund in the amount equivalent to minimum wage of RUB4,611 (USD144.03) for women employed for less than 6 consecutive months, RUB465.30 (USD14.53) for those who are unemployed. There is no flexibility in use of the leave, but it can be extended by 15 more days before and 15 days after the birth in case of multiple births.

While there is no statutory paternity leave, any parent is considered eligible for the parental leave, following the maternity leave. Until the child is 18 months⁵ old, the income replacement is provided at the rate of 40 %, with a ceiling of RUB14,625 (USD456.83) per month and a minimum of RUB2,326 (USD72.66). During the following 18 months, the right to return to work is preserved, but the earnings-related payment is no longer available. In addition, any caregiver, regardless of the attachment to the labor market, including students and unemployed can receive financial support.⁶ Unemployed women are provided only if they became unemployed because their employer closed

² Federal Law No. 18-FZ "On introducing amendments into several legislative acts of the Russian Federation," January 10, 2006.

³ Federal Law No. 343-FZ "On amendments to the law 'On mandatory social insurance in case of temporary disability and motherhood," December 08, 2010. Here and below, all amounts are provided for 2012. The currency exchange rate from the Central Bank of the Russian Federation is used for calculating equivalent sums: USD1=RUB32.0142 (08 September 2012).

⁴The SIF is financed largely by employers' contributions.

⁵ Unemployed parents have the right to choose between unemployment or Parental leave benefit; the former is for a shorter period but may be at a higher rate depending on various conditions.

⁶Federal Law No. 81-FZ "On state allowances to citizens with children," May 19, 1995 (last amended on March 07, 2011).

down during 12 months prior to them registering as unemployed. The payments are not taxable and the leave cannot be extended beyond the 36 months, and a part-time job can be combined with the parental leave.

As the legislation on leave provisions allows for additional payments from regional and local authorities, there is a substantial variation between 83 (earlier 89) regions, however, within the limitations established by the minimum and maximum amounts. The conditions for payments may include the order of births increasing the amount with each subsequent child, target special groups of population, and/or make these payments means-tested. For instance, in 2011 St. Petersburg city administration provided additional payments to all parents at the birth of their first child in the amount of RUB2,116 (USD66.10) and their second child and subsequent children, RUB2,730 (USD85.27), during the first 18 months. The amounts are increased for families of single mothers, families with children with disabilities, and parents in the military service: RUB2,389 (USD74.62) and RUB2,730 (USD85.27), respectively. In Moscow, on the other hand, the city administration introduced additional payments for parents of children in the age between 18 and 36 months: RUB1,600 (USD49.99) to all families, RUB2,400 (USD74.97) to parents in the military service, and RUB3,200 (USD100) to single mothers/fathers. There is no official statistics about regional variations in practice.

Other employment-related measures include a lump-sum payment in the amount of RUB465.20 (USD14.53) to mothers who registered themselves at the local healthcare center at the early stage of pregnancy (earlier than 20 weeks) and a lump-sum payment in the amount of RUB12,405 (USD387,48) related to childbirth which may increase by regional governments. Moreover, there are regulations providing opportunities for flexible work for employees with children. A paid leave is available for caring for a sick child under the age of 15 years, its length however varies depending on previous employment record and the age of the child. For a child under the age of 7 years, up to 60 days sick leave may be taken per year, with 45 days for older children. Payment is made at 60 % of average earnings with a uninterrupted employment record for less than 5 years, 80 % with an employment record of 5–8 years, and 100 % with an employment record over 8 years. Employees with two and more children under the age of 14, parents of disabled children under the age of 18, and single parents with children younger than 14 may establish a collective agreement with the employer and receive annual unpaid leave of up to 14 days. These regulations are established in the Labor Code and costs are carried by employers.

Childcare service organization was an integrated part of the old Soviet system of education, with its own national curriculum, aiming at universal coverage. One of the major shifts that occurred in this sphere is related to the transfer of the responsibility for all public childcare to the jurisdiction of local authorities where its costs are covered by local budgets and by parental contributions. Today, early childhood education and care is formally established to provide for children in the age between 2 months and 7 years.⁷

The law guarantees accessibility of early childhood education provided for free by state and municipal facilities in accordance with state educational standards. However, according to national statistics, in 2006, on average 57.6 % of all children were enrolled in preschool education, with the highest enrolment rate in the Northwestern Federal District, 72.6 %, and the lowest rate of 40.4 % in the Southern Federal District. The shortage of childcare facilities was inherited from the Soviet times (Teplova, 2007) and has gradually intensified, especially in the recent years with the slight increase in fertility. However, the main policy respond so far was not an increase in the number of institutions but the decrease of the sanitary norms for childcare institutions to 2 sq. m per person.⁸

⁷ Federal law No. 3266-1 "On education," 10.07.1992, art.5; Decree of the Government of the Russian Federation No. 666 "On establishing standard regulations for a preschool educational facility," September 24, 2008.

⁸ Edict of the Chief Sanitary Inspector No. 91, July 22, 2010.

The majority of services are provided on the full time and reduced basis (12 and 8 h per day, respectively), with only 11.9 %, on short-time basis (3–5 h), and 3.5 %, on the 24-h basis (Statistika rossiiskogo obrazovaniia, 2012). Regulations were enacted to ensure that parents' share in financing childcare facilities should not exceed 20 % of all costs. In 2006, means-tested compensations from the local budgets were introduced for poor families: 20 % of childcare fee is paid for one child, 50 % and 70 % for two and three children, respectively.

Financial Transfers

Child allowances are available to parents of children from the age of 1.5 years, are means-tested, and are managed by regional governments. For instance, in St. Petersburg in 2012, the size of the allowance is RUB651.61 (USD20.35); it is increased to RUB940.46 (USD29.38) for single parents. A divorced parent caring for the child is entitled if it is proven that the other parent is not paying alimony. In the latter case, the amount is 50 % higher than the originally established allowance. Children with disabilities are acknowledged as pensioners and provided for within a specific legal and institutional framework. The procedures for establishing the invalidity are carried out by medical institutions and payments are managed by the Pension Fund. Parents of handicapped children receive all the other benefits directed to the children. In addition, the person caring for a handicapped child (until 18 years old) is entitled to compensation in the amount of 60 % of the minimum wage. Since 2005 families with handicapped children are entitled to monetary compensation for the cost of public transport, medication, and healthcare services. In

One of the most significant policy initiatives realized as a part of demographic policies and aimed at providing additional financial assistance as means of promoting fertility is the introduction of "maternity" (family) capital in 2007. With the birth of a second and higher order children, mothers (families) become entitled to a payment in the amount of RUB250,000 (USD7,809), which is adjusted to inflation annually and in 2012 is established at RUB387,640 (USD12,108). Regional governments are encouraged to introduce additional payments. The payment can be used when the child is 3 years old, and as a result the first payments were provided in 2010. The payment does not cover the everyday costs related to raising children but can be used in three specific ways: (1) to improve family's housing conditions, i.e., paying directly for construction, reconstruction, or a part of bank loan for purchasing accommodation under the condition that children's property right will be established; (2) to pay for child/children's education (preschool, school, higher education); (3) and to contribute to mother's retirement insurance. In essence, the latter is aimed to compensate for mother's career break as all social security payments are not taxable and therefore are not accounted in calculation of pension.

The payment is managed by the Pension Fund, which has reported that since 2007 3.4 million families have registered their right to receive the payment. It remains to study whether this policy measure will in fact increase fertility or simply affect the timing of births that would have occurred even without the maternity capital. It is also yet to be seen whether the provisions will benefit families with children from various income and occupation groups, or whether it will affect mainly those

⁹ Decree of the Government of the Russian Federation No. 846 "On regulations for provision of financial support from the federal budget to budgets of the subjects of the Federation for paying compensations to parents for costs of daycare services at state and municipal educational institutions," December 30, 2006.

¹⁰ Federal Law No. 81-FZ "On state allowances to citizens with children," May 19, 1995 (last amended on March 07, 2011).

¹¹ Federal Law No. 166-FZ "On state pension provisions" (last amended on December 21, 2006), Federal Law No. 181-FZ "On social protection on the disabled in the Russian Federation," November 24, 1995, Edict of the President No. 551, March 17, 1994 (last amended on April 27, 2000).

women who are not economically active and do not intent to combine paid work with childcare. Since 2010, among 257,000 families have already determined the way they will use the payment: ca 92 % of them have chosen to pay housing loans; 7.8 %, child/children's education; and 0.3 %, mother's retirement insurance (The Pension Fund, Online). It is important to note that the desired further increase in fertility needs to be accompanied by coordinated policies in work and care reconciliation, especially availability of childcare facilities on a public or private basis, which, as noted above, already today are in shortage. Despite strict use, regulations reports of fraud have already appeared (Rossiiskaia gazeta, 2009).

Fighting Poverty and Social Exclusion

The neoliberal character of social reforms in Russia determined a significant importance of meanstested mechanisms in social policy provisions for families/individuals at risk. Some forms of targeted provisions are integrated into general regulations (for instance, in the form of increased amount of a regular payment) and are also based on the special status of an individual (e.g., single parent, war veteran, disabled) rather than proven need. The category of "poor" is defined based on estimations of the state set subsistence minimum (SM), which in turn is tied to the consumer basket that includes a list of basic products, services, and payments needed to ensure individual's "health and livelihood". 12 The SM is established at the regional level for different groups of population, such as able-bodied adults, children, and pensioners. It is used for justifying the size of the minimum wage and some social transfers (such as the payment to unemployed mothers during maternity leave), as well as an instrument of means testing (e.g., eligibility to the abovementioned monthly child allowance is established based on the size of the net household income in relation to the minimum wage). Although regularly adjusted to inflation, the SM is considered to be a poor measure of well-being and an inefficient way to link social transfers to the needs of the population (Round & Kosterina, 2005). For instance, Russian State Statistics Office calculated that the size of the SM in 2012 for an average working adult was RUB6,307 (USD197).¹³ The federal government, however, established the size of the minimum wage significantly below this level at RUB4,611 (USD144.03).¹⁴

An important element of public assistance to the poor is privileges, payment reductions (usually by 50 %), and payment wavier for public services, e.g., transport, amenities, healthcare, and housing. In 2005 a hugely unpopular federal reform was launched designed to substitute these nonmonetary forms of assistance by direct financial compensations. It was considered a breach of principle of intergenerational social solidarity, as one of the main recipient groups of the privileges is pensioners, and regional governments continue running their own programs of targeted support for this group of population. Although the standard of living of pensioners is largely dependent on their type of household (Maleva, 1998), their access to public support depends on their individual characteristics, such as previous and/or ongoing work record and health/disability status, and not the size of the net household income. Thus state policies aiming at increasing the purchasing powers of individual pensions are often consumed at the household level.

¹² Federal Law No. 134-FZ "On subsistence minimum in the Russian Federation" October 24, 1997, Federal Law No. 44-FZ "On accounting incomes and estimating the mean per capita income of a family and single individual as a condition for recognizing them as poor and providing state social assistance," April 05, 2003.

¹³ Federal State Statistics Office "The size of subsistence minimum during the first quarter of 2012 as of July 2012," available online at [http://www.gks.ru/gis/tables/UROV-6.htm], accessed August 02, 2012.

¹⁴ Federal Law No. 82-FZ "On minimum size of the wage," June 02, 2000 (last amended on June 01, 2011).

The organizational structure for realization of policies against poverty and exclusion is provided by various agencies, one of the most common types is (Complex) Centers for Social Services, first established in 1995. These centers are usually run by local authorities providing assistance to people who "find themselves in a difficult life situation." As a result of the broad definition of the target group, the range of provisions includes distributing basic necessities (food and clothes); legal, psychological, and pedagogical assistance; physical rehabilitation; temporary shelter; and home-based care. While there is a variation in activities established in each particular center, the unification of aims and means of policy realization through federal legislation process and rather strict administrative hierarchy has led to disregard for regional and local specificities (Kincharova, 2008). Nongovernmental organizations are also present in the field, and in fact governmental agencies sometimes represent themselves as NGOs, drawing upon volunteers and soliciting additional financing (Chernova, 2012). The organizational capacities of NGOs are however limited and, as noted above, strictly regulated by the federal legislation.

Family Policy Model: Ideology and Implementation

We started this chapter with outlining some of the trends in transformation of the Russian family that can be attributed to the socioeconomic and political changes as well as global demographic processes. The traditional life-cycle model of a commitment to a lifelong marriage followed by having children has given way to more complex family and biography patterns. The ideological and political response to this process was somewhat disjointed. The commentators have noted that over the years the rhetoric of policy formulations has been neotraditional with its pronatalist focus and strongly neoliberal with its emphasis on targeted measures and monetarization of provisions. At the same time, a number of policy measures were inherited from the Soviet times (especially those supporting women's employment) without any significant reevaluation, and new paternalistic measures were introduced. In this concluding section, we examine various ideological and practical aspects of family policy realization and means to assess their efficiency with regard to established goals.

The initial liberalization of the official post-Soviet discourse removed the obligation of citizens to work and set the family autonomy from the state as one of the cornerstones of public policies. The idea of stimulating economic independence of family by means of increasing gender pay gap, and thus prompting women to leave the labor force, by supporting family business and by legalizing child labor within family enterprises was even expressed by scholars (Antonov & Borisov, 1990). The ideal of an autonomous self-sufficient family, protected from the destructive influence of state paternalism or feminist liberalism, aimed not only at counteracting the decades of the Soviet ideological, social, and economic development but at disregarding the contemporary context of the family transformation as well.

A parallel normative approach to formulating family policies was focusing on creating conditions that would ensure the freedom of choice for all family types, effectively reducing the influence of such factors as the number of children, the form of cohabitation, the age of marriage and parenting, as well as other factors that might create risks for the well-being of the family (Lovtsova, 2003). The policy-makers considered such an encompassing approach at a series of seminars and round tables (for details see Klimantova, 2002; Sovet Federatsii Federal'nogo Sobraniia, 2000), once again discussing the ideal of "a *healthy*, *wealthy*, and *law-abiding* family" (Klimantova, 2002, p. 13, our emphasis). However, by the mid-2000s, a selective strategy was formulated, no longer directed primarily toward an abstract family in need of support, but the family that promises the biggest demographic "return," the young family (Chernova, 2011).

¹⁵ Federal Law No. 195-FZ "On the foundations for social service provision in the Russian Federation," December 10, 1995 (last amended on August 22, 2004).

The discrepancies in the ideological approaches were accompanied by contradictions in the policy realization. The process of policy implementation is built on the premise that while the general framework is set at the national level, the policy realization is carried out at the regional and local levels, which is expected to make the means and targets more sensitive to geographical variation. The differences in the levels of transfers and services are not necessarily related to the differences in demands for provisions but rather to variation in available resources. Thus, the wealthiest regions, e.g., Moscow and St. Petersburg, introduce additional payments creating spatial discrepancies on the vast territory of the country.

Moreover, the requirement that target groups have local residency registration is central to those forms of provision that are not earnings-related, and therefore do not depend on employer's contributions but are financed directly from regional and local budgets. These include, for instance, the child allowance, the in-kind provisions at birth of children, and the compensation for costs related to education. Although income replacements related to leave from work (sick leave, parental leave) are available to all employed parents regardless of their residency status, the condition of residence registration for other benefits creates disadvantages for those migrating for work and not for permanent residency. It can be considered a tool for reducing geographic mobility within the country from the poorer to the wealthier regions. The requirement of the Russian citizenship is applied only in the case of maternity capital. As the most pronatalist (and thus nationalistic) form of provision, it is also granted to families (women) who reside abroad as long as they remain Russian citizens and acquire the citizenship for their children.

The pronatalist concern, expressed by the increased financial support to families with young children, overshadows the long-term effects of having children and combining work and care, especially for women whose life expectancy is higher than that of men. The ways the target group makes use of these resources depend too on structural opportunities in the regions, e.g., conditions for housing loans, real estate prices, availability of public childcare, and the overall bureaucratic process. State's involvement in compensating for general decrease in living standards associated with childbirth and care throughout two decades of economic turmoil were limited to means-tested transfers and in-kind provisions. Considering that families with children run a high risk of being materially deprived, especially those with many children, these measures may be beneficial to a large share of the population. Menchini and Redmond (2009) reported that nearly 40 % of household with three and more children, regardless of the number of adults, were experiencing poverty. Public financial transfers, however, alleviate the burden of deprivation for 4 % of the recipients (Kravchenko, 2009, p. 111, data provided for 2000).

Early preschool education and childcare system became an inherent part of parenting practices for several generations of Russian families. The Soviet policies failed to create an infrastructure that would satisfy the demand of all families (Pascall & Manning, 2000; Rabzhaeva, 2004; Teplova, 2007). Along with the shortage of places in public childcare, contemporary policies inherited rigid labor market regulations; as a result, there is practically no public policy solution to provide for dual-earner households who cannot enroll their children into a kindergarten. Gradual commercialization of care became one of the ways to make private arrangements for work and care reconciliation (Zdravomyslova, 2008). And kin support is the private solution in families who cannot purchase care services – by providing care directly (and not necessarily on reciprocal basis) or by contributing to household's income and allowing the main caregiver (a women) choosing care instead of getting (extra) work (see, e.g., Utrata, 2008). Men's involvement in care remains limited and highly selective (Kravchenko, 2012).

Situations when neither public nor private care is available result in child neglect, an increasing problem found among families, where parents have no economic resources and/or time due to heavy work load and/or no understanding of their parental responsibilities and rights (Grigoryeva, 2008). A dramatic increase in court termination of parental rights that took place in the mid-1990s and the rise of the public discourse of the "unfortunate family" signified not only restricted structural opportunities for parenting but also the strong stigmatization and criminalization of poverty and difficult life situations (Iarskaia-Smirnova & Romanov, 2012).

Conclusions

Public policies usually operate within some simplified version of family life as regards work and care division, conjugal and intergenerational relations, net incomes, and patterns of consumption. The Russian family policy is constructed to accommodate for needs of a particular type of family: two officially married adults with at least one child, still in the childbearing age, residentially autonomous from extended family members, full-time employed with access to social insurance that covers any potential breaks in paid work arising from certain family-related situations, and have access to public/private childcare facilities that work during the parent's working hours. As any kind of policy will assume a very general idea about its object and targets of intervention/support, reality does not always correspond with these expectations.

Our analysis reveals several challenges and prospects to the realization of family policies. First, there is a clear discontinuity between changing ideological premises expressed in goals and targets, on the one hand, and the structural outcomes, on the other. An understanding of the path dependency in the process of formulation and organization of policy practice is required, with a clear distinction between the measures that stimulate individual's responsibility for their well-being and those that disempower, those means that make work and care combination possible, and those that instigate a necessity to choose between breadwinning and care giving.

Second, the focus on increasing fertility offsets the objective of supporting adequate living standards in terms of healthcare, education, and incomes. Notwithstanding the need to further development of social insurance mechanisms and public care infrastructure, the protection of employment rights of working parents can be more effective under more flexible labor market regulations. Moreover, the modernization of the policies should begin with a new focus on gender equality in the domestic sphere, bringing men "back to the family" and changing the attitude toward care as an occupation and home-based activity. There is an acute need for development of legislation, legal practice, and awareness about domestic violence (between partners, against children and other family members).

Finally, creating a nondiscriminatory environment for all family forms should become one of the priorities of the advanced family policy. The formulation of selective measures aims at ensuring additional support for families in need. The bureaucratic process and the shortage of public resources make some of the benefits and services unattainable and result in stigmatization. The diversity of family forms, however, is not determined simply by the household size and composition. Homosexuality receives a very negative connotation in the Russian public discourse and policy approach, with homosexual relationships being excluded from the definition of family (cf. Nartova, 2004; Solodnikov, 2004). The current policy climate is hostile toward "unconventional" sexual practices and is completely lacking a focus on reproductive health. Recently, increased role of the Russian Orthodox Church in the public sphere and laws enacted against "propaganda of homosexualism" are likely to lead to more discrimination against this group, effectively equalizing the LGBT with pedophilia, although not leading to criminal punishment. They also create challenges for education on contraception and safe sexual practice, as such affecting the whole population of the country.

Congruence and innovation, gender equality, and diversity can become new key objectives for family policy realization in Russia.

¹⁶ See, for instance, the law "On introducing amendments to the law of St. Petersburg 'On administrative offences," enacted in St. Petersburg, March 07, 2012. Similar initiatives are discussed by the national parliament despite local and international protests.

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Chapter 16 For Whose Sake Is It Anyway? Evaluation of Explicit Family Policies in Turkey

Aslı Çarkoğlu and Nilüfer Kafescioğlu

Abstract Family policies impact the life of every citizen in a society at a very private level. Their content as well as the processes through which they are formed and altered documents the powers that shape the lives of families at the macrolevel. In this chapter, we aim to document the current state as well as the change processes of the family policies in Turkey, a country of socioeconomic variety and rapid change. Here, we will give precedence to the aspects of family policy that are explicitly linked to the formation and daily life of families, such as the Civil Code, the Labor and Social Security Laws, as well as the laws and regulations concerning family violence. However, we will be leaving out many other rules and regulations that impact families more implicitly, through the conditions they present to individual members of families, such as the Penal Code and its regulations.

Keywords Family policy • Turkey • Families

Sociohistoric, Economic, and Political Context of Families and the Policy-Making Process in Turkey

Family life in Turkey has been influenced by a myriad of sociohistoric, economic, and political changes throughout its history. The ongoing modernization process since the mid-nineteenth century, economic transformations, rapid urbanization, rural to urban migration, increased levels of education, and demographic shifts are among the significant changes that had an impact on families in present-day Turkey. As geographically located between the East and the West, Turkey has hosted many cultures in its history. Before the establishment of the Turkish Republic in 1923, the Ottoman Empire, as an Islamic empire, has ruled the country for almost 600 years. Following the First World War and Turkey's War of Independence, the new Turkish Republic was established as a secular state with a parliamentary government. Establishment of the new Republic brought along radical social and economic changes that will be discussed in this chapter, alongside the more recent socioeconomic changes in the country that had an impact on families and the policy-making process.

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Demographic Shifts and Policies

Following WW1 and Turkey's War of Independence, the population policies in Turkey from 1923 until 1965 targeted population growth (Dogan, 2011). In the first national census in 1927, Turkey's population was 13.6 million, and it has continuously increased until the 1960s (Hacettepe University Institute of Population Studies, 2009). In 1965, the pronatalist population policy changed with the law on family planning and an ante-natalist policy took over due to increasing rates of unemployment and rapid urbanization. Family planning policies targeted prevention and education via dissemination of modern contraceptives, the use of family planning services, and the provision of health education (Dogan, 2011). Further, abortion was decriminalized in 1963 for a range of medical issues, and with the Population Planning Law of 1983, abortion within 10 weeks of pregnancy was legalized (Metz, 1995).

As of 2011, Turkey's population is approximately 74.7 million (Turkish Statistical Institute (Turkstat), 2012a). Since the 1990s the population growth rate has been decreasing even though it is still considered high for European standards (UNICEF, 2012). The current population growth rate is 1.3 %, the crude birth rate is 17 per thousand, and the total fertility rate is 2.1 per woman in Turkey (Turkstat, 2012b). Fertility has decreased with increasing education levels. The urban–rural difference in fertility rates has also been decreasing.

Due to improvements in general health services, the infant mortality rates have declined in Turkey, from approximately 200 per thousand in the 1950s to the latest rate of 12.2 per thousand (Hacettepe University Institute of Population Studies, 2009; Turkstat, 2012a). Life expectancy at birth has also increased to 74.6 years (Turkstat). While the growth rates of young people in Turkey have decreased, there is an increased growth rate for the old-age group in Turkey (Hacettepe University Institute of Population Studies, 2009). However, Turkey still has a young population compared to the EU countries (Turkstat, 2012b). Proportion of population aged 0–14 years is 25.6 %, 15–24 years is 17 %, and 65 and older is 7.2 % (Eurostat, 2012). These numbers signify the need of more comprehensive youth policies as well as policies for the elderly support and care in Turkey.

Rapid urbanization has played a role in the transformation of the Turkish society (Sunar & Fisek, 2005). Today, approximately 70 % of the population lives in urban settings (World Factbook, 2012) compared to 25 % in the 1960s (Cindoglu, Cemrek, Toktas, & Zencirci, 2008). Rapid urbanization has started in the 1950s due to changes in the agricultural sector (i.e., low income and productivity, mechanization). Turkey's economy has moved from an agricultural one to an industry-based economy. In the 1930s industrialization was led by state enterprises and after the Second World War by the private sector, and finally after the 1980s new industrial centers rose across the country (Pamuk, 2008). Thus, in the 1980s increased industrialization and the development of the service sector have supported rural to urban migration (Gumus & Korhasan, 2009). Since a large proportion of urban residents were born in villages, it is possible to see the influence of the more traditional, patriarchal, and rural values in families as well as the influence of the modern Western values, especially in the large urban cities (Ataca, Kagitcibasi, & Diri, 2005).

Family Characteristics

Families are diverse in Turkey as they are influenced by diversity of cultures, geographic locations, and rapid socioeconomic changes described above. Taking this diverse context into account, research has identified some similarities and differences among families in Turkey and changes and continuity of certain family characteristics over time.

Interdependence in Intergenerational Family Relations

Overall, Turkish families are embedded in a collectivistic culture which is reflected in interdependent and close family relations (Sunar & Fisek, 2005). Extended family households have been a cultural ideal especially in the rural settings in Turkey, but data indicate that extended families were not dominant at any time in the history of Turkey (Nauck & Klaus, 2005). It is more appropriate to describe Turkish culture as a "culture of relatedness" (Kagitcibasi, 2007). For example, even though most households are composed of nuclear families (80.7 %) and a smaller proportion of households are composed of extended families (13 %; Tuncer, 2009), relatives tend to live close to each other in order to continue interactions and provide social and emotional support for one another. This "functionally extended" (Kagitcibasi, 1982, 2007) family arrangement enables family members and their kin to preserve their interdependence.

Furthermore, studies have shown that modernization and urbanization did not lead to a family pattern of separation and independence in family relations in Turkey. These social changes have led to a model of psychological/emotional interdependence instead (Kagitcibasi, 1996). Kagitcibasi (2007) describes this family model in which interdependence among family members is nonmaterial, there is continuity of emphasis on closely knit family relations, but there is also room for autonomy. In a three-decade longitudinal study, Kagitcibasi and Ataca (2005) found that while children's economic/utilitarian value (i.e., contribution to household economy, household chores, old-age security) has decreased, their psychological value (i.e., joy, companionship, pride) has increased in Turkey. Comparison of the value of children among different socioeconomic (SES) groups has shown that while all groups rated the psychological value of children highly, there were differences among the groups in economic value of children. The economic value of children was found most important by rural mothers, followed by urban low SES group and least by urban high SES group. Accompanying the increased psychological value of children and lower financial expectations from the offspring, there was a decrease in son preference. Decline in son preference (except for the rural older mothers) signifies the changes in traditional and patriarchal family patterns in Turkey (Kagitcibasi & Ataca).

Child-Rearing Practices

The transition from total interdependence to psychological/emotional interdependence in the intergenerational family relationships described above has implications for child-rearing practices. Overall rural—urban setting, education levels, and SES of parents are associated with differences in parenting practices. Mothers from different SES groups varied especially in their desire for obedience and independence/self-reliance in their children. Mothers living in rural settings and low SES mothers in urban settings alike expressed wanting obedience more strongly and independence/self-reliance less strongly compared to high SES mothers in urban settings (Kagitcibasi & Ataca, 2005). However, in urbanized lifestyles, parents allowed for autonomy in their child-rearing practices yet maintained the close-knit ties and parental control due to continued emphasis on the culture of relatedness (Kagitcibasi, Ataca, & Diri, 2010).

Differences between the parenting patterns of mothers living in rural versus urban settings have been shown in other studies as well. For example, in a recent study with 162 mothers living in a large metropolis in Turkey (Istanbul) and 73 mothers living in smaller rural cities, mothers in rural cities reported more obedience-demanding and punitive behaviors (Nacak, Yagmurlu, Durgel, & van de Vijver, 2011). Obedience-demanding and punitive behaviors were reported less by mothers living in the metropolis with higher levels of education compared to mothers living in the metropolis with lower levels of education.

Aside from these differences in child-rearing practices that change across SES groups and education levels, commonalities have been identified as well. For example, studies have shown maternal

warmth and affection as prevailing characteristics of all Turkish families, regardless of the family structure or the educational levels and SES of the parents (Kağıtçıbaşı, 2007; Nacak et al., 2011). Maternal warmth is seen in mothers' frequent verbal or physical expressions of affection toward their children (Sunar & Fisek, 2005). In a study with three generations of urban middle-class families, the emotional closeness especially between the mother-child pairs was reported by all three generations (Sunar, 2002).

Marriage

Marriage is almost universal in Turkey reflected in the low proportion of unmarried individuals (Hacettepe University Institute of Population Studies, 2009). Approximately 84.4 % of women and 71.8 % of men are married before the age of 30. The average age at marriage is 28.5 for men 24.5 for women (Turkstat, 2010). The divorce rate has been rising in the last decade but it is considered still relatively low (Hacettepe University Institute of Population Studies, 2009). The crude divorce rate is 1.62 and 39.9 % of all divorces take place in the first 5 years of marriage (Turkstat, 2010).

Two types of marriages have been described to coexist in Turkey: descent and affinal (Ataca et al., 2005; Nauck & Klaus, 2005). Descent marriages, found mostly in the rural and less educated urban populations, include arranged marriages and marriages among relatives. There is a strong emphasis on the relations with the families of origin in these marriages. Affinal marriages, found mostly among the more educated urban population, include free partner selection. There is a strong emphasis on the conjugal relationship in these marriages (Nauck & Klaus, 2005). Hortaçsu (2007) compared the family-initiated and couple-initiated marriages in a study with 430 married couples over the family life cycle. Spouses in couple-initiated marriages reported more emotional engagement with their spouse and more emotional distance from their family of origin compared to family-initiated marriages. Furthermore, couple-initiated marriages were more egalitarian and there were fewer conflicts. However, over the family life cycle, some aspects of couple- and family-initiated marriages became similar. While the number of conflicts has declined in family-initiated marriages, in couple-initiated marriage, the division of labor became less egalitarian. One similarity found in both types of marriages was the wife's dominant role in the decisions concerning the family and the children.

Review of Family Policies Targeting Different Family Functions

Family Policies Targeting Marriage

After the establishment of the Turkish Republic in 1923, revolutionary changes took place in the area of family law which is regulated by the Civil Code in Turkey. The first Civil Code came into effect in 1926. The Civil Code brought changes into the family life in Turkey that paralleled the move from monarchy to democratic republic and from Islamic law to secularism (Yıldırım, 2005). With the 1926 Civil Code, the Islamic code of polygamy was abolished, and women gained equal rights to divorce as well as inheritance and child custody. Previously husbands had absolute right to divorce, while women were given the right to divorce in 1915 only on the grounds of desertion or husband's contagious disease (Yıldırım, 2005).

Despite these revolutionary changes, the 1926 Code was still supportive of a patriarchal family structure. Especially the laws concerning marriage placed women in a subordinate position in the family (Ilkkaracan, 2010). For example, husband was defined as the head of the household and described as the decision maker for the family (i.e., choosing the place of residence, issues concerning children). The wife had to take her husband's family name and had to receive husband's permission to work

outside the home. As such, the husband was the dominant partner, whereas the wife was dependent on the husband in the family structure depicted in the Code (Arat, 2010). However, these aspects of the 1926 Code were not strongly criticized until the 1980s because the Code was regarded as progressive and as part of the secularization process in the Republic (Arat, 2010; Ilkkaracan, 2010).

Attempts to amend the 1926 Code were made since 1951, but it was with the advent of the feminist movement in the 1980s when feminists started to voice their concerns over the 1926 Code that the pressure to change became more prominent. Collaboration of different groups of women resulted in numerous petition campaigns and demonstrations to amend the Code (Arat, 2010). In 2001, 126 women's groups from different sectors of the society united around a major campaign (Women for Women's Human Rights, (WWHR), 2005). Additionally, this movement was accelerated by European Union's dictates for Turkey to enter the European Union and the United Nation's treaty "Convention on the Elimination of All Types of Discrimination Against Women" (CEDAW) that Turkey signed (Arat, 2010). All of these influences combined resulted in the amendment of the 1926 Code, largely in the area of family law which brought a significant amount of gender equality to marriage (Yıldırım, 2005).

The new Civil Code came into effect in 2002. In the new Code, the husband is no longer the head of the household by default. The spouses will manage the household together, and they are regarded as equal partners in the decision-making process. The marriage is no longer represented by the husband; both spouses can legally represent the marriage. The article stating that wives had to receive their husbands' permission to work outside the home is eliminated. The women can use their maiden name before their husband's family name. Eighteen years of age is set as the legal minimum age for marriage for both sexes (in the 1926 Code, consent for girls was changed from 9 to 15 and for boys from 11 to 17). In addition, women's economically disadvantageous position in property division in the 1926 Code is eliminated by equal division of property acquired during marriage. Even though women had property rights in the 1926 Code, there was separation of property in marriage. In cases of divorce, both spouses kept what they brought into the marriage (legally registered under their names). The move toward equal division of property in the 2002 Code was interpreted as recognition of women's unpaid labor at home (Arat, 2010; WWHR, 2005). Additionally, attention is given to using an egalitarian language in the new Code by substituting words such as "husband" and "wife" with words such as "spouses."

Domestic Violence

The 1980s was an important time for social changes regarding gender in Turkey (Rodriguez, 2009). The same pressures from women's groups and international conventions described above for the Civil Code in the 1980s led to advancements in the issue of domestic violence as well. Women from varying socioeconomic backgrounds came together to raise awareness about domestic violence through large media campaigns and to initiate legislative change. The very first law on domestic violence, the Law on the Protection of the Family, was accepted in 1998 (Law no 4320). This law was significant in making a formerly private matter public in Turkey (Kardam, 2005). In 2012, the Law to Protect Family and Prevent Violence against Women (Law no 6284) was accepted in the parliament.

The 1998 Law on the Protection of the Family introduced protection orders and allowed third-party complaints. The protection order can be filed directly from the office of the public prosecutor, upon which a judge issues the protection order that removes the perpetrator from the victim's vicinity and prohibits the perpetrator from approaching the victim for 6 months. If the protection order is violated, it may result in arrest and confinement for up to 3–6 months (WWHR, n. d.). Through amendments in 2007, the law applied to separated spouses as well (Ilkkaracan & Amado, 2008). Additionally, definition of the perpetrator was extended to include not only the spouses but other family members (Kayar, 2007).

Law to Protect Family and Prevent Violence against Women was prepared by the Ministry of Family and Social Policies with the goal of strengthening the previous law and was accepted on March 2012. The new law extended the definition of the victim by including all women regardless of their marital status. It also extended the scope of preventive and protective measures to be taken (Moroğlu, 2012). For example, the law calls for "Violence Prevention and Monitoring Centers" operating 24/7 to be established. The services that the local state authorities are entitled to provide to the victim are detailed such as shelter; financial aid; psychological, vocational, and legal help; and access to day care. Violence prevention programs and collection of data on preventive imprisonment and sentences are also called for. Three days of imprisonment was also specified for perpetrators who violate the protection order.

Family Policies Regarding Childbearing

As a late industrializing, traditionally agrarian culture, the number of children in Turkish families has long been high. As in all traditional societies, married couples in Turkey are expected to have children, preferably immediately after marriage and to have multiple children. This is evident in national population demographics we mentioned earlier; Turkey has had a young populace in the last 50 years. Currently there is also persistent political support to have at least three children. Prime Minister Erdoğan has been openly urging married couples to have "at least three kids." He made this comment at several occasions such as the March 8th Women's Day speech of 2008 (NTVMSNBC, 2008), at the National Elderly Council Meeting (NTVMSNBC, 2009) in 2009, and more recently in May 2012, during an interview with an official dignitary from Kazakhstan (HABERTURK, 2012). These suggestions were the first messages for a line of population engineering speeches the prime minister will deliver, aimed at population increase. Mr. Erdoğan bases his suggestion on recent population indicators showing a steady decrease in population growth in Turkey and estimated aging of the population in the coming decade. However, most of his speeches on the issues also include a reference to Turkishness, Muslimhood, or both (Yazıcı, 2012). A more recent antiabortion statement made at an international population conference, likening abortion to a military air strike on civilians and to murder, is another attempt at population engineering. Yet this comment found harsh and loud objection from women's organizations, and an attempt at changing the existing abortion law was withdrawn.

It is the Civil Code that regulates the formation and dissolution of marriages. Yet the constitution also includes a specific article regarding families. Article 41 of the Turkish constitution reads: "The family is the foundation of the Turkish society and is based on the principle of equality between the spouses. The state shall take the necessary measures and establish the necessary organization to ensure the peace and welfare of the family, especially where the protection of the mother and children is involved, and to provide the needed education in the practical application of family planning" (Office of the Prime Minister, 2010).

This new version of Article 41establishes the role of government in family relations as the protector of the socially underprivileged members – the women and children. However, the statement regarding family planning education and practice is currently under criticism from the antiabortion supporters in the parliament. Prime minister's July 2012 statement claiming abortion to be a murder made the voices of antiabortion groups more prominent even though the proposition to change the abortion law from 10 to 4 weeks has been overturned.

Unlike its older versions, the current Civil Code makes no reference to "out-of-wedlock children" and gives all children in a union equal rights and privileges. Right to adopt children is given to single individuals as well as married couples. If a single person wants to adopt, he/she has to be older than 30 years old. However, married couples, after remaining married for at least 5 years, can apply for joint adoption, if they are older than 18. Once adoption is finalized, all legal documentation regarding the adoption is kept confidential.

Family Policies Regarding Dependent Care

Once the family is formed, the daily lives of families are mostly shaped by the Labor Law and the Social Security Law. These include the laws and regulations about maternity leave, healthcare coverage by the Social Security Institute and the Universal Health Insurance Fund (UHI Fund), and dependent – child and elder – care. For all of these issues, Labor and Social Security Laws work in reference to one another: Labor Law defines how one becomes legally employed as well as the conditions and eligibility for the Social Security Insurance; the Social Security Law defines the extent of the coverage. Those who are unemployed are covered under the Universal Health Insurance Fund (UHI Fund).

The Social Security and General Health Insurance Law has gone through extensive reform since 2006. Social Security Institute (SSI) was established in 2006 by unifying the three different social security and health insurance schemes (SSK, Bag-Kur, and Emekli-Sandigi). In 2007, the country switched to the Universal Healthcare Plan. This plan offers free access to primary care for all citizens of Turkey that includes prenatal, natal, perinatal care for mothers and well baby/childcare. This healthcare plan is referred to as the Universal Health Insurance Fund (UHI Fund) (SGK, 2007). Yet a more extensive coverage is provided to all legally insured employees under the SSI. SSI coverage is given to all employees and their first-degree family members, and it covers all expenses for primary healthcare. The only conditions requiring co-payments and limits are dental care, in vitro fertilization (IVF), and prosthetics. Children under age 18 are fully covered. Since 2007, IVF treatments for women younger than 40, who have exhausted all other options, with a medical diagnosis of infertility are also covered by the SSI. However, this coverage is approved only for married couples, for up to three cycles. Employed single women and women older than 40 are excluded from this coverage. Single women are also not given the choice of egg donation or artificial insemination. Artificial insemination of single women is not allowed even when the women are willing to cover the costs (Uysal, 2003).

The changes in the healthcare system and the SSI were met with mixed reactions. Although the number of citizens receiving free healthcare has increased and all infant and maternal health indicators have improved, the transfer of most of these care services to private healthcare institutions and closing or downsizing of the government hospitals are interpreted as moves towards the privatization of healthcare system in the long run. The remaining government-owned system is overburdened, the quality of care delivered is low, and out-of-pocket health expenditures still make up a significant portion of the national total health expenditures (Pala, 2007).

Maternity and Paternity Leave Policies

Current maternity leave policies in place were last revised in 2003 and stated that during the pregnancy, all employed woman are eligible for leave of absences due to prenatal visits. A total of 16 weeks of paid maternity leave can be used 8 weeks before and 8 weeks after birth or if the mother chooses to and she has supporting medical reports showing that her health condition allows her to work, she can choose to work up to 3 weeks prior to birth and use the remaining 5 weeks after birth. In addition, she can use up to 6 months of unpaid maternity leave. After returning to work, mothers of babies younger than 12 months can also have nursing leaves for a total of 1.5 hours daily.

There is no paternity leave stated in the law. However, a recent change in the law regulating the work of civil servants (Law 657, Article 104) states that men who are civil servants can take up to 10 days of paternity leave and gives the fathers the opportunity for paternity leave of up to 16 weeks if the mother dies during delivery. This new regulation, although only covering employees in the public sector, is seen as an instigator for an upcoming paternity leave policy change for all employees.

The current policies regarding maternity leave in Turkey are considered to be better than some Western counterparts. Yet, they are in need of improvement. The major deficiency is the brevity of paid maternity leave. Two to four months after birth is too early for mothers to leave their infants for

full-day work. Even though they may have nursing breaks, these are in practice ineffective since for majority of the mothers, their babies cannot be physically present for nursing. Infant day care is almost nonexistent and unless the informal social support network of families can provide the needed care, mothers of infants are forced to either take unpaid leave or terminate their employment.

Another important gap in the childbearing policies in Turkey is the nonrecognition of the fathers as integral caretakers of their children. Surprisingly, the corporate world in Turkey offers more opportunities to fathers than the minimum government requirement: 62 % of the 100 largest corporate employers in Turkey offer birth leave to both parents; 33 % offer this leave for up to 6 months. Yet, even when these opportunities are offered, in very few companies do fathers opt to use this opportunity. And even then, 60 % of fathers never take the opportunity (Zahidi & Ibarra, 2010). These numbers show that involved fathering is not yet culturally accepted and the main role fathers are given remains to be the breadwinner role.

Childcare Policies

The Turkish Labor Law does not have mandates on parental leave although its inclusion has been debated as a harmonization requirement for the EU accession that Turkey is a candidate for. The women's NGOs have been pressuring the government for parental leave legislation up to par with the EU requirements – 12 weeks unpaid – yet the employers question the labor market appropriateness of it in the current global market (Acar & Goksel, 2008).

The current Labor Law does make provisions for childcare at work. Any workplace with more than 150 women employees must offer free childcare services for all 0–6-year-old children of its employees. Although nationwide compliance with this law has not been reported, we have the numbers for the top 100 employers in the nation: Among these, only 21 % report having any day-care options. Only 10 % offer on-site day-care facilities and the remaining 11 % either outsource or provide part-time services (Zahidi & Ibarra, 2010). Thus it would be safe to state that childcare services at the workplace are gravely lacking in Turkey and that this lack ultimately limits women's labor force participation.

The regulation of early childhood care services nationwide is performed by the Directorate of Child Services (*Çocuk Hizmetleri Genel Müdürlüğü*). Looking at the attendance rates in early childcare, it is evident that childcare options outside the workplace are also very limited (UNICEF TURKEY, 2010). According to the Hacettepe Demographic and Health Survey (2009), a total of only 12 % of all preschool-age children of working mothers either attend kindergarten (7 %, compared to 27 % in EU) or are cared for by a paid caretaker (5 %). The remaining 88 % are cared for by extended family members. Thus if the family has limited finances and no family members living close by, the birth of a child means the end of the mothers' career. Most children in Turkey are cared for at home by their mothers or, if the mother is employed, by the paternal grandmother (25 %) or maternal grandmother (11 %), an older sibling (6 %) or another relative (5 %) (Boğaziçi University Social Policy Forum, 2009).

To increase the schooling rates of 60–72-month-old group, enrollment of this age group in the kindergarten classes of public schools started in 2009 in 32 of the 81 provinces. Yet most of these classes were offered at a monthly rater of 50–200TL (roughly 20–80€). Considering that minimum wage is about 700TL (280€)/month in Turkey (FedEE, 2012), these rates can be unaffordable for many families. Thus, the enrollment rates were low in these classes. In 2012 with an unexpected change in the primary education law, all 66-month-old and older children are called to primary school. This major change in the public primary education system commonly referred to as "4+4+4 law" has created a lot of reaction. Most experts warn that the current call of 60-month-old children to "primary education" instead of "early childhood care" or "kindergarten" is highly problematic (ACEV Early Child Care Advisory Board, 2012). School readiness of these young children is highly

questionable, given the very low kindergarten attendance rates in previous years. Although early childhood education is highly common in the world (UNESCO, 2012), primary school education of 5-year-olds is very rare (UNESCO, 2011), and in all of these nations, early childhood education rates of 4-year-olds are very high. The readiness of the schools and teachers is also questioned, given that these children will be accommodated in already existing schools with already existing staff with very limited training in early childhood education. The physical conditions of most public schools have not been modified to meet the special needs of 66-month-olds as well. All of these concerns have been publicly debated in the last 10 months since the declaration of the call, and growing concerns led to a movement among parents to obtain fake medical reports to excuse their children from school for a year. The government is adamantly pushing to go forth with the decision without any improvement in criticized issues. Upcoming months will show the effectiveness of this sudden move on the part of the government.

Yet, the question of what happens to 9–59-month-old children whose parents are employed or need/want to be employed is still left unanswered. Without adequate childcare services, women's equal participation in education and labor force is greatly compromised. Thus, Turkey has one of the lowest female employment rates among the OECD countries – 27.6 % compared to 70.9 % OECD 34 average (OECD, 2011). Women may work at higher rates before marriage or childbearing, yet they may never return after childbearing or return to lower-status jobs and remain in those jobs. This mentality of viewing women's work as "a welcome *addition* to family finances," giving it an auxiliary role but not considering it an integral part of the labor force and women's lives, undervalues their work and limits their career opportunities. It further perpetuates a gendered division of labor at the workplace as well as within the family, further making women vulnerable.

Care of the Elderly

Discussions of an aging population or about the care of the elderly are recent in Turkey as it is largely a nation with a young population. Of the 74 million, only about 10 % is at or above age 60 (Turkstat, 2012a). Until recently, elderly care was considered a private family matter, and elderly at public care facilities were considered only for the family-less poor. Thus, the great majority of the elderly are cared for by families, and many receive no or very limited support from the government. Services for this population fall under the services provided by the Directorate General for the Disabled and Elderly Services (OYHGM) under the Ministry of Family and Social Policies. In 106 nursing homes around the country operated by the OYHGM, 11,678 elderly are cared for. Residents in these facilities need to pay a portion of their care costs, and this co-pay is close to twice that of current minimum wage. Nonetheless, most facilities have long waiting lists. OYHGM also oversees the private nursing home management of 164 registered private nursing homes nationwide. These institutions have the total capacity to serve 9,804 elderly people. 24 nursing homes are managed by various ministries and local governments. These facilities have a total capacity of 2,579 which brings the grand total to 24,061 nationwide (OYHGM, 2012), close to 3.3 per 10,000 of the total elderly population.

It is evident from the above numbers that facilities and services for the elderly are very limited in Turkey. The existing facilities can only serve able-bodied elderly, and even so, they are overcrowded and lack staff that are trained to serve the special need of the elderly. In general, Turkey lacks expertise in gerontology (ASAGEM, 2008). In addition to the limited number of care facilities, the spectrum of services is also very narrow. Nonresidential care services are being formed but they are very new and serve a very small number of families. Services for the elderly with special needs are even more limited and lack the expertise needed to deliver quality care. These all point to the urgent need for a very comprehensive policy work; however, aging and its special needs are not in the Turkish social and political agenda yet.

Care of the Disabled

According to the 2002 Turkish Disability Research conducted by the Prime Ministry Administration for Disabled People (OZIDA), 12.29 % of the Turkish population has a disability. This means close to nine million people and their families are dealing with the complications of living with a disability daily. The most common form of disability is chronic illness (9.7 %), followed by orthopedic disabilities (1.25 %) and visual impairments (0.60 %) (OZIDA, 2012).

Although the numbers are similar to the numbers in other nations (e.g., according to USA Disability Statistics (2012), 11.9 % of the population in 2010 were disabled) and lower than the global 15 % estimate by the WHO (2011), what is different in Turkey is the fact that a significant portion of these disabilities are due to preventable causes: 34 % of the disabled are disabled prenatally or at birth, and the most common causes of their disability are hygiene (esp. for visual impairments) and kinship marriage. While the improvements in primary healthcare delivery are important factors thought to remedy one of the contributors to the issue of high prenatal impairments, there is very little being done to discourage kinship marriages, especially marriages among the first-degree cousins, a very common practice all over Anatolia.

The first Turkish Disability Law was passed in 1997 and later revised in 2005 as part of the EU harmonization. The more comprehensive new version includes prevention of disabilities as well as mainstreaming of the disabled children in education and full integration of the disabled members of the society by setting a deadline of 2012 to make all public places and transportation accessible. Improvements have been made in the infrastructure, yet changes in general attitudes towards the integration of the disabled in everyday relationships have been very slow and limited.

Although the law promises integration of the disabled to the public education system supported with special education services when need arises, as well as full inclusion in the Universal Healthcare Plan, studies looking at the rates of educational attendance among the disabled find it to be very low: One in every ten disabled is able to attend school. Thus about 34 % of the disabled in Turkey are illiterate while the country illiteracy rate is 11.3 % (Tufan & Arun, 2006). Special education and care facilities are operated under the supervision of the Directorate General for the Disabled and Elderly Services (OYHGM). There are a total of 130 special care facilities with the capacity to serve close to 11,000 disabled individuals and 84 care and rehabilitation centers nationwide with a capacity to provide services for close to 5,400 disabled individuals. Thus, roughly only six per 100,000 of the disabled are able to utilize services specifically provided for them at a care facility.

According to the Turkish Disability Research (OZIDA, 2012), the most commonly used service by the disabled is healthcare, followed by education and rehabilitation services. Yet the rates of use are very discouraging: Only 55.7 % of the disabled report using healthcare services, while only 12.3 % utilize educational services and a mere 5.9 % are receiving rehabilitation services. Families of the disabled are eligible for social assistance programs since 2006 and close to 200,000 families are being supported. This is probably the single most positive change in the lives of the disabled in Turkey because with this change, home-based care gained support over institutional care that further marginalized the disabled. However, there still remain about eight million disabled people and their families who have not been receiving this assistance.

The 2002 Turkish Disability Research results and others draw the Turkish disabled profile as one who is poor, inadequately educated, with limited social security. This profile supports the statement made by a disabled parliament member in an interview with Anna Louie Sussman of *The Atlantic* (2011): "Families with disabled children are praying for their kids to die before them, because they have no support systems."

Family Policies Supporting Families in Poverty

According to the World Bank data (2012), poverty rate in Turkey was 18.1 % in 2009. According to Law 2022 that was first accepted in 1976 and that was reformed in 2005, 2007, 2008, and 2011, all Turkish citizens who have no income or have income below the determined poverty line and who are older than 65 with no family to take care of them or those with a disability who are older than 18 with no family to take care of them and those families with a disabled member under the age of 18 are eligible for monthly allowance.

An alternative social assistance program is the conditional cash transfer (CCT) program. This is a program initiated with funds from the World Bank in 2002. It targets families in poverty with dependent children. Families in this program are given the assistance with the condition that they will complete the healthy childcare checkups for their children ages 0–6, send all their school-aged children to school, and present the expecting mothers of the family to regular prenatal care.

The CCT has been adopted by the Turkish government in 2006, and between 2003 and 2008, a total of 1.27 billion Turkish liras has been spent on the program (MFSP, 2012). The effectiveness of the program has been under study since 2009, yet the results have not been published as of this writing. Yet there is evidence from around the world where the same program has been implemented that it contributes to significant declines in child labor utilization and school dropouts. Yet, un-standardized selection criteria and very low assistance rates may limit the positive outcomes of this program (Buğra & Keyder, 2007).

Another social assistance program targeting poor and socially excluded families is the Local Initiatives Project. It has four components: income-generating projects, employment skills training projects, social service infrastructure-generating projects, and temporary community employment projects. Although there is no substantive study conducted to show the extent of the effectiveness of this program, Buğra and Keyder (2005) report some concerns based on their fieldwork with seven provinces. Un-standardized selection criteria creating an air of ambiguity among the applicants as to who gets selected and why create a persistent lack of faith in social assistance resulted in underutilization of services and feelings of humiliation rather than empowerment among the recipients. These contribute to the exclusion of men from the process. In poverty-stricken families, it is almost always the women who come to ask for assistance. This is of great concern especially for programs like the Local Initiatives where employable skills training and infrastructure generation are targeted for those members who have some employment past. Yet when it is the women who come to get help, rather than generating projects, they tend to opt for in-kind assistance of goods, further perpetuating the charity-based mentality.

An effectiveness study of the project-based assistance programs was carried out by the Directorate of Social Assistance (SYDGM) and Government Planning Agency (DPT) in 2007 with 6,012 participants. They found that 86 % of the recipients of these project funds were generally happy with the assistance they received. Of those who were to pay back the project capital they received the year the study was conducted, 95 % were able to make full or partial payment (SYDGM, 2008). Other studies looking at the sustainability of Local Initiatives Projects found sustainability rates ranging from 98.5 to 69.1 % (ESDA Consultancy, 2006; PAR Consultancy, 2006). Another indicator of effectiveness would be if the project recipients were able to earn enough money to keep themselves and their families out of poverty, thus to generate income above the minimum wage as a result of the project. However, the surveillance system results show that of the 2063 projects active during 2009, about 1,700 of them made equal to or less than the minimum wage (Biçer, 2009); thus these families still remain at the margins of poverty. Yet the continuance of these noninterest credit programs is seen as an important way of taking families out of the grips of persistent poverty and helping individuals gain skills and experience to keep, create, or find future employment (Buğra & Keyder, 2005).

Recommendations for Family Policy Development, Implementation, and Assessment

After reviewing the most influential family policy regulations, it needs to be emphasized that the speed and amount of change in family policy in Turkey is staggering (for a previous review of family policies in Turkey, see Çarkoğlu, Kafescioğlu, & Mitrani, 2012). Thus the recommendations that follow may be outdated by the time this chapter is published. Nevertheless, several points regarding the process of implementation and the approach to family issues need to be mentioned.

Among the limited number of programs available to better the lives of families, the majority is geared toward crisis interventions that aim to affect a very small portion of high-risk families. The need for these types of programs is clear; however there is great need for a larger range in programming. Social assistance programs for at risk families such as the poor, immigrant, or single-parent families need to increase. These families need less direct help and more indirect community support to better their family living conditions. Family assistance services that go beyond financial support and education are lacking, such as home-based services for the dependents in families.

Evidence-based family policy development is of paramount importance. Most programs are developed without scientific needs assessment studies, and they later lack efficacy studies to test whether or not these programs provide any relief or support. The existing limited number of efficacy studies all remains descriptive, looking at changes in descriptive indices (e.g., drops or increases in reported cases), yet the mechanism through which this kind of change occurs remains unexplored, leaving us with no understanding of the influential factors that help or deter the change and what needs to be done to remedy the situation. What is needed are either qualitative studies or more detailed data collection that lends itself to statistical modeling analysis that go beyond answering "what" questions to understanding the "how."

The new Civil Code brought gender equality to marital relationships; however there are still a number of shortcomings. The 2002 Code has retained the 300 days of waiting period for divorced or widowed women before remarrying, a period that can only be waived by a Turkish court. The purpose behind this waiting period is considered to be the concern for determining paternity (Yıldırım, 2005). This article is criticized as a violation of women's basic human rights (WWHR, 2005, p. 3). Another area for improvement concerns women's last names. Women still do not have the freedom to choose to keep only their maiden names after marriage. Another very important area is the lack of recognition of same-sex couples in the law. The wording of the Civil Code indicates that a marriage can only be between a man and woman and the Article 2 of the Marriage Regulation states that marriage is a legal contract between a man and a woman (Başoğlu & Yasan, 2011). Thus, same-sex couples do not have the right to marriage. In addition, "homosexuality" is accepted as grounds for divorce and the homosexual spouse to be at fault (WWHR, 2005). Furthermore, there are no regulations for civil unions either for same-sex couples or heterosexual couples in the Civil Code. Thus same-sex couples cannot establish any unions under the Turkish law (Başoğlu & Yasan, 2011).

The Law numbered 6284 to Protect Family and Prevent Violence against Women has been prepared to eliminate the implementation problems of the previous law (Law no 4320). Whether the new law will improve conditions in Turkey is open to question. First and foremost, those who will implement the new law such as public authorities and judges need to be trained and these programs need to be evaluated. Other means to improve implementation may include continuation of campaigns to inform the general public about the new law and different forms of violence, increasing the number of shelters, and improvement of the existing ones. As of 2012 there are 60 women's shelters in Turkey with a capacity of 1,427 (CEDAW, 2012). The opening of new shelters needs to gain momentum in Turkey.

Conclusions

Once again, Turkey is going through a rapid social policy change. The Justice and Development Party (aka AKP) that has been in power since 2002 has gained the political and economic stability to take on numerous policy reforms, and family policy reforms became the focus in the last 5 years. The neoliberal economic policy with a conservative political agenda leads to a renewed emphasis on "the strong Turkish Family" and a call to fight the modernization trends that "erode family ties" (Yazıcı, 2012).

The neoliberal economic policies called for the shrinking of the welfare state by replacing public institutions with private health, child, elder, and disabled care facilities. Although the services provided in these institutions are still under the coverage of the UHI Fund, the privatization trend in caregiving facilities is disconcerting.

The conservative agenda of the AKP government pushed forth the family and especially the female members in families to fill any gaps in caregiving. We see three basic issues in this trend, two of which are not specific to family policy but all social policy making in Turkey: First, in all areas of social policy, including family policy, the prominent discourse is about "need" rather than "rights" (Buğra, 2008). As such, individuals and families are expected to document their need or inability to provide for their families to become eligible for even the most basic of social assistance. This creates a chasm between the citizens and the government and limits the utilization of the services provided, especially when the services are prevention focused rather than crises management (Buğra & Keyder, 2005).

Second, prevention-focused policies and services for families at risk are very limited, and the existing ones almost exclusively are based on passive delivery of information via lectures. The content of these lectures are developed without proper needs assessment or any kind of community-based, collaborative evaluation. The effectiveness of most of these services is also not evaluated once they start. These all contribute to the limited access as well as acceptance of these programs by the society at large. Egalitarian, collaborative, community empowerment-focused services are in need of developing (Semerci, 2010).

Third and more specifically true for family policies in particular is that almost all family policies assume the women in families as subjects that exist to serve and care for their families. This assumption becomes most apparent in child-, elderly, and disabled care policies in place. It is assumed that there is always a mother to care for the 0–3-year-old children or that there is always a female family member to transport the disabled and the elderly to special education or other care facilities during weekday working hours or perform caregiving task for them at home. Yet there are no alternative systems in place to do the work these women are doing if they either do not want to or cannot perform these services. At this point one wonders, for whose sake are these policies anyway? What happens when it is the government, through policies and services to support families, that is creating unequal family dynamics that put the female members of families at a vulnerable or oppressed position, perpetuating the patriarchal authority all over again?

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Part IV Family Policies in Asia

Chapter 17

Family Policy in China: A Snapshot of 1950–2010

Yan Ruth Xia, Haiping Wang, Anh Do, and Shen Qin

Abstract The Chinese family policies are shaped by the country's political, socioeconomic, and cultural contexts and have evolved over the years. China has passed its most significant family policies and laws in marriage; child rearing; child, women, and elderly protection; family planning; and health care in the past 60 years. This chapter will cover the most important laws and policies that affect Chinese families from 1950 to 2010. The discussion focuses on policy development, implementation and analysis, and the challenges China faces in relation to these policy issues.

Keywords Chinese family policies • Marriage laws • Divorce • Child welfare • One-Child policy • Healthcare policies

Zimmerman (1988, 1992) broadens the definition of family policy, referring to it not only as "all the individual policies that affect families, directly or indirectly" but also as "a perspective for understanding and thinking about policy in relation to families...." This interpretation is insightful in that it shows family policy and family policy making are greatly influenced by the way that family service providers and communities, scholars, decision makers, and the society as a whole think about what legislatures should do to advance the well-being of families. More importantly it indicates that the family policy making is a dynamic process in which individuals, families, and communities have an essential role and a responsibility to influence family policy. In China family policy reflects how a government understands family needs and is restricted by social ecology and economic status. Government's awareness of family needs and views of family function determines the direction of family policy (Hu & Peng, 2012). The Chinese family policies are shaped by its political, socioeconomic, and cultural contexts and have evolved over thousands of years of history. China has passed its most significant family policies and laws in marriage; child rearing; child, women, and elderly protection; family planning; and health care in the past 60 years. This chapter will focus on the most important laws and policies that affect Chinese family life since the current government took office in 1949.

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Political, Socioeconomic, and Cultural Contexts of Chinese Family Policy

Throughout Chinese history, family and the country are not viewed as separate entities. In the Chinese language, the word *country* consists of two characters "*Guo Jia*," which literally mean "*country*" and "*family*." The family is viewed as the smallest entity of political and moralistic governing. Individual or marriage is secondary to the family which, in turn, is secondary to the country. The stability of the family is critical to maintaining the financial and political stability of the country. Under this national ethos, families should also sacrifice for the common interests of the country.

China has 1.34 billion people and over 401 million families; therefore, nearly 93 % of the total population resides in the family household (Nation Bureau of Statistics of China [NBSC], 2011). The average family size is 3.1 persons (National Bureau of Statistics of China [NBSC], 2012). The average per capita annual disposable income of urban households increased from 343 *yuan* (\$55) in 1978 to 19,109 *yuan* (\$3,082) in 2010; the average per capita annual net income of rural households increased from 133 *yuan* (\$21) to 5,919 *yuan* (\$955) during the same period (NBSC, 2012). Since the economic reform in 1978, most Chinese families have seen a dramatic improvement in living conditions. China has lifted 600 million people out of poverty in the last three decades (World Bank, 2010, 2012).

Chinese culture had been influenced by Confucian philosophy that advocates patriarchal beliefs and values for more than two thousand years (Lin & Ho, 2009). The Confucian philosophy sets rigid rules for traditional Chinese women to obey in order to keep women in an inferior position in the society. For example, *San cong si de* specified three obedience and four virtues as a guidance of a model Chinese woman. *San cong* means a woman should obey her father before being married and serve her husband in marriage and follow her son after her husband dies; *Si de* refers to fidelity, tidiness, propriety in speech, and commitment to needlework (Tang & Lai, 2008). For thousands of years, the traditional marriages were arranged by parents. Only husband could terminate the marriage by writing a "Termination Letter" to the wife. The woman rejected by her husband was often denied of all her belongings. In such a marriage, a husband's rights were protected. Women's basic rights were not recognized before the middle of the twentieth century.

In the 100 years between 1840 and 1949, the traditional Chinese family was challenged by emerging ideas of freedom of choices with the appearance of Western influences in big metropolitan areas. Traditional values and customs were maintained due to the poverty and little mobility in the majority of families, especially those in rural farming communities. When the Communist Party took over the country in 1949, two significant events took place. The government had a tight control over its people by regulating families (e.g., where they live and work). At the same time, it encouraged women to work outside the home and gave them the same rights as men enjoyed in the workplace.

Traditionally, Chinese families care for their frail elderly parents and family members with chronic illnesses. Even today, it is a stigma for adult children to place their elderly parents in nursing homes. However, it is to a less degree than it used to be. In the past, nursing homes were run by the government to provide assisted living only to those who did not have children. Today, there are nursing homes or assisted living facilities that are run by private corporations. Such homes for the elderly vary in the cost and quality of care. Among a small number of older people in the nursing home, there are parents whose adult children are either unable or unwilling to take care of them. Some elderly parents with enough resources would choose to live in good quality facility and enjoy the freedom to keep their own routine, rather than to stay with their adult children. Nowadays the vast majority of Chinese adult children care for their parents at home.

Chinese view of the family is paradoxical. On the one end, Chinese families accept the government's regulation as well as function as caregivers for the elderly, the disabled, and the chronically ill for public goods. An example of such an extreme case is the One-Child Family Policy. On the other end, Chinese families are tight and private. They support family members financially, physically, and emotionally. They will do all they can to keep the family from losing face.

A History of Family Policy Making in China

Over thousands of years in Chinese feudalist society, the emperor's words were the law. When the last dynasty was overthrown in 1909, a republic government was formed following the foreign model, with the attempt to lead China to a democratic state. This government ended its ruling on the mainland and withdrew to Taiwan in 1949. There was no explicit family policy formulated during this time (Li, 1991).

The course of Chinese family policy creation fits two forms of policy-making processes in China as described by Lieberthal and Oksenberg (1998): "(1) Policy X was adopted pragmatically to solve new policy problems pressing upon leaders; (2) Policy X was promulgated in order to keep alive its ideological vision of its proponents..." (p. 3). The communist ideological convictions dominated the policy making from 1949 to 1976. After Mao's era ended in 1976, China began the socioeconomic reform by adopting a market economy and "open door policy." Family policies have been mainly the responses to the problems during its social transition and transformation. In formulating policy solutions, the government has relied on the expert opinions and data gathered through the government funding although the policy research and analysis are still developing and influenced by the political climates. Policy making tends to be more of a top-down than bottom-up democratic process.

Family policy has evolved greatly after China implemented the "open door policy" in 1978 (Xu, 1995). It regulated the rights and responsibilities of the family as a whole as well as individuals in a family. The Chinese family policies adopted since then address the welfare of children, women, the elderly, the vulnerable, and the disabled.

Marriage Laws of China

The People's Republic of China issued the country's first Marriage Law in 1950 (Diamant, 2000). It was revised and turned into the Civil Codes in 1980 (Fowler, Gao, & Carlson, 2010) and amended again in 2001. The 1950 Marriage Law challenged Chinese traditional beliefs and practices by encouraging free choice of marital partners, monogamy, and equality within the marital relationship. The Law set the minimum age of marriage to be 20 for man and 18 for women. This minimum age has since increased to 22 for men and 20 for women (National People's Congress of the People's Republic of China [NPCPRC], 2001), a policy measure to advocate late marriage and slow down the birth rate. The most significant component of the first Marriage Law is to explicitly state the rights of women and children and abolish the traditional arranged marriage and male dominance (Blaustein, 1962).

In 1980, no-fault divorce was added to the Marriage Law (Cook, 1986). The amendment occurred after the Chinese social and economic reform started in 1978, which reflected a new emphasis on the quality of marital relationships. Through new provisions in the 2001 amendment, the Marriage Law abolishes the traditional practice of dowry by prohibiting "the exaction of money or gifts in connection with marriage" (NPCPRC, 2001, Chapter I, Article 3). Bigamy, domestic violence, and family maltreatment and desertion are made unlawful as well.

Chinese gross divorce rate (the number of divorced couple per thousand people) tripled from 0.03 % in 1979 to 1 % in 2000 (Xu & Yie, 2002). This figure is much higher in big cities like Shanghai and Beijing than in rural areas. The instability of the marriage and thus of the family was perceived as a risk factor for the instability of the country. In 2001, there was a heated debate in China over whether the no-fault divorce should be taken out of the Marriage Law. Research showed that many factors contributed to the rapid increase in divorce. The most significant factors included (a) an increase in mobility of the population (people were free to look for jobs in other areas than their residency place), (b) a decrease in stigma associated with the divorce, and (c) a decrease in influences of the couple's

decision from the family (Xu, 1997). Above all, Chinese began to pay attention to their emotional well-being when they feel financially secured. In the end, no substantial revision was made to this clause of the Marriage Law in 2001 (Xia & Zhou, 2003).

In contrast to the past, the Marriage Law is more liberal, making it relatively easy for couples to end their marriage if both spouses have agreed to it. In cases where only one spouse is seeking a divorce, the court will require the couple to undergo mediation before starting any court proceedings (Cook, 1986; NPCPRC, 2001). The court has grown more flexible over the years, allowing couples to divorce based on grounds such as incompatibility, lack of mutual affection, gambling, and drug addictions (NPCPRC, 2005). The law also grants more protection to women by placing restrictions on husbands who are seeking divorce. For example, the court will not grant a divorce to a husband if his wife is pregnant or before his child becomes 1 year old (NPCPRC, 2005).

Laws and Policies on the Protection of Women Against Violence

China does not have a nationwide system of data collection related to all forms of violence against women. However, some studies have reported that the lifetime prevalence of intimate partner violence against women in China varies from 64.8 %, the highest, to 19.7 %, the lowest (Tang & Lai, 2008; Zhao, Guo, Wang, Wu, & Wang, 2006). Other forms of violence against women are rapes, human trafficking for sex slaves and prostitution, illegal confinement, abduction, and severe physical injuries. The incident reports are anecdotal.

There is not a specific law on protection of women against domestic violence, but there are several provisions related to domestic violence in general. For example, the *Marriage Law* amended in 1980 and again in 2001 outlawed domestic violence. According to Article 3 of the 2001 *Marriage Law*, "Domestic violence shall be prohibited. Within the family maltreatment and abandonment of one family member by another shall be prohibited" (NPCPRC, 2001). The law further stipulates that the victims of domestic violence have the rights to place the charge against the perpetrator in court. This is a significant progress in the protection of women in Chinese history because wives can sue their husbands in a society where patriarchy ruled and for thousands of years, father, husband, or son was always right. If a victim files a charge against the perpetrator but cannot afford an attorney, she is entitled to free legal services, that is, an appointed attorney under the provisions of *Regulations of the People's Republic of China on Legal Aid* (UN Women, 2003).

In 1992, China promulgated another important law, the *Law of the People's Republic of China on the Protection of Rights and Interests of Women* (National People's Congress of the People's Republic of China [NPCPRC], 2005). This Law reaffirms women's rights and further specifies the criminal acts of violence against women: "Women's right of life and health is inviolable. Drowning, abandoning or cruel infanticide in any manner of female babies is prohibited; discriminating against or maltreating of women who give birth to female babies or women who are sterile is prohibited; cruel treatment causing bodily injury to or death of women by means of superstition or violence is prohibited; maltreating or abandoning of women who are ill, disabled or aged is prohibited" (NPCPRC, Article 38). The 2005 amended Law *on the Protection of Rights and Interests of Women* asks provincial and local governments to hold the perpetrators accountable for their criminal acts (the UN's Secretary-General's database on violence against women). Severe punishments including the death penalty can be imposed to violent crimes against women, for example, illegal confinement, abduction and sale, rape, violent assault, and murder of a woman according to the 1997 Chinese *Criminal Law* (Chen, 1999).

The provisions of all the laws mentioned above have been put in place with the aim of providing legal protection to Chinese women and preventing future violence. According to the United Nations' Secretary-General's database on violence against women, the impacts of most of these laws have not been evaluated. The implementation of these laws and policies has been challenging. First, the definition of domestic violence as provided in the general laws is not specific enough for the law enforcement and the court to apply effectively. For example, the injuries resulted from violence may not be readily documented and presented to judge as strong evidence (Xu & Yie, 2002). Second, law enforcement, police, and judges are not sensitive to domestic violence situation. Influenced by the traditional values, they may be hesitant to intervene. They need training in appropriate responses to domestic violence. Third, the women who are abused need support and access to legal and financial services. If they are fearful of their own safety and that of their children and if they have been told constantly that they are not worthy, they may not be able to see other options. The case is much more complicated when a child is involved. The abused women may not be aware of the resources available to them and their children. They may also face pressure from their parents and family, as well as their husbands' families, not to take any action. Male dominance and other traditional values such as keeping face as well as lack of awareness about intimate partner violence and lack of the legal protection that addresses the problems that victims face in safety, financial stability, and employment contribute to the abuse (Gui, 2006). The best practice shows that the most effective intervention is the community collaborative response which involves police, medical professionals, financial aid office, shelter, counseling, and other community services working together. Compared to where China was and where it is in terms of passing laws on the protection of women against violence, China has made a big leap. However, concrete measures in prevention and intervention need to be developed and utilized for a greater safety and protection for these women.

Maternity Leave

The Chinese government has enacted a number of policies to ensure family-work balance. The Labor Law and specifically the Regulations Concerning the Labor Protection of Female Staff and Workers (Ministry of Commerce of the People's Republic of China, 1988) stipulated that female employee maternity leave is 90 days, including prenatal leave of 15 days. If an expecting mother has dystopia, she will get another 15 days. And if the woman gives birth to more than one child in a single birth, she will get another 15 days for each additional child. It has also stipulated that female workers' basic salaries will not be reduced and their labor contracts will not be terminated during their pregnancy, maternity leave, and nursing period. The State Council published the Special Provisions on Labor Protection of Female Employees in 2012 to extend maternity leave from 90 days to 98 days (Library of Congress, 2012).

There is no specific provision in the Chinese Labor Law about male employee's paternity leave. It is mostly at the discretion of the provincial or local governments. Zhejiang province, for example, requires that state-owned enterprises, organizations, and companies grant to new fathers a weeklong paternity leave and grant a 12-day wedding leave to those who become married at an age older than the minimum legal marriage age (China Lawyer, 2011). During this period, employees may enjoy full benefit including wages and bonuses (China Lawyer, 2011).

The One-Child Family Planning Policy of China

The One-Child Policy

In 1979, China enacted its most controversial policy, the One-Child Family Planning Policy, also known as the One-Child Policy, in an attempt to slow down its explosive growth in population. At that time, mainland China was home to a quarter of the world's population. Two thirds of the population were young people under the age of 30, who were the children of the baby boomers generation of the 1950s and 1960s (Zhu, 2003). The policy was adopted based on the assumption that without control, population growth would outpace economic growth and living conditions could not improve even if the economic reform that started in 1978 could boost the economy. Eventually all natural resources would be depleted, and nothing would be left for future generations. The *One-Child Policy* stipulates that each married couple should have one child (The State Council of the People's Republic of China Information Office, 1995), with an exception for families of 55 Chinese ethnic minorities, which make up 4 % of the population.

The Implementation of One-China Policy

The central government has reinforced the policy by implementing a birth quota system in work and residential units nationwide. The government provides each local employer and authority a quota to enforce. The quota sets the annual limit of new births among their employees and residents. The local authorities have the discretion to distribute the quota upon couples' applications. If a couple had given an unauthorized birth or a company exceeded its quota, the couple or the company could be fined or lose benefits they were otherwise entitled, such as salary increase or bonus. The policy depends on universal access to contraception and abortion. In both rural and urban areas, condoms were distributed to married couples for free. Sterilization surgery was widely available to men and women who already have approved number of children. The surgery cost was covered by the government health care. A total of 87 % of all married women used contraception (Yin, 2003).

Incentives for One-Child Families

The government provides incentives in employment, education, housing, and welfare to encourage family planning. Rule-abiding couples in childbearing age can apply for a Certificate of Honor for being one-child parents and have the certain privileges (Population and Family Planning Law, 2001). For instance, following the month they get the certificate, until the only child reaches 14 years of age, the urban couple will receive a monthly child allowance from the government. The government will also provide elderly security support to low-income only-child families. The rural couples will be given priority in taking out loans and receive land allowance (Kane & Choi, 1999).

Provincial and local governments have adopted its own incentives. In some provinces, only child also gets priority in education and employment opportunities. For example, when applying for colleges, candidates from only-girl families and two-girl families will be given an additional 10 points to their college entrance examination score (Law Library, 2002). Shanghai provides insurance for the only-child family in case that the child suffer from disease and accidental death (Xiangrikui, 2011).

Assessment of the Only-Child Policy

Chinese government has been implementing the *One-Child Policy* for over 30 years. The birth rate dropped from 18.25‰ in 1978 to 11.9‰ in 2010, and the natural growth rate from 12‰ to 4.79‰ (NBSC, 2011, 2012). The total fertility rate decreased from 2.9‰ in 1979 to 1.7‰ in 2004, with a rate of 1.3‰ in urban areas and just fewer than 2.0‰ in rural areas (Wang, 2003, as cited in Hesketh, Lu, & Zhu, 2005). As a result, urban families have predominantly one child and rural families have two children. The number of nuclear family increases in urban areas, while the number of the extended family decreases (Zhan & Montgomery, 2003).

The implementation of the *One-Child Policy* has been smoother in urban areas more so than in rural areas (Kane & Choi, 1999; Shen & Yuan, 1999) because the policy often clashes with the traditional values of raising children. The son preference is rooted in socioeconomic and cultural contexts. As a Chinese custom, a son is expected to provide the major financial support and care for his elderly parents, while a daughter joins their husband's family after she is married and takes care of her parents-in-law (Gui & Ni, 1995). Continuity of the family name and common practice of elderly care lead to a preference of sons over daughters. However, this practice is slowly changing, and more Chinese parents are being taken care of by daughters (Cooney & Di, 1999). Research showed that the traditional Chinese value of having children such as continuity of the family name, son preference, and old-age economic security appeared to be more of a concern to rural parents than to urban parents, who seemed to enjoy more emotional bonding, companionship, and old-age psychological support of their children (Lin, 1997). Without pension from work, rural parents rely on their sons in old age. To address the imbalance of the gender ratio, the One-Child Family Policy was later revised so that rural couples could have a second child if their first child was a girl.

With the traditional view that boys are culturally preferable, many Chinese families artificially selected the gender of the baby in order to have a boy. This resulted in the illegal abortion of many female fetuses. Even though China had banned sex screening in 1994, statistics shows that the percentage of males and females is 51.27 % and 48.73 %, respectively (NBSC, 2011). China has 34 million more males than females in 2010 (NBSC, 2011).

Recently another concern has arisen about caring for the parents of the only-child couples due to the increase in the ratio between elderly parents and adult children. In China, the percentage of the population over the age of 65 years was 5 % in 1982 and now it is 7.5 %, but this is projected to rise to more than 15 % by 2025 (Health Nutrition and Population Statistics, 2005). Although these figures are lower than those in most industrialized countries, Hesketh et al. (2005) pointed out that this percentage is a noteworthy number given China's pension coverage for the elderly. Approximately 70 % of Chinese elderly people are financially dependent on their children. This can become an insurmountable task to the only-child generation. Couples, who were only-children themselves, are now responsible for the care of their child and four parents. Even for the one-child couples whose parents had enough money for retirement, providing physical care for four aging parents can be a huge challenge. In response to this concern, the *One-Child Policy* was amended again to allow the married couples to have two children if they both were the only child. According to China's report, 31 provinces have allowed the couples who were both only-child to have a second child (Wang, 2011).

In sum, the policy is reported to have slowed down the natural growth rate by 2.5 times and have improved the physical health and living conditions of Chinese families, particularly, children and women. However, at the same time, it has also raised serious concerns about sex imbalance, the parenting issues and development of the only child, and reports of female infanticide (Hesketh & Zhu, 1997) and care for the aging parents by the only-child couples.

Child Welfare Policies in China

Child Welfare Policy Development

China has 222 million of children of 0–14 years of age and takes up 16.6 % of the total population (NBSC, 2011) and 369 million of children of 0–18 years of age (China Institute of Social Policy, 2010). According to the policy review and analysis jointly conducted by China Institute of Social Policy at Beijing Normal University and United Nations Children's Fund (2010), policy measures have been put in place from 1949 to 2010 that had significantly improved the well-being of Chinese children. This review divided Chinese child welfare policy development into 5 stages (Table 17.1):

Policies for Protection of Children

Chinese policies for protecting children mainly fall into five categories: public health prevention and health care, social assistance of children in poverty, education, child safety, and support for child development.

Health Care. In 2010 the mortality rates of children under the age of 5 years were 7.3% in urban areas and 20.1% in rural areas and 16.4% in total (NBSC, 2011). The rates have reduced since 1991 from 20.9% urban, 71.1% rural, and 60% total (NBSC, 2011). The infant mortality rate has dropped from 200% in the late 1940s (The State Council of the People's Republic of China Information Office, 1995) to 11.6% in 2010 (NBSC, 2011). China started a national campaign to provide children with the bovine vaccine in early 1950s and the vaccine for polios, measles, tetanus, and other infectious diseases in 1960s and continued the immunization efforts in winters and springs of 1970s (The State Council of the People's Republic of China Information Office, 1995). In 1980s, collaborating with UNICEF, China integrated all the immunization efforts across the country and started a system of immunization certification. Each newborn would have a record of the vaccine with a schedule showing what has taken or to be taken. In addition, China issued a number of regulations that require the local governments to provide basic health care for mothers, newborns, and young children by building maternal and child health-care centers (stations) at the county level or above and establishing a system of medical records (China Institute of Social Policy, 2010; Policy and Research Team, 2009). All these measures, along with the health-care reform (discussed later in this chapter), contribute to the improvement of Chinese children's health marked by the big drop in the mortality rate of infants and children under 5 years of age.

Research and policy analysis also identified big challenges in child health care. Because of the high cost, many families whose children have cancer, genetic heart disease, and other chronic illnesses cannot afford the treatment. Another big challenge is the huge disparity in health and health-care utilization between urban and rural families (Meng, 2007). See further discussion in the Health Care section.

Education. The Education Law of China stipulates that children have the rights and should enjoy the rights to education, while the government should provide free and compulsory 9-year education (China Education and Research Network [CERNET], 2005). However, fees imposed by schools are barriers to free education for children in many poor families, especially rural families (Tang, 2002). To address the problem, in 2001, the Chinese State Council issued a regulation of rural school management to abolish all registration and book fees for rural students and ban rural schools from collecting the fees. In 2008, this fee elimination policy (not including the book fee) expanded to urban schools. The school retention rate at the end of the fifth year had reached 98.8 % nationwide in 2003

Table 17.1 Policies and stages of development of child and family welfare in China

Stages of				Date of	
development	Stage characteristics	Enactment of law and policies	Issuer	Enactment	Amendment
1949–1957	Preparation	The Marriage Law	The National People's Congress	1950	1980, 2001
1958–1966	Primary development				
1967–1978	Stagnation				
1979–1989	Recovery and progress	"One Child Policy" and Population and Family	The State Council and The	1979	1995, 2001
		The Compulsory Education Law	The National People's Congress	1986	2006
		The Regulations Concerning the Labor Protection of Female Staff and Workers	The Ministry of Commerce	1988	
		The Notice of the Ministry of Labor on Several Issues Regarding the Treatment of Female Workers during Pregnancy	The Ministry of Commerce	1988	
Since 1990	Rapid development and	The Law on the Protection of Disabled Persons	The National People's Congress	1990	2008
	institutionalization	The Law on the Protection of Minors	The National People's Congress	1991	2006
		The Law on the Protection of the Rights and Interests of Women	The National People's Congress	1992	2005
		The Law on Maternal and Infant Health Care	The National People's Congress	1994	
		The Labor Law	The National People's Congress	1994	
		The Law on the Protection of Women's Rights and Interests of the Elderly	The National People's Congress	1996	
		The Population and Family Planning Law	The National People's Congress	2001	
		The China Action Plan for Enhancing Birth Population Quality and Reducing Birth Defects and Disabilities	The State Council	2002	
		The Implementation Plan for the Recent Priorities of the Health Care System Reform	The State Council	2009	

The Table is adapted and developed from "Child Welfare in China - Stocktaking Report, 2010"; it is not an exhausted list

(China Institute of Social Policy, 2010). According to the World Bank World Development Indicators, 111 % of Chinese children were enrolled in primary schools in 2010 (over 100 % is possible due to the over-aged children). China continues to face challenges in providing free 9-year education to all school-aged children of migrant workers, in poverty, and with disability and other special needs and face challenges in providing affordable secondary education to its young people.

Social Assistance to Children in Poverty. Between 1981 and 2004, "China lifted more than 600 million people out of poverty," but still there is 2.8 % of the population at or below the national poverty line in 2004 (World Bank, 2010). Last year, China raised its poverty threshold to 2300 yuan per person, roughly equal to \$362. The sharp increase from the previous 1274 yuan in 2010 is an effort by Chinese government to bring the threshold closer to the World Bank standard at \$1.25 per day. Under the new guideline, 128 million people would be eligible to receive the government assistance (Xinhua News, 2011). According to the China Statistical Year Book (NBSC, 2011), there were 75.24 million of Chinese having received minimum living allowance and 7.66 million of Chinese people times having received temporary relief in 2011. In addition, 6.15 million of rural residents had received the traditional forms of assistances. No data are available as to how many children were among them. Given 16.6 % (222 million) of Chinese population in 2011 are children of age 0–14, the number of children living at the government poverty threshold is estimated to be roughly 12.5 million. This is a conservative number as younger and older populations tend to be over represented in poverty. If using the China Institute of Social Policy, 2010 number (369 million, 27.6 %) of children at the ages of 0–18, 20.76 million children lived at the government poverty threshold.

In 1993, Shanghai first set the minimum living standard and soon other provinces and districts across the country followed. In 1999, the central government set the minimum living standard of urban residents (Central People's Government of the People's Republic of China [CPGPRC], 2005) and, in 2007, set the rural minimum living standard security system (Ministry of Labor and Security of the People's Republic of China, 2007). Besides setting a poverty line to both rural and urban areas, China has used other policy measures with the attempt to provide children with a safety net. These measures include setting the minimum living standard for orphans, abandoned and homeless children, and children with disabilities; building state-owned and run orphanages, and experimenting with multiple forms of foster cares, for example, kinship care, residential home, and family home model (China Institute of Social Policy, 2010).

Left-Behind Children and Migrant Children. One of the major changes in modern Chinese family policies is loosening up the residency control, thus increasing the mobility of individuals and families between rural and urban areas and across the country. Chinese can look for jobs and live in a place other than their hometown. The rapid economic growth offered opportunities and meanwhile demanded labor from rural areas of all over the country. To make a better life, a large number of young- and middle-age farmers left the villages and work in cities. The majority of these farmer workers are parents. Some of them left their children in the villages, and some brought their children with them to the cities. As a result, one group are the left-behind children, defined as those rural children who are taken care of by their grandparents at home when both or one of their parents migrate to urban areas for work (Su, Li, Lin, Xu, & Zhu,2012). The 2009 census showed that there were about 5.8 million left-behind children (Lee & Subramanian, 2012). The other groups are the migrant children, defined as those who move with their parents or parent from farming areas to cities.

Recent research found that left-behind children showed the signs of developmental delays and suffered emotional problems, particularly loneliness (Su et al., 2012). Sadly, there is no specific policy crafted to help these children by far. For a period of time, the situation of migrant children were no better than the left-behind children as their existence and rights were not recognized in the cities that they called home. Their schooling and health care were all in question and became a serious public concern. In the late 1990s, the Chinese government introduced policies that specifically aimed to address these concerns, for example, the Interim Measures for the Schooling of Migrant Children

(1998) and the Special Population Program on Immunization Management Program (1998). In the first decade of the twenty-first century, further policy measures were taken to ensure the migrant children's rights to education and their family living conditions. Even so, there is a huge gap in the education and health care between migrant children and other children (He & Li, 2007; Tan, 2010).

Health-Care Policies

China has been implementing two different health-care systems to provide preventative care, medical service, and disease control in rural and urban areas. Like other sectors, health-care systems in China have gone through significant changes since its economic reform started in 1978. The following discussion will be divided to two subsections: the policies, impacts, and challenges of Chinese health care before and after the beginning of the reform.

Qingyue Meng from the Center for Health Management and Policy at Shandong University conducted a case study for the Health Care System Knowledge Network, a WHO commission on the social determinants of health in 2007 (Meng, 2007). It is the most comprehensive health-care policy review and analysis using balanced data sources and studies from both inside and outside of China. The following summary mainly reflects the findings in his report. Worth mentioning are the two historical periods in modern China: the founding of the People's Republic of China in 1949 and the Great Cultural Revolution from 1966 to 1976 when Mao's era ended. Meng (2007) described the time prior to the economic reform in 1978, when China ran a three-level health-care system across the country. Village clinics, township health centers (1st tier) and county hospitals (2nd tier) in the rural areas, and community/street clinics (1st tier) and district hospitals (2nd tier) in cities provide primary care to local residents. The big urban hospitals and university research hospitals with more expertise and better equipments treat the patients referred by the local clinics and hospitals from both rural and urban areas. The central, provincial, and local governments funded the hospitals at different levels. The health-care costs of urban families were covered either by a public health insurance program, government health insurance if the heads of family households were working for the public offices and stateowned factories, or by labor health insurance if they were working for non-state-owned factories. Patients paid a token amount of registration fee at each hospital visit. The health-care expenditures of rural families were covered differently by a collaborative health-care program called Rural Cooperative Medical Care Scheme to which government, farmers, and the people's commune, a collective farming and governing unit, all contributed.

Through this system, China had greatly improved its people's health at a low cost. Within 30 years, Chinese life expectancy had increased by 22 years from nearly 45 to nearly 67 in 1980, according to the data from the UN Department of Economics and Social Affairs, Population Division. China had also eliminated or kept under control highly infectious diseases, such as chicken pox, cholera, and leprosy (Meng, 2007). "China had used 2 % of the world's health resources to provide 22 % of the global population with accessible basic health care prior to 1980s" (Bloom & Gu, 1997; Guo, 1989, p. 4). The problems during this time were that the quality of the medical care and care facilities were poor or basic; there was a great need for resources, especially in rural areas; and there was a huge gap between rural and urban areas (Meng, 2007; Wang, Xu, & Xu, 2007).

During the Great Cultural Revolution, a 10-year political movement launched by Mao (1966–1976), hundreds and thousands of doctors from the tertiary hospitals in the cities were sent to work in the village clinics and county hospitals. Meanwhile "barefoot doctors," farmers who received short medical training, provided preventative care and educations to other farmers. The Great Cultural Revolution destroyed many infrastructures of the country. Surprisingly health-care services survived.

The presence of good doctors from urban hospitals at villages and barefoot doctors' grassroots efforts appeared to continue improving the health indicators and Chinese life expectancy.

Since the economic reform started in 1978, Chinese per capita GDP had grown 14.7 times by 2010, with at least 6 % annual rate and double digits in 8 out of 22 years (NBSC, 2011). Family incomes have increased and living conditions have improved, while the gap of these two is getting large between the rich and the poor, the urban and the rural, and the coastal and the inland. The Chinese government efforts in the decentralization of financing the hospitals and other health-care facilities widened the gap (Brant, Garris, Okeke, & Rosenfeld, 2006; Wang et al., 2007). It is that the rich provinces, cities, and counties had more resources to fund their health care, while those poor did not. In addition, the rich families can afford to buy private health insurance to supplement the basic health care provided by the public-funded insurance, while the poor families had difficulty paying the copayment for the basic health-care insurance. Meanwhile the medical care costs kept escalating. Liu and Hsiao (1995) found in their study that the health expenditure per capita rose 8.2 % annually from 1978 to 1985 and rocketed to 24.4 % during 1985–1989, compared with about 3.1 % from 1952 to 1978. They contributed the rapid growth to uncontrollable factors such as inflation and increased number of older people as well as man-influencing factors such as the increased standard of quality care and, above all, the change in Chinese hospital financing and payment policy that led to excessive use of high-tech medicine and expensive drugs. They also found that the patient's co-pay requirement did not appear to be an effective factor to curb the expenditure growth. Health care became unaffordable to many low-income families and farmers' families.

In the late 1990s, China had an overhaul of the old health-care system for employees in cities because its rigidity and nearly fee-free financing structure were not compatible with the market economy. The price for health care went up, while hospitals lost a significant portion of its funding from the government. There were misuses and abuses of the public health funding due to corruptions. The reform was introduced to curb the skyrocketing costs. Under the new mandatory urban social health insurance, the government, employers, and individual employees share the cost (Liu, 2002; The State Council of the People's Republic of China, 1998). The policy left self-employed and the dependents of employees and rural families uninsured but included retirees (Meng, 2007). Later the benefits were extended to the self-employed as a voluntary program.

After piloting the program regionally, China launched a new Rural Cooperative Medical Insurance (CMI) nationwide for individuals and families including those in rural areas in 2009 (Wagstaff, Lindelow, Gao, Xu, & Qian, 2009). Like the urban program, this program is subsidized by different levels of the government, township, county, provincial, and central and voluntarily participated by farmers (Liu, 2002; Ministry of Health of the People's Republic of China, 2003).

China is aiming to establish one social health insurance that will cover everyone. Recently the State Council (2011) has made it a state priority of improving the welfare of the disabled for the 5-year period of 2011–2015. For now, it faces the challenges of decreased coverage, rapidly increased costs, and widened gap of health indicators, care quality, and utilization between the rich and the poor and the rural and urban.

Policy on Elderly Care

In 2010, 118.9 million people in China were over the age of 65, accounting for 8.9 % of the total population (NBSC, 2011). In 1982, people over 65 accounted for 4.9 % of the entire population. In less than 20 years, the growth rate nearly doubled. It is estimated that the 65 years and older population will reach 17 % of the Chinese total population by the year 2050 (Gu, Zhu, Chen, & Liang, 1995). Thus, elderly care has become a pressing issue. China's pension plan and health-care service only covered those working for governments and large companies. As China is predominantly rural, only

25 % of the nation's workers are covered by pension plan (Jackson & Howe, 2004). In 1996, China passed the Law on Protection of the Rights and Interests of the Elderly (National People's Congress of the People's Republic of China [NPCPRC], 1996). The Law specifies that the family members, specifically adult children, bear the major responsibilities of caring for their aging parents. In case that the older people do not have children or other legal guardians, the government shall take care of their basic needs through a government-funded elderly care program. If sons or daughters who have the capacity but refuse to provide financial support (alimony or payment) to an aging parent, the parent can go to court or the employer of the adult children. The employer can exclude the money from his or her paycheck in advance, which is a provision unique to Chinese culture. China has an aging population, which poses a great challenge in the elderly care in the foreseeable future. Also see the earlier discussion on the care for the parents of the only-child couples.

Conclusion

Family harmony is viewed as critical to maintaining the stability of Chinese society. China has devoted to developing family policies to facilitate family's function. In the past 60 years, especially the last three decades, China has passed most laws in its history to protect the rights and interests of children, women, the disabled and the elderly, and other vulnerable populations. During the social and economic transition, laws and policies that affect families have been developed and implemented regarding marriage and divorce, family planning, education, urban and rural health care, pension, and social security.

Although laws aimed at strengthening families have been put in place, the enforcement of the laws has been challenging. Without systematic policy analysis, it is difficult to see whether the goals and objectives of the law have been accomplished and whether there is any unintended effect. For example, the *One-Child Policy* results in an imbalanced sex ratio and higher elderly dependency ratio, which post a great challenge for the only-child couples and the state in caring for the elderly in the future. China still faces a huge challenge to implement and reinforce the existing laws on protection of women and children against violence. During the social and economic reform, many poor families are struggling due to the cutback of public benefits that used to be available through the state or the employer (Qin, 2011). In transition, another pressing question is how to support the disabled in health care, education, and employment (Stratford & Ng, 2010). The costs of education and health care continue to rise. There exist large disparities in access to quality health care and health indicators between the haves and the have-nots, rural and urban areas, and coastal and inland regions. Family policies will continue to evolve while China is trying to address these challenges.

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Chapter 18 Family Policies in Taiwan: Development, Implementation, and Assessment

Shann Hwa Hwang

Abstract This chapter includes a brief overview of policies on parental leave, poverty, and disability. In-depth case studies of three other important family policies in Taiwan are closely examined: Divorce Law, Domestic Violence Prevention Act, and Family Education Act. Divorce law allows divorcing couples to choose either judicial divorce or consensual divorce. The mandatory divorce mediation is required when both individuals cannot agree on the settlement. Due to cultural beliefs and perceptions, most divorcing couples prefer the Neighborhood Mediation Center to work out their disputes. In terms of Domestic Violence Prevention Act, it was a recent policy enacted to ensure the safety of women and children, particularly in familial or intimate relationships. However, it is still in the infancy stage that needs fine-tuning. Furthermore, a significant public policy enacted in 2003 is Family Education Act. Taiwan is the first country that nurtures individuals and strengthens families through family life education law. Comments on implementation and assessment of each law were provided.

Keywords Parental leave • Poverty law • Disability law • Divorce law • Mandatory divorce mediation • The Neighborhood Mediation Center • Domestic violence • Family Education Act

Introduction

Family policy is a fairly new concept in many countries except for developed western countries and some European countries. Generally speaking, family policy refers to governmental activities to provide support for strengthening individual well-being and family relationships (Bogenschneider, 2006; Zimmerman, 2001). Public policies would be considered effective when they achieve the aforementioned goals (Bogenschneider, 1995). The ideology of family policy did not gain public attention in Taiwan until most recent years because it is widely assumed that individual family should take care of its own family affairs (Lee & Sun, 1995). In the past, every family seemed to be culturally endorsed by the society to function as the mediator to handle family matters and household-related issues in Taiwan. A common attitude is that family matters should be kept and discussed within the family. As a result, local government, including law enforcement, mainly played a passive and indirect role in intervening adverse family matters for a long time.

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Family Characteristics

With the increased education attainment and labor participation for women in Taiwan, economic independence and self-sufficiency become more common for women (Taiwan National Statistics, 2012). Delayed marriage or remaining single among women is an increasing phenomenon; particularly the unmarried rate of women was 70 % in 2010 for 25–29 age cohort. Since women's view toward marriage has gone through major change, the total fertility rate has been dramatically affected. It was roughly 0.9 per household in 2010, the lowest in the world (Department of Household Registration, 2010). If the government enacts new policy to speed up marriage and encouraging childbirth, the likelihood to see future total fertility rate increase can be expected.

At the end of 2010, the total population of Taiwan reached 23.16 million, in which 11.53 million were female. The sex ratio was 101 (101 male for 100 female). The sex ratio at birth was 109.5, higher than the normal range of 103–107; the gap of the sex ratio in the near future in Taiwan will be even more females than male (Taiwan National Statistics, 2012).

In the traditional gender role division of household labor, providing family care and homemaking are largely female's responsibility. Tang (2001) pointed out that many women with employment contribute 2–3 times more compared to their husbands in household labor. For those who are not in the labor force, some women even spent 5.3 h a day doing chores. Furthermore, it is a common family value that "men are breadwinners; women are homemakers." Married women with an employment that may demand family caring are culturally encouraged to consider giving up their career.

The Influence of Socioeconomic Context

Taiwan, marginally smaller than the combined states of Maryland and Delaware, has a population of 23 million. The majority of the population were "native Taiwanese" who are offspring of Chinese migrated from Fujian and Guangdong Provinces of Mainland China in the eighteenth and nineteenth centuries, whereas roughly two million "mainlanders" came to Taiwan after 1945 following the leadership of Chiang Kai-shek who evacuated from China after being defeated by the Chinese Communist Party (Lu, 2010). In addition, roughly a half of million indigenous people live in various mountain areas in the central and eastern parts of Taiwan. These three groups make up the majority of the population on the island.

Although Taiwan was colonized by a few countries in its history, it was governed by one party, Kuomintang after the ending of World War II. Martial Law was declared in 1949 and repealed in 1987. During this period, any opposition to the central government was forbidden and intervened. Due to one-party government, the society and family life were under restricted governance. Little distinction was made between the government and Kuomintang that determined public policies mostly from political perspective instead of promoting the well-being of family life.

The values and beliefs of Confucianism permeate various aspects of family life. For example, Confucianism stresses filial piety, loyalty to the group, conformity to societal expectations, and respect for one's superior (Fong, 2008), which considerably differ from the beliefs of western societies. Along this line, women, in particular, are reminded at young age to place the well-being of the family above individual dreams and aspirations. Committed obligations and shame-based responsibility are common mechanisms used to persuade women to honor the family.

Traditional Chinese family structure in Taiwan is deeply rooted in patriarchal practice and often includes extended family members (Julian, McKenry, & McKelvey, 1994). Roles and responsibilities are generally operated from a hierarchical structure that is mainly based on gender, age, and social class (Huang, 2005). A great emphasis is typically placed on harmonious interpersonal relationships achieved through interdependence, loyalty, and conflict avoidance; personal dreams and development are sacrificed to maintain family harmony (Min, 2006). Many Chinese families emphasize the

importance of the family unit rather than individual well-being (Lee & Mock, 2005). For example, couples in a more traditional Chinese family typically place the well-being of the husband and his family members above and beyond the wife's own needs and well-being (Adler, 2003).

The cultural ideal practice of co-residence of aging parents with their married sons and other family members is widely promoted in Taiwan (Lee & Sun, 1995). As a matter of fact, multi-generational co-residence is commonly perceived as a direct sign of happiness and an explicit display of filial piety regardless of whether this family is truly happy. Co-residence with aging parents and other family members may offer direct, needed support which is a valued social capital that many nuclear families in Taiwan are lacking. On the other hand, the living arrangement of the oldest son with aging parents can create added strain on his marital relationship and parenting process. Shame and ridicule may be used when individuals fall short of family expectations (Lee & Mock, 2005). It is extremely possible that the notion of honoring the family and social pressure may have kept many marriages together. In Chinese communities, rumor and gossip about one's family life, particularly one's marriage, can be widely made known quite easily (Fong, 2008), which will bring shame and dishonor to the entire family. However, Chinese couples, especially those with traditional beliefs, constantly encounter challenges in regard to gender equality and autonomy promoted in the media.

Considering the unstable job market in Taiwan, a high degree of marital conflict may be associated with the issue of money. Men with low education and less transferable job skills (Kitano & Daniels, 2001) seem to experience heightened financial stress the most. This group of Chinese men may be compelled to take any low-paying, labor-intensive jobs that become available. On the other hand, women in these families may also be required to look for ways to make money for economic survival (Min, 2006). Over a period of time through improved job skills, the increased economic contribution made by Chinese women in this situation along with husband's decreased earning ability can increase marital stress and conflict.

In this chapter, an overview of policies on parental leave, disability law, and poverty law will be briefly presented. When the reader gains a general understanding of each policy, the main focus of this chapter will shift to divorce law, domestic violence prevention, and family education law as in-depth case studies of family policies in Taiwan.

Overview of Policies on Parental Leave, Poverty and Disability

Parental Leave Law

Han and Waldfogel (2003) argued that one of the most pressing issues facing men and women lies on how to balance work and family life during the first few months of childbirth. It is proposed that early maternal employment and non-maternal care may affect children's later cognitive and emotional development (Han, Ruhm, & Waldfogel, 2009). When mothers are entitled parental leave rights, the rates to take maternal leaves are higher. Although a good number of women quitted working after childbearing, it is crucial for the government to provide tangible ways for mothers with new babies to return for work. As a matter of fact, the way in which the government assists families in making smooth transition during this time can produce profound impact on the newborn as well as the financial situation of the family.

The number of labor force participation by women has increased tremendously in recent years. The rate can be as high as 70 % of pre-pregnancy participation in the labor force (Feng & Han, 2010). According to Taiwan National Statistics (2012), for females aged 15–64 working before marriage in 2010, 31 % of them quitted their job after being married. The same report further indicated that 55.5 % of women returned to work following the childbirth. Obviously, maternity leave, in particular, plays a crucial role in determining the likelihood of mothers returning to the labor force. Furthermore, maternity leaves have been in place for 96.8 % of institutions that enrolled in Labor Insurance in 2010

(Taiwan National Statistics). In addition, 75 % of institutions with more than 30 employees provide unpaid paternal leaves.

The general goal of parental leave policy aims to protect the employment rights and benefits of women who are mothers during the disrupted childbearing time (Feng & Han, 2010). The availability of parental leave policy at the national level may determine the possibility of parents leaving their jobs to assume parental responsibility after the birth of a child. In Taiwan, every mother is entitled to roughly 8 weeks of paid maternity leave with or without a pension plan. However, the length of this leave can extend to up to a total of 4 months of full pay if a mother has a public pension plan.

In order to provide a better condition for child rearing and childcare to prevent high job turnover rate, the government increased subsidy for the community babysitter network as well as after-school childcare service in elementary schools. These services target parents with preschool or school-age children to maintain their employment, particularly for mothers.

Poverty Law

Taiwan has continuously experienced robust economic growth in the past few decades. It is apparent that many citizens benefit from positive economic condition during this period. Given the economic prosperity experience, the temptation seems fairly high to assume that poverty rate would be considerably low. However, it is not the case. Poverty is another crucial social issue that has not been closely examined and supported by the government. Good work ethics and family responsibility are two focal emphases to avoid individuals who voluntarily and intentionally choose not to work by relying on social welfare benefits. The underlying assumption suggests that the issue of poverty should be minimal when each family is taking care of other family members (Lin, 2001a). As a result, many poor individuals or families were not qualified for public assistance under stringy guidelines, simply because many poor families under these guidelines are not considered poor. The threshold of poverty line has been so rigid that seemingly portraits a low poverty rate (Lu, 1999).

In the past, only death and after launching the last child in a household would allow disadvantaged families to be out of poverty. This crippled poverty law was finally amended and renamed to Public Assistance Act in 1987 (Lu, 1999), attempting to address this continued social problem. One of the goals in the revised policy aims to assist individuals who are physically and mentally incapable of keeping a job. Since the new act becomes more diverse and expansive, 852,000, 3.7 % of the national population, were eligible for public assistance (Ministry of Foreign Affairs, 2012). Through a collaborative partnership between the government and local government agencies to assist disadvantaged households in Taiwan, more families in need can be helped through public assistance programs.

Established in 2008, the Ministry of Interior began a new service called "Immediate Assistance Program" which provides short-term subsidy relief to individuals and families due to recent death, unemployment, and illness of the primary wage earners ranging from roughly US\$300 to US\$1,000. From the beginning of this fund till the end of 2010, an estimated US\$ 51.5 million was utilized for such emergency relief fund.

Disability Law

In the past, disabled people were widely considered as "hidden minority" (Chang, 2007) and perceived as misfortunate individuals who consumed societal resources and could not contribute to the society. As a result, they were intentionally ignored and received minimal governmental support prior to the 1980s. Through this approach, the family of disabled persons should assume the primary responsibility to meet their needs, which the government should not intervene (Tsai & Ho, 2010). In

fact, the only situation that the government would intervene is when the family becomes unable to take care of the disabled person. Due to the limited support provided by the government, a lot of efforts initiated by disabled individuals as well as parents with disabled children to advocate for their rights in Taiwan were evident after the 1980s. In 1990, the League of Enabling Associations (LEAs) was founded and began to play a pivotal role in the formation of disability law. In addition to LEAs, the Parents' Association for Intellectual Disabilities was founded in 1992. Through collaborative efforts of these two associations, disability rights have developed tremendously. As a result, the Physically and Mentally Disabled Citizens Protection Act was amended from the 1980s till the beginning of the twenty-first century.

Prior to the 1980s, disabled individuals were not allowed to take college entrance exam, had restricted accessibility of public facilities and transportation, and encountered employment discrimination. The system was previously operated from the charity model, and later it was challenged by continuous protests and movements which the social model was established (Tsai & Ho, 2010). Finally, the Disabled Persons Welfare Law was passed in 1990. A few examples of substantial changes are given below. First of all, this law increased the employment quota to 1 % for the private sector and 2 % for the public sector (Chang, 2007). Second, in the 1996 revision of the Act of Civil Servants Examination, disabled persons were given eligibility to participate, which was the first time in history (Tsai & Ho, 2010). Finally, the subsidy for home care services for disabled persons was introduced in 2002.

Divorce Law

Marriage has been commonly perceived as a marked event in the life course for most men and women in Taiwan, particularly for women from the traditional background. It is simply because they are bestowed a legal status to be accepted into husband's family and also provided a lawful and rightly opportunity to have children. From a cultural perspective, getting married is a socially acceptable avenue for a woman to expand her social network. The main task of a married woman in a traditional household is to provide domestic care and do chores for her in-laws as well as other family members. This act of providing domestic care and household work directly ties to filial piety. Lee and Sun (1995) pointed out that multi-generational co-residence symbolizes happiness. When the entire family is well taken care of, happiness and harmony are mutually established. Neighbors in the same community will make positive comments about how fortunate the in-laws are to have a wonderful daughter-in-law who is taking care of them (Lin, 2001a).

As stated previously, the adjustment for a married woman into a traditional family beliefs and mentality requires her to put the family above her own which can generate strain in her marriage. The situation can worsen, particularly after having children. The tension may be escalating from role overload between providing care for her young children and fulfilling filial piety through domestic care and chores. In such situation, maintaining familial harmony and happiness becomes a major task.

In the past, married women with limited education and almost no employment experience could only endure the multi-generational household in a male-dominant society. No matter what happened, they would attempt to maintain harmony in order to create a happy family atmosphere. This type of harmony and happiness was done at the expense of physical health and emotional well-being of the daughter(s)-in-law (Lin, 2001a). At any rate, it was the responsibility of the daughter(s)-in-law to make sure everyone was well taken care of.

Although the cultural ideal practice of married sons and family member co-residence with parents and other family members has been widely promoted and encouraged, the number of nuclear families has steadily increased. Various reasons associated with this change have been discussed (Lee & Sun, 1995); particularly many women nowadays obtain higher education which leads to a stable job. When this occurs, women with college education and decent employment tend to maintain strong negotiation power than their own mothers in marital relationship so that their desire to establish nuclear family

arrangement in order to avoid multi-generational household lifestyle can be satisfied. On the other hand, couples with good education and decent jobs are able to afford independent living from their parents to pursue preferred lifestyle and their careers. Many benefits come with this type of living arrangement. For example, many contemporary married women avoid the responsibility to provide domestic care associated with marital conflict, for their in-laws and other family members. Besides that, couples may have their own space and time to strengthen marriage bond. However, one direct drawback is the absence of social support network. This is particularly crucial when spousal relationship remains in distress.

With the increased number of nuclear families due to higher education and employment among women, gender role inequality becomes less common between the husband and the wife. Furthermore, married women are gainfully making money through their jobs which allow them to negotiate their shared responsibilities around the house. On the other hand, many married men realize that their wives can be financially independent from them if divorce does take place. Besides these factors, Taiwan has been deeply influenced by the western mind-set toward marital relationship and no-fault divorce. In fact, divorce rate was not high in the past due to the restricted divorce law and low social acceptance toward divorced individuals, especially for women (Chou, 2008). Even if a woman did successfully go through a divorce, her financial situation was seriously plummeted. Until recent years, divorce rate has increased significantly, particularly for women who are financially stable. In fact, divorce rate in Taiwan during 1970–1990 has tripled (Lee & Sun, 1995).

The impact of divorce on the family and individuals who are involved has produced more negative economic parent-child relationships and adjustment issues than positive ones (Yang, 2008). Research shows that it takes 5 years following the divorce for single-parent households to reach 70 % of predivorce income (Lamanna & Reidman, 2009). Single mothers suffer most financial loss and social network support than divorced men in Taiwan (Yang, 2008). Furthermore, the traditional image of "loving mother" and "strict father" can be greatly affected following the divorce, particularly for women who will lose their authority to discipline their children (Yang).

In Taiwan, judicial divorce and consensual divorce are two common options when a couple is seeking a divorce. Judicial divorce involves one party who files a divorce case against the other party which requires court intervention. Court judges under judicial divorce law follow the divorce filing from one party to identify fault(s) of the other party in a divorce case. Detailed and specific evidence and documents are required to process this type of divorce. The whole process can be troublesome, painful, and embarrassing (Chou, 2008). The divorcing couple is required to be present for the mandatory divorce mediation. Conversely, consensual divorce refers to couples who are able to resolve their own disputes outside of the court without the mediation assistance provided by the government. Most couples in Taiwan seeking divorce attempt to avoid adversaries associated with judicial divorce which leads them to choose consensual divorce.

When a divorcing couple does go through judicial divorce, the judge attempts to reconcile the couple to avoid easy divorce case. In addition, both judicial divorce and consensual divorce require a registration procedure through a governmental office so the divorce can be finalized after it is done. Taking reconciliation process and registration requirement into consideration, the intent of both processes is to give each divorcing couple more time to reconsider their decisions for divorce. In addition, the government desires to avoid easy divorce cases at all cost. However, the participation rate for mandatory divorce mediation rarely exceeds 20 %. As a result, the government funds each city to begin "the Neighborhood Mediation Center" to handle mediation process. Throughout the country, the participation rate was more than 50 % (Liu, 2012), and it was as high as 90 % in some cities.

Implementation

Courts throughout Taiwan processed 33,413 divorce cases in 1995. This figure increased to 94,233 in 2005 and jumped to 125,117 (Liu, 2012) which was more than 4 times compared with the figure in 1995. Considering the load of divorce cases, it is no surprise that the court system in Taiwan was ill prepared to process an enormous amount of cases with limited resources and staff.

In Taiwan, bilateral divorce can be done between the couple without the intervention from the court. This is typically done through the Neighborhood Mediation Center. Men typically choose consensual divorce due to strong financial power to negotiate their divorce case. However, when disputes cannot be resolved, divorce mediation needs to be involved. The essence of divorce mediation attempts to help the divorcing couples to work through unresolved disputes. In the United States, divorce mediation typically focuses on property division, child custody, and child support issues. However, divorce mediation is mandatory and done by the court judges in Taiwan, and the reconciliation result can only be achieved through the mediator assigned by the court (Chou, 2008). However, a unilateral divorce (judicial divorce) must be done through the court. Prior to the trial, there is a mandatory mediation process required by the court. During this process, judges in Taiwan are encouraged to advise the couple through reconciliation. The government in Taiwan always tries to support and strengthen family values which can ensure family stability. When families are stable, the society in turn remains in a good condition. As a matter of fact, the act of pursuing a divorce directly challenges the idea of family stability perceived by many judges (Liu, 2012). That is the main reason why most judges during the divorce mediation process will attempt to reconcile couples to decline their divorce case by indirectly presenting obstacles in order to "save the marriage."

Another mediation service that is provided is called "the Neighborhood Mediation Center." It is a government-funded voluntary mediation service. The Neighborhood Mediation Center is located at the city hall of every city, and its service is complimentary to everyone. Since the participation rate for mandatory mediation is low, the settlement rate all over the country exceeds 50 % which is more than double the rate of the other mediation service. Chou (2008) reported that the settlement rate reached 90 % in some cities. Typically, the mediation process is less intimidating and more personal. In addition, the divorce case is discussed with a mediator, rather than presented in front of a judge at the court.

Bilateral divorce regime seems to support the free spirit of individualism between the husband and the wife in the process of divorce. In a consensual divorce case, one party is required by the law to pay the other party alimony, and also noncustodial party pays the one with custody child support. In most cases, the court awards child custody to the mother who gains more bargaining power. As a result, this type of divorce becomes most costly for men. Furthermore, consensual divorce law requires both parties to be present to sign the divorce document in front of two witnesses at the registration agency. The witnesses may not need to be lawyers nor be related to either party. Unfortunately, when one party refuses to be present to sign the document, the divorce is not legally finalized. Without officially registering a divorce, any agreement made prior to signing the document is not legally binding.

Assessment

Liu (2011) argued that best interests of the child can be overlooked and sacrificed in the midst of disputes associated with divorce due to conflicts raised by a divorcing couple. From a cultural standpoint, many divorcing couples attempt to utilize consensual divorce to avoid public embarrassment. As a result, one party may compromise the needs of children in a divorce settlement.

It is also important to note that insufficient training and lack of professional knowledge about post-divorce family dynamics and parenting skills among mediators present a pressing issue when divorcing couples work with them to resolve disputes during the divorce mediation process. One of the main reasons for insufficient trainings and professional knowledge in the area of divorce mediation is mainly due to lack of funding and resources. Unfortunately, the likelihood of treating a divorce with a narrow view and poor understanding about family life can potentially create problem for divorcing couples and their children.

In many consensual divorce cases, they were done through private negotiations without court intervention unless agreements cannot be reached. As a matter of fact, men attempt to fight for child custody to avoid the payments of alimony and child support. Women who desire to obtain child custody may be willing to give up financial support and property division. Even though judicial divorce tends to award child custody to women in most cases, most divorcing couples still prefer to choose consensual divorce. In fact, judicial divorce appears to favor women who in turn perceive this procedure as confrontational and embarrassing to discuss family matters in public (Chou, 2008).

Fackrell, Hawkins, and Kay (2011) proposed that court-affiliated divorce parent education programs showed positive effects for parent-child relationship and post-divorce discipline outcomes compared to those who did not participate. Research further showed that children adjust better following the divorce when low parental conflict and cooperative co-parenting show strong predictors of child outcomes. Since the participation rate through the Neighborhood Mediation Center (NMC) exceeds the mandatory divorce mediation, it seems to make sense to offer parent education programs to divorcing couples through NMC since most likely they have established trust with the center.

Domestic Violence Prevention Act

In Taiwan, the number of domestic violence victims reported reached 98.72 thousand in 2010, an increase of 17.9 % from 2009, 75 % of them were female (Taiwan National Statistics, 2012). With the central and local Domestic Violence Prevention Committees actively circulating the anti-domestic violence messages and promoting a dedicated hotline 113 to protect women and children, this telephone support line was finally established in 1995 for reporting and consulting services. Once it was made available, the number of victims reported has increased in the past few years. The reported cases of domestic violence were largely resulted from marital relationship (55.6 %, including divorce and cohabitation), in which 90 % of the victims were females (Chen & Deng, 1999). Therefore, preventative effort should focus on strengthening gender equality and promoting females' awareness on independence and self-protection (Chou, 2001).

As a society, domestic violence was not viewed as an important public agenda like in some other countries (Carkoglu, Kafescioglu, & Mitrani, 2012). Consequently, Taiwan has paid an enormous price to eventually pass the law that would protect women for their fundamental rights as human beings. The law was not enacted as a result of unceasingly political debate, innovated researchers' findings, or a product of civilization. Conversely, the fact that numerous women suffered ongoing abuse and violent acts inflicted mostly by their loved ones became a clear wake-up call to the whole country. The Domestic Violence Prevention Act was a mainly brutal result of a homicide case that took place in 1993.

It is crucial to provide some background information to see how this case triggered the legislators to work on domestic violence law. Ru Wen Deng was battered by her husband on a regular basis. Due to the cultural beliefs of keeping family harmony in addition to ongoing threats posed by her husband, she awfully endured long-term physical and emotional abuse for the sake of her own safety and that of her young children. From time to time, she personally witnessed her children being physically abused by their own father. Deng reported the violent act of her husband to the law enforcement, left

the family, and sought for help from others without any success. Living in constant fear and the feeling of powerlessness, Deng did not know what else she could do to avoid pain.

One night in October 1993, the husband was drunk and threatened to kill Ru Wen Deng, her parents, and her children. Out of extreme fear which turned to fury, she killed her husband while he was asleep to terminate the unending violence and abuse. The news shook the whole society to seriously examine the societal issue of battered women. It became the headline news on newspapers and TV talk shows at that time. Some strongly argued that her husband just drank too much alcohol that night which led him to lose his temper and flashed out on his family. Others blamed the law enforcement for their lack of exercising legal authority to protect women. Her case provided the initial ground for the whole society to openly and honestly face a hidden, long social issue – domestic violence. In fact, this issue should not be perceived as a private family matter. Later on, a designated research funding was awarded to a woman advocate group to conduct extensive research on domestic violence.

The traditional notion of family matters in Chinese society falls on the family itself. A common saying goes like this: "every family has its own struggles and unresolved matters." Therefore, it has been the responsibility of the family to resolve them, not the outsiders, including the law enforcement. The similar belief seems to hold true in South Korea (Chin, Lee, Lee, Sun, & Sung, 2012). The mixed notion of traditional belief of harmony in relationship with others keeps the law enforcement from executing judicial consequences, whereas keeping family matters from outsiders' intervention has prolonged the whole society to look into this issue. Due to the increased number of reported domestic violence cases, it is no longer a family affair that can be solved by the family itself behind the closed door. Consequently, domestic violence should not be understood as a private family matter anymore (Carkoglu et al. 2012) but rather a criminal act. To lower domestic violence cases in Taiwan, this requires intentional intervention made by the government through legal means to ensure the safety of women and children.

Following the shocking homicide case of Deng, local women's groups actively organize forum, conduct research projects, and sought support from the government to ensure the well-being of women and children from being victimized by abusers. Shockingly, another case enraged the entire society to a whole new level. Wen Ru Peng, a female lawmaker, well-known in Taiwan, was assaulted and killed by a taxi driver in November 1996. Women advocate groups organized various public protests to actively seek the support from every level of the government to pass a law to protect women. This horrific case along with the reactions of many parts of the society prompted the legislators and the government to seriously examine women's safety issues. Finally, the legislators passed Domestic Violence Prevention Act in 1998 to protect women and children from abusive and violent acts. After that, family matters can no longer be handled through violence by family members. The Act clearly declares that domestic violence is a crime that should be intervened by the law enforcers.

Implementation

Statistics provided by the Domestic Violence and Sexual Assault Prevention Committee of the Ministry of the Interior showed that only 9,498 persons reported domestic violence in 1999. After the full implementation of the law, the number of persons reported domestic violence soared to 92,733 (Annual Domestic Violence Incident Reporting Statistics, 2011). The number grew almost tenfold over 10 years. It is commonly known that the reported number of persons who were abused is lower than the actual number of persons who are abused because some of them are afraid of retaliation and family concerns.

Taiwan is still a patriarchal society that values men over women. After the Domestic Violence Protection Act was passed, it appears that women have the law on their side. Women who are abused

seem to be prevented from utilizing the law due to a fragmented, unresponsive justice system. When abused women bring lawsuits to a city court, they would have to overcome hurdles posed by prosecutors and judges to provide direct evidence or medical diagnosis from the hospital. To a point, many cases are determined to be private family matters instead of civil or criminal case. Part of the reason is that the abused woman is not able to provide direct evidence of the abuse caused by their husband. Under this system, children cannot serve as witnesses and the lawsuits cannot be won. Even if the abused woman does seek medical diagnosis in a hospital, the medical staff oftentimes is reluctant to document the actual cause of the abuse and who the abuser is without the actual proof of evidence. Most of the time, abused women choose not to disclose the real cause of the abuse for fear of retaliation from their husband.

Assessment

The government in Taiwan has approached domestic violence as social-political duty and a social welfare instead of a social issue (Chou, 2001). It is evident that Taiwan government situates domestic violence prevention at the level of the Ministry of Interior and treats it as an issue of social welfare (Chen & Deng, 1999). The way in which the government approaches domestic violence will influence how funding, services, and educational programs are implemented. The discontinuity between meeting the needs of abused women and providing adequate and needed services/programs still exists after the law was implemented.

The Domestic Violence Act specifies that various counties and cities should establish domestic violence prevention centers and provide services to the abused, including a 24-h hotline, 24-h emergency assistance, assistance in diagnosis and treatment, assessing injuries, gathering evidence and providing emergency accommodations, psychological counseling, financial services, legal services, schooling services, housing assistance, physical and mental treatment and consultation, and physical and mental treatment and consultation for the perpetrator. Currently, there are 25 sites in various counties/cities for accommodating abused women and their children. Currently, not all aforementioned services are provided in every city and country.

Secondly, various preservice and in-service domestic violence prevention training classes are offered to judges, prosecutors, and professionals who are working with abused women directly. The goal of these classes is for judges, prosecutors, and professionals to be sensitive when dealing with abused women in a professional manner to avoid inflicting more pain. Unfortunately, many of those who have gone through the training classes still hold the notion that domestic violence is a private family matter (Lou, 2007). In addition to the effect of holding a traditional notion toward domestic violence, many judges and prosecutors are overloaded with court cases which prevent them from attending domestic violence prevention trainings. In addition to training provided for judges, prosecutors, and professionals, domestic violence education is also offered to students. The Domestic Violence Protection Act encourages at least 2 h of education annually on domestic violence prevention from elementary school level onward (Chou, 2001). Although the general public is informed about domestic violence, individuals may not report suspected domestic violence case to the law enforcement because it is still perceived by many as a "private family matter."

Thirdly, strong stereotypes are held by certain people in Taiwan toward working-class individuals and aboriginals to be heavy drinkers. With low education attainment and high unemployment rates among blue-collar families and aboriginals, stress may build up which can lead to conflict and become violent among family members. The stereotypical perceptions toward blue-collar families and aboriginals can negatively influence how professionals work with abused women. Unfortunately, it can be

highly possible that social workers may turn down abused women for services or programs if they "assume" domestic violence is the norm of their family life.

Fourthly, when a woman is abused in daylight, no passersby or police would lend a hand as long as the abuser claims that she is his wife. Abused women are often labeled, making people assume that they provoke their husband's actions or committed adultery. Since it is a family affair, most people would not intervene, including law enforcers.

Finally, men in intimate relationship need to be educated on how to manage their anger and conflict in a nonviolent manner. From childhood to adulthood, men need to be socialized in healthy ways and manners and to interact with women in a respectful way. By so doing, the traditional notion of women, particularly the wife, as the asset of the husband can be changed.

Family Education Act

Taiwan is a country where family relationships and harmony are greatly emphasized and valued over the individual well-being (Lin, 2003). The concept of healthy family life prevails in various forms of dialogue through schools, TV programs, or discussion forums. In the 1980s, counseling received increased attention among professionals as a method to deal with family matters. Unfortunately, many individuals or families who held a traditional family view felt uncomfortable to disclose family issues to professionals who were commonly perceived as outsiders (Lee & Sun, 1995). In fact, the act of disclosing family problems is understood to bring shame and disgrace to the entire family. As a result, the belief to avoid discussing family problems with outsiders is deeply embedded and can somewhat affect the effectiveness of counseling. Despite the fact that many marriages could be strengthened through counseling, the reality turned out that it was not widely sought out. In the 1990s, family education centers were established at the city level throughout Taiwan. The approach of each center in their service has shifted from intervention to more prevention-oriented (Chou, 2006). The general public seems to feel more comfortable about family education programs through experiential activities and discussions to learn knowledge and skills to strengthen family relationships in a less intimidating environment. Participants can sit there to gain helpful knowledge without being singled out. By so doing, individuals do not need to disclose their own family problems, and yet knowledge and necessary skills may be obtained through experiential activities in the program (Duncan & Goddard, 2011).

In response to the structure of socioeconomic changes which results in rising social problems, the well-being of family life has been negatively affected. Consequently, the quality of family life is deteriorating in a rapid manner in Taiwan. With the increased national awareness for potential family crises, the existing public policies poorly prepare the society at all levels to handle family changes from both macro and micro levels. Scholars have raised concerns to lawmakers to come up with public policies to avoid large-scale social problems. As a result, scholars and professionals vigorously organized forums, conferences, and research projects that involved interested lawmakers from time to time in examining effective ways and yet being culturally sensitive to family life through best practice in family life education to ensure healthy family functioning for families in various stages of family development (Lin, 2001b). The legislators were informed to discuss a family education bill that would utilize available resources and also design necessary education programs/services from a preventative approach delineated by the National Council on Family Relations. The goal is to start family life education programs as early as for students in elementary schools and all the way to adulthood. As a long-term goal, the well-being of family life is not solely restricted to be the responsibility of each family in the familial context but rather being expanded beyond each family through collaborative effort of schools, community agencies, and local government (Bogenschneider, 1995). Eventually,

lawmaker Jiang along with 99 other legislators produced a draft of Family Education Act in 2002, attempting to present to the Legislative Assembly.

The bill was finally passed on January 7, 2003. This law involves seven aspects: (1) the purpose and scope of family education; (2) the central government agencies that are in charge of family education and their responsibilities; (3) guidelines and job description of family education centers at the local city level that promote and deliver family education services and program, and criteria of professionalism; (4) family education curricular contents, trainings for professionals, and promotion of family education services; (5) prioritization of target audience to receive family education services; (6) funding for family education services at all levels; and (7) collaborative effort between the central government agencies and family education centers at local city level to promote, deliver, and evaluate family education programs. Since Taiwan is the first country that enacts family education law for its people, specified action plans and responsibilities of seven aspects delineated in the law would take time to discover obstacles and best practices when programs are gradually implemented at all levels in the society. Taiwan needs to understand how much individuals, families, and the whole society embrace the notion of family education for a better life (Lou, 2007).

In the past, family education was traditionally classified in Taiwan by social contexts (i.e., family, school, and/or society) to deliver services and programs (Lin, 2003). Later on, it was determined that content areas of crucial skills were deemed more important as the core elements of family education. It is commonly known that necessary skills and knowledge for healthy family functioning include budgeting skills, good communication skills, satisfying marital relationship, and effective parenting education. Scholars and professionals working with families suggest that Family Education Acts should include the following domains of relationships: parent education, filial education, gender education, premarital education, martial education, ethics education, and family resource management (Hsieh & Huang, 2010). These topics need to be the skeleton of a potential family education bill which should be implemented at all levels throughout the entire country.

Implementation

On January 7, 2003, Taiwan was the first country in the world that passed Family Education Act. This monumental milestone in public policy to ensure healthy family functioning has become a reality for people in Taiwan. Professionals could use the content of the law as the agreed standards and guidelines to be the basis to promote the well-being of family life. Although it would not be considered as intrusive to talk about family matters in an educational setting, the issue lies at how receptive it is for the general public toward the family education law. The traditional private territorial understanding of family life now has culturally and legally shifted to the domain of public affair (Lin, 2003). The law has helped define and streamline family education programs/services to ensure quality and contents during and after program delivery. Chou (2006) argued that the implementation of family education law includes the following: focus on the life course of an individual and the family, meeting the needs of an individual and the family as the basis, continued collaboration of multidisciplinary efforts, establishing partnership of various nonprofit human services agencies, education-driven program/service contents, and professionalism of family life educators.

Professionalism is an ongoing process to ensure the qualification of professionals in a specified field. This is a crucial element because each city needs well-trained professionals to carry out this task. After the enactment of Family Education Act, family education begins a new phase of preparing professional development and training at the national level. In 2005, the Ministry of Education authorized Taiwan Council on Family Life Education to establish certification guidelines and criteria for the profession (Hsieh & Huang, 2010). Out of 688 applicants, 611 successfully were certified, among which 495 were graduates from colleges or universities with family education majors. The certification

of family life education in Taiwan will guard the quality of educators who are promoting healthy family functioning.

Assessment

First of all, each school from the elementary level to high school is encouraged to offer 4 h of family education each year in addition to programs offered by family education centers (Lou, 2007). However, the relationship between school and parents may still be weak which can make program implementation a challenge. Most parents continue to perceive schoolteachers as educators who disseminate book knowledge to children. It may be awkward for parents to switch their mind-set to approach some schoolteachers as family educators. In addition, many schoolteachers are not trained in family education and perceive program delivery/implementation as a cumbersome task (Hsieh & Huang, 2010).

Secondly, each local government is encouraged to offer 4 h of premarital family education classes to committed or engaged couples. Lou (2007) found that various local family education centers are understaffed and lack proper funding to implement family education programs and services to enhance individual well-being and strengthen family functioning. When funding becomes a problem, certain cities may not have adequate resources to offer preventative programs for couples who are about to get married.

Thirdly, it is a challenge to assess its effectiveness through local family education centers; particularly each center may deliver its own "preferred" programs. When programs do get to be offered through family education centers, not all the centers throughout Taiwan deliver the same program content which makes program evaluation a difficult job. When this is taking place, it is crucial to identify best practice of family education programs to ensure program quality and effectiveness. Even if a program is being evaluated, Bogenschneider (1995) argued that most programs measured individual outcomes rather than family outcomes. Furthermore, the central government should develop streamlined indicators of program evaluation to measure the effectiveness to determine program quality and future funding for each center or human service agency that works with families.

Fourthly, individuals and families that need family education the most do not participate or cannot be present due to lack of desire, mental health issues, long work schedule, and level of willingness (Lou, 2007). Participation of family education programs is voluntary in Taiwan. Although empirical findings show the benefits of taking part through programs, some individuals and/or families hesitate to take advantage of such programs. The government has come up with incentives to increase initial participation as well as participation in follow-up programs (Hsiah & Huang, 2010).

Conclusion

It is evident that Taiwan is a country where cultural tradition and values may be held strongly by the general public as well as the law enforcers when dealing with family matters. Although family matters were formerly handled in the private territory (Lin, 2003), they are now processed in public domain when negative family matters occur. Three major laws are identified as in-depth case studies in this chapter to learn how each law is presented from prevention-based and intervention-driven approaches. Taiwan has made significant and positive progress in these laws, and yet they are, by far, far from perfection. It is quite encouraging to see the advances of these laws. For example, divorce law allows divorcing couples to either process a divorce case through judicial divorce route or consensual divorce

manner. As stated earlier, cultural values and beliefs still dictate how court judges and mediators handle each divorce case. Chinese people believe that marriage is a jointed effort of two families instead of two individuals (Chou, 2008). As a result, the legal divorce itself creates detrimental outcomes to both families. Efforts will be employed to prevent divorces in order to maintain harmony and stability. Unfortunately, some couples who should have legally finalized their divorce cases were strategically reconciled by court judges or mediators to achieve social stability. On the surface, the divorce rate may remain stable, and yet unhappy and dissatisfied couples continue their life.

Given the cultural influence on family relationships in light of divorce cases, it gets much complicated when domestic violence is coupled with cultural myths because many do not see it as a criminal act. There are still a lot of obstacles to overcome in Taiwan so that the whole society will understand domestic violence and take it more seriously. Bogenschneider (1995) depicted that policymakers normally do not consult family authorities or examine findings from family research studies when enacting family policies. This is especially crucial when dealing with domestic violence issues. One thing may be considered is to implement family life education programs early on to school-age children as well as adults, so they understand the signs of domestic violence as well as how to prevent them from happening. Trained family life educators may present information and experiential activities on how to manage strong negative emotions in a constructive way.

In terms of family education law, Taiwan plays the role of a pioneer in nurturing individual well-being and strengthening family functioning. This is the road that has never been taken by other countries. It is extremely crucial to initiate research studies to measure the effectiveness of family education programs for both individual outcomes and family outcomes. The roadblocks that Taiwan has encountered and will face through executing the Family Education Act throughout the country at different levels will help other countries to avoid similar errors. It is highly possible that Family Education Act may require necessary amendments when professionals learn more about what is working. Bogenschneider and Cobett (2010) argued that "purposeful and intentional family policy complements the private contribution that families make to the public good" (p. 800). This statement sums up well what the government in Taiwan needs to strive for through collaborative partnership with school, community agencies, and family education centers to ensure individual well-being and healthy family life.

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Chapter 19

Family in India: Problems and Policies

J.P. Singh

Abstract During the last 100 years, enormous changes have taken place in the Indian family system. Changes in the traditional family system have been so enormous that the joint family system, which was once the characteristic feature of the Indian society, is steadily on the wane from the urban scene. In rural areas it is surviving in its nominal form as a kinship group only. Now the nuclear family has become the characteristic feature of the Indian society. Changes in the family system have given rise to various new problems and intensified some of the old ones. The state has always been sensitive to the problems of family. It is apparent from a variety of legislations enacted, amended, and implemented by the Government of India as well as the state government as and when necessitated. In particular, the Government of India has taken several useful legislative measures relating to widow remarriage, women's right to property, practice of child marriage, child labor, succession, adoption and maintenance, dowry, family court, dissolution of marriage affecting different communities, and most recently domestic violence, which have impacted the Indian family system in more ways than one. But the formulation of a single national policy, considering the large size and heterogeneity of a society like that of India, is really a difficult task. Barriers to the creation of a comprehensive national policy in India are intricate parts of Indian ethos and ideology. It is also true that the state does not have enough political will to do so for some political expediency.

Keywords Child marriage • Child rearing • Dowry • Divorce • Gender • Joint family • Patriarchy • Polygamy • Remarriage • Succession

For centuries the joint family system has been one of the salient features of the Indian society. But during the twentieth century, the Indian family system encountered and experienced considerable changes. Changes in the conventional family system have been so huge that it is steadily on the wane from the urban scene. There is absolutely no chance of reversal of this trend. In villages the size of joint family has been substantially reduced or is found in its fragmented form. Some have split into several nuclear families, while others have taken the form of extended or stem families. Extended family is in fact a transitory phase between joint and nuclear family system. The available data suggest that the joint family is steadily on its way out in rural areas too (Singh, 2004, pp. 134–140).

The joint family or extended family is surviving in its skeleton or nominal form as a kinship group in rural areas. The adults have migrated to cities either to pursue higher education or to secure more lucrative jobs or to eke out their living outside their traditional callings, ensuing from the availability

290 J.P. Singh

of better opportunities elsewhere as well as the rising pressure of population on the limited land base. Many of the urban households are really offshoots of rural extended or joint families. A joint family in the native village is the fountainhead of nuclear families in towns. Contrary to the earlier situation, these days in most cases, two brothers tend to form two independent households even within the same city owing to the rising spirit of individualism, regardless of similarity in occupation, even when the ancestral property is not formally partitioned at their native place.

With further industrial development, rural to urban migration, nuclearization of families, and rise of divorce rate, the proportion of single-member household is likely to increase steadily on the line of industrial West. This is believed to be so because the states, which have got a higher level of urbanization, tend to have a higher proportion of single-member households. As the process of family formation and dissolution has become relatively faster now than before, households are progressively more headed by relatively younger people. Census data from 1971 counts onward have clearly borne out that at the national level over three-fifths of the households are headed by persons aged less than 50 (Singh, 1984, pp. 86–95). There is every reason to believe that proportion of households headed by younger persons is likely to constitute a larger proportion than this in urban areas where the proportion of extended family, not to speak of joint family, is much smaller than that of rural areas.

In fact, the magnitude of changes that the Indian family has experienced over the period of the last century appears to be far greater than the expectations of most Indian sociologists and anthropologists. The virtual disappearance of traditional joint family from the urban scene; increase in the life expectancy of women from 23 years in 1901–1911 to 65 years (it is higher than that of men by about 3 years) in 2011; rise in the proportion of female-headed households; decrease in the average age of household heads; increase in the incidence of separation and divorce; greater tension and conflicts between wife and husband, parents and sons, and between siblings; increased freedom of marital choice; passing of child marriages; shrinking of kinship ties; continuous consultations between young sons and parents on familial matters; greater involvement of females in decision-making process; increase in the mean age at marriage of female from 13 years in 1901 to about 19 years in 2011; rise in the level of female education; and decline in total fertility rate from 4.9 in 1971 to 2.5 in 2011 are concrete and clinching evidence to suggest a whole range of changes in the family system – its structure, functions, core values, and regulative norms (Singh, 2004, pp. 129–166). In course of these changes, many new problems have surfaced, while some of the old ones, such as dowry, divorce, lack of intergenerational solidarity, problem of elderly, discord between siblings, and gender violence, have got further intensified.

Locus of Authority in Family

There was a time when, the authority within the family was primarily in the hands of family elders commonly known as *Karta* in Hindi. The general attitude of members of the family toward the traditional patriarch was mostly one of respect. Loyalty, submissiveness, respect, and deference over the household were bestowed on him. These attributes also encompassed other relationships in the family, such as children to their parents, a wife to her husband, and younger brothers to their older brothers (Gupta, 1978, p. 72). Within a household no one was supposed to flout the will of his elders. The father, or in his absence the eldest brother, was consulted on all important family matters like pursuing litigation in courts of law, building a house, buying and selling of property, and arranging marriages. The joint family did not allow the neglect or disregard of elders. The age-grade hierarchy was quite strong. Now the people of younger generation, particularly those with modern tertiary education, do not seem to show the same reverence which their fathers had for their parents or elders.

Among women, patriarch's wife was the paramount authority. In fact, women's position depended on the position of their husbands in the household. The wife of the household head was in charge of the household. Her word was law or at least had the same force. Her decisions were made for the entire family and not for the welfare of the individuals in it. Young women in the family were expected to be dutiful and obedient. Self-assertion, even in bringing up their own children, was blasphemy. Widows and those spurned by their husbands were assured of the family roof, though mostly as voiceless members.

Yet another interesting fact about the change in authority structure within the family is that about 10 % of all the households are headed by women. Most of the female household heads are usually independent and gainfully employed. In the absence of their husbands, either because of death, separation, transfer in job, or business engagement, women are themselves able to run the affairs of their family. Long-distance migration of men for employment is also an important reason for the emergence of such households. The phenomenon of female-headed household assumes significance in the Indian society because in the past when the joint family system was so preponderant, the female-headed household was quite an uncommon phenomenon.

According to the Census of India (2001) reports, of all the households nuclear family constituted 70 % and single-member or more than one-member households without spouse (or eroded families) 11 %. The extended and joint families or households together claimed merely 20 % of all households. This is the overall picture about the entire country, whereas in the case of urban areas, the proportion of nuclear family is somewhat higher still. The available data from the National Family Health Survey-1 of 1992–1993 (henceforth NFHS) suggest that joint family did not make up more than 5 % of all families in urban areas (Singh, 2004, p. 137). With further industrial development and rural to urban migration, nuclearization of families and rise in the divorce rate and the proportion of singlemember household are likely to increase steadily on the line of the industrial West. The transition of family from joint or extended type to nuclear type has led to waning of some old problems and emergence of new ones.

Prepuberty Marriage and Polygamy

Marriage, especially among Hindus, has been a universal institution propped by the system of religious belief. It is viewed as a sacrament and not as a contract. Besides being universal, it is also an inevitable institution. Hindu marriage is a lifelong commitment of one wife and one husband and is the strongest social bond that takes place between a man and a woman. The matter of concern is not that the universality or inevitability of the intuition has got religious overtone, but the practice of prepuberty marriage has been coming through the ages. It is indeed an archetypal institution of India. The young girls lived with their parents only till they reached puberty. Early marriage led to the problem of high fertility and also early widowhood because of high incidence of death rate. True, child marriages have been prevalent in many cultures throughout the human history, but they have gradually diminished with the rise in the level of urbanization, spread of secular education, and modernization.

The compelling factor accountable for the perpetuation of child marriage is the fact that virginity is considered to be the most crucial consideration for marriage. In conservative Hindu societies, any form of premarital sexual intercourse is still frowned upon and is considered an act destined to bring great dishonor and disrespect to the family. It is practically impossible for a known nonvirgin girl to find a partner from a traditional family, though there is no legal statute that explicitly requires virginity as a requirement for marriage. Hindus, especially of rural India, still strongly believe in the practice of endogamous marriages arranged by parents and other close kinsmen.

Of the total number of marriages performed in the country child marriage accounted for 6.5 % in urban areas and 21 % in rural areas at the 2001 census, while the median age at marriage for both

J.P. Singh

Hindus and Muslims is 16.7 years which is lower than all other communities by 2–3 years (NFHS-3, 2005–2006, p. 165). The National Family Health Survey-3 (p. 165) has also recorded that "more than one quarter (27 %) of the Indian women age 20–49 married before age 15; over half (58 %) married before the legal minimum marriage age of 18, and three quarters (74 %) married before reaching the age 20." The persistence of child marriages implies that laws prohibiting such marriages are not so effective.

In addition to the practice of child marriages, polygamy – polygyny in particular – has also been one of prominent features of the Indian society. The polygamous males often derive support from age-old scriptures and mythological stories. Those who have no son from the first wife tend to practice such marriages. The preference for son has been so strong because in a patrilineal society the son alone can continue the line of the family. Adopted son is no substitute. But the practice of polygamy, especially among Hindus, is on gradual disappearance with some exception of scheduled castes. Singh (1997, p. 7) has reported that out of 471 scheduled castes, "265 of the scheduled castes (35.2 %) allow polygyny." It does not, however, mean that all of them essentially practice polygyny. Under the Hindu Marriage and Divorce Act, 1955, and its further amendment in 1976, polygamy has been declared void in law. The scheduled tribes are somewhat different from others with respect to polygamous marriages. While monogamy is the predominant form of marriage among them, there are a large number of tribes practicing sororal polygyny and non-sororal polygyny (Singh, p. 8). Currently, polygyny is more frequent among Muslims than Hindus. Under the Muslim personal laws, a male can have three living wives at a time. With the rise in the level of literacy, the incidence of polygyny is, however, on decline even among the Muslims. This trend is likely to persist in the future.

Dissolution of Marriage and Remarriage of Divorced and Widowed

The dissolution of marriage has been quite uncommon and rare in India for a long time. Divorce rates in India are among the world's lowest. In case of any crisis or threat to stability of marriage, caste, community, and kinsmen tended to have played a dominant say. Despite all these, there has been a significant change in the views and attitude toward the sanctity of marriage in the recent past, especially in cities. Marriage is no longer held to be a "divine match" or a "sacred union." Now it is more like a transfer of a female from one family to another, or from one kinship group to another. The marriage is no longer sanctified as it was believed to be in the past and is viewed only as a bonding and nurturing lifelong relationship and friendship (Singh, 2008, p. 100). Anyway, Indian marriages are still largely resilient and lasting, whereas in many developed countries they seem to break up for seemingly trivial reasons. The Indian census data have revealed that only one out of 100 marriages ends up in divorce here. These days divorce rates in urban India are, however, slowly mounting. Rising individualism, resulting from modern industrial development, causes breakdown in the traditional institutions of marriage and family.

The Indian family is faced with a new kind of social and psychological constraints. The women, however, tend to be more concerned about their marriage than men, and in case of a problem, they are expected to go for counseling. They are expected to take the lead to resolve conflicts, and when they give up the effort, the marriage is generally all over. Let me quote my own observation made elsewhere in some other context: "Remarriage of divorced or separated women are quite difficult. Morality

¹ The term "scheduled caste" has been interchangeably used with the term Dalit in Hindi, and these terms include all historically discriminated lowest castes of India such as Shudras (untouchables). Scheduled castes are a mixed population, consisting of numerous castes from all over South Asia; they speak a variety of languages and practice a multitude of religions. They constitute a little over 16 % percent of India's total population. The scheduled castes population is broadly distributed across Indian states and districts. The Government of India has identified and put them under special schedule of the Constitution of India to give them preferential treatment for ensuring a faster pace development.

relating to sex is so highly valued that every male wants to marry a virgin girl only. In the past Hindus demanded pre-nuptial chastity on the part of both, but now it is by and large limited to female only. In fact, both boys and girls try to know secretly about each other's pre-marital sex life. Virginity is regarded as the girls' greatest virtue and symbol of respectability. To the surprise of many, a married woman is described as a 'second-hand-stuff' – an expression covertly pejorative of women. Under the circumstances remarriage of women is so difficult that annulment of marriage is a very hard choice or option" (Singh, 2008, pp. 101–102).

Patriarchy and Domestic Violence

Violence within family settings is primarily a male activity. The prime targets are women and children. The women have been victims of humiliation and torture for as long as we have written records of the Indian society. The increasing incidence of breakdown of joint family has provided greater space for domestic violence than before. Despite several legislative measures adopted in favor of women during the last 150 years, continuing spread of modern education, and women's gradual economic independence, countless women have continued to be victims of discrimination and violence in the country (Singh, 2002, p. 168). Domestic violence is a kind of assertion for the dominance of values of patriarchy. Women are subjected to violence to concede the superiority of men in society.

A study of five districts of the state of Uttar Pradesh has revealed that 30 % of currently married men acknowledge physically abusing their wives. Similarly, the multi-sectoral survey done by the International Clinical Epidemiologists Network (INCLEN) has reported that two out of every five married women reported being hit, kicked, beaten, or slapped by their husbands. About 50 % of the women experiencing physical violence also reported physical abuse during pregnancy (UNC, 1997). The recent survey data have shown that in India 33.5 % of women age 15–49 have experienced violence. Data have also shown that 85 % of ever-married women who have received violence since the age 15 have experienced it from their current husbands (NHFS-3, 2005–2006, pp. 498–500). These stark figures underline the fact that, although the home and community are places where women provide care for others, they are also places where millions of women experience coercion and abuse.

Child-Rearing Practices and Parental Leave

India is a multicultural country with a population of 1.03 billion according to the 2011 Census of India, and there are many different social groups with many different philosophies and practices regarding child rearing. Socioeconomic conditions and the traditional system of beliefs play a large part in the child-rearing practices in India. In general, Indian mothers enjoy much physical closeness to their babies. They often carry them close to their bodies and breastfeeding is the norm. Many Indian mothers or sometimes grannies massage their babies daily using either oil or ghee. Co-sleeping during the early years is another characteristic of the close mother-infant relationship.

Parenting and child-rearing practices in most of the major cities are not much different from those in the developed world. However, many of the rural areas in India, especially the more isolated ones, still use many such child-rearing practices which are considered either unsafe or unhealthy in the Western world – scarification, use of herbal remedies instead of medicines, regular use of opiates, breastfeeding for years or feeding growing infants only breast milk, etc. While childhood vaccinations for the major endemic diseases (smallpox, diphtheria, whooping cough, polio, etc.) are almost universal in urban areas, vaccination compliance is very spotty in many rural areas, largely for cultural/religious reasons, despite decades-long education and public information programs by the Indian government.

294 J.P. Singh

Indians believe that children are capable of learning from a very young age and that they must be given guidance. Obedience to authority, passivity, and interdependence are highly valued. Childhood is viewed as a sensitive time period where children are moldable. Thus, the environment, especially the parents, is believed to play an important role in child development. Discipline is often strict and children are taught to obey their parents. Mothers are the primary disciplinarians. Scolding, yelling, slapping, and spanking are considered appropriate and necessary for socializing children. Some mothers feel that beating should be used to punish the most severe offenses.

Since society is very male centered, this has led to a significant problem in gender distribution as women are often pressured to have male children. In 2010 the ratio of female to male births was around 900 females to 1,000 males, and the rate of female versus male survival to age six in India is around 825–1,000. These startling statistics point out the prevalence of both gender-selective abortion and female infanticide (or neglect resulting in early death) that still exists in India today (Singh, 2010).

A female child is often seen as a financial drain on a family. In addition to paying for her living expenses, the girl's family must pay for her wedding or dowry, but after she is married, all her future income goes to her new family. As a consequence, a boy is more likely to be well fed as well as receive schooling and health care. The deprivation of girls – through insufficient breastfeeding and denial of food and health care – leads to malnutrition and death.

Parental Leave – The Government of India has made legal provisions which prohibit employers from allowing women to work within 6 weeks after giving birth. A female employee is eligible for leave only if she worked for the employer at least 80 days during the 12-month period preceding the date of expected delivery. In the case of a stillbirth or miscarriage, 6 weeks of paid leave is required instead. Female employees of the Central Government of India receive 180 days of leave. They receive full payment of their salary for 12 weeks.

A male employee with less than two surviving children may be granted paternity leave for a period of 15 days during the confinement of his wife. It will not be debited to leave account and can be combined with any other kind of leave. It can be availed up to 15 days before or up to 6 months from the date of delivery of the child. If this leave is not availed within this period, it will be treated as lapsed. But there is no legal obligation for the private employer to grant any employee paternity leave. However, many organizations have started granting their employees paternity leave lately, more as a goodwill gesture.

Problems of Children

Children (persons aged 0–14), who comprise about one-third of the total population of the country according to the 2011 Census of India, are increasingly becoming more vulnerable despite more proactive role of the state because of rising vulnerability of the institution of family. The manifestations of these violations are very varied, ranging from child labor and child trafficking to commercial sexual exploitation and many other forms of violence and abuse. With an estimated 12.6 million children engaged in hazardous occupations (2001 census), for instance, India has the largest number of child laborers under the age of 14 in the world. In absolute term this figure must have gone beyond 12.6 million at the 2011 census count with the rise in India's population, but the actual figure is not yet available. Although poverty is often cited as the cause underlying child labor, other factors such as discrimination, social exclusion, as well as the lack of quality education or existing parents' attitudes and perceptions about child labor and the role and value of education need also to be considered.

The problems of children are so serious that thousands of children roam the streets of all the major cities around the country and receive neither education, proper food, clothing, nor a bed to

sleep in at night. Vagabond children numbering in millions in Indian cities who, in a true sense, neither belong to any family nor do they form any household. While systematic data and information on child protection issues are still not always available, evidence suggests that children in need of special protection belong to communities suffering disadvantages and social exclusion such as scheduled castes and scheduled tribes and the poor. It has been estimated that 46 % of children from scheduled tribes and 38 % from scheduled castes are out of school. The lack of available services as well as the gaps persisting in law enforcement and in rehabilitation schemes also constitute a major cause of concern. The children of poor families, especially those of artists, craftsmen, and other professions, are trained by their parents and elders of the family in their vocations such as weaving, tanning, sweeping, dyeing, hairdressing, painting, carpentry, and agriculture. A vast number of children grow up lending a helping hand to elders in their home industries. The practice of intergenerational transfer of traditional callings more or less is still continuing because of massive unemployment. Such kids who lack formal schooling, but working and specializing in some craft or their traditional callings, help them build a career for their survival.

The problem of child labor is quite conspicuous to the naked eyes in India. Its prevalence is clearly evident in the form of high workforce participation rate among children, which is higher than that of any other developing country. Poverty is the prime reason behind child labor in India. Unfortunately enough, whatever the meager income they are able to generate is absorbed by their families. Child labor is extensive with children under the age of 14 working in carpet-making factories, glassblowing units, and making fireworks with bare little hands. There are at least 44 million child laborers in the age group of 5–14. More than 80 % of them in India are employed in the agricultural and nonformal sectors, and many are bonded laborers, too.

Problems of Elderly

According to the 2011 census, the elderly people (60+) constitute about 10 % of the total population of India which refers to a huge number in an absolute term. The family has started facing a new kind of problem of ageing, resulting from a relatively faster pace of demographic transition. The incredible increase in life expectancy may be a big triumph of the twentieth century, but it has posed one of the toughest problems before the twenty-first-century India. Census reports have recorded that the Indian population approximately tripled during the last 50 years, but the number of elderly people had in fact increased more than fourfold. Based on the continuation of the trend, the United Nations has predicted in one of its reports that the Indian population would again grow by 50 % by the middle of this century, whereas the elderly population is likely to have another fourfold increase in its size (UN, 2008).

It is estimated that during the next five decades, the size of total population would grow by about 50 %, while the number of older people would increase fourfold. The proportion of older people in the population would grow at a higher pace than the other groups. It is estimated that the elderly

²Child labor is not child work. Child work can be beneficial and can enhance a child's physical, mental, spiritual, moral, or social development without interfering with schooling, recreation, and rest. Helping parents in their household activities and business after school in their free time also contributes positively to the development of the child. When such work is truly part of the socialization process and a means of transmitting skills from parents to child, it is not child labor.

Child labor is the opposite of child work. Child labor hampers the normal physical, intellectual, emotional, and moral development of a child. Children who are in the growing process can permanently distort or disable their bodies when they carry heavy loads or are forced to adopt unnatural positions at work for long hours. Children are less resistant to diseases and suffer more readily from chemical hazards and radiation than adults. UNICEF classifies the hazards of child labor into three categories, namely, (i) physical, (ii) cognitive, and (iii) emotional, social, and moral.

J.P. Singh

people (60+) would constitute 20 % of the total population by the middle of this century which would be quite huge in terms of absolute number – 316 million. The Indian policy makers must take a critical note of the rising trends of incoming age wave of older people and the declining trend of the proportion of younger people. Such developments would cause strain on the resources, following increase in more inactive people.

In the past the elderly played a significant role in decision making regarding household matters, while the younger people were entrusted with the responsibility of ensuring well-being of their ageing parents. But these days in smaller families, they are gradually marginalized in the decision-making process. Hence, the family that traditionally took care of the elderly or sick, widows, and orphans is beginning to rely on society as a whole. As the number of old persons is rising and the social environment is changing, the proportion of the destitute among them may also be increasing (National Human Development Report, 2001).

It is clearly evident from the NFHS-2 (1998–1999) data that over 80 % of the elderly people live with their sons, daughters, or other kinsmen. An elderly person living alone does not constitute more than 5 %, while the elderly couples living independently of any young person in the household are not more than 10 % of the total households at any age between 60 and 80 years. However, this scenario may not last very long because a similar set of data derived from the NFHS-3 has recorded a slightly lower percentage for elderly people living alone or independently of others in a household. As a consequence of the breakdown of traditional joint and extended families, the elderly people are being steadily marginalized in society generally. Moreover, due to some habits and unhealthy lifestyles, the elderly people tend to suffer from tuberculosis, asthma, cancer, cardiovascular problems, etc., apart from the other gerontological problems. But the health-care facilities for the aged people are very poor or inadequate.

It is high time that the Indian policy makers assess the impact of the forthcoming age wave. The process of pension sector reforms should be accelerated, suitable steps should be undertaken to build the required health-care facilities, and a suitable social security system should also be designed. If change is not effected, the family support system as well as the state-sponsored facilities may crash in the near future, thereby jeopardizing the well-being of elderly people.

State Intervention and Family

The Government of India has taken several useful legislative measures relating to widow remarriage, women's right to property, practice of child marriage, child labor, succession, adoption and maintenance, dowry, family court, dissolution of marriage affecting different communities, and most recently domestic violence, which have impacted the Indian family system in more ways than one. It is, however, recognized that the formulation of a single national policy given the large size and heterogeneity of a society like that of India is really a difficult task. Barriers to the creation of a comprehensive national policy in India are intricate parts of Indian ethos and ideology. This is perhaps the important reason why India has not so far succeeded in evolving a common civil code despite public demand for it through various social and political fora in the recent past. Muslims, who comprise 12.4 % of India's population, are opposed to the idea of a uniform civil code in the country.

The state's sensitivity to the problems of family is apparent from various legislations enacted, amended, and implemented by the Government of India as well as the state governments as and when necessitated. They are together called family laws. Family law is that area of law which deals with family-related issues and domestic relations including the nature of marriage, civil unions, and domestic partnerships; issues arising during marriage, including spousal abuse, dowry, legitimacy, adoption, surrogacy, child abuse, and child abduction; and the termination of the relationship and ancillary

Marriage, divorce, Property, succession, Immoral traffic, dowry, domestic Relating to remarriage maintenance, adoption violence, child labor General population The Native Marriage The Hindu Minority and The Suppression of Immoral Traffic in Women and Girls Act, 1872 Guardianship Act, 1956 Act, 1886, 1956, and 1978 The Child Marriage The Indian Succession The Dowry Prohibition Act, 1961 Restraint Act, 1929, Act, 1925 and 1986 1949, 1955, and 1978 The Special Marriage The Child Labor Prohibition and Act, 1954 Regulation Act, 1986 The Domestic Violence Act, 2005 Hindus The Hindu Widows The Hindu Women's Right to Property Act, 1937 Remarriage Act, 1856 and 1956 The Hindu Succession Act, The Anand Marriage Act, 1909 1925, 1956, and 1991 The Hindu Marriage and The Hindu Adoptions and Maintenance Act, 1956 Divorce Act, 1955 Minorities The Muslim Women The Native Converts' Marriage Dissolution (Protection of Rights Act, 1866 on Divorce) Act, 1986 The Indian Divorce Act. 1869 The Indian Christian Marriage Act, 1872 Kazis Act, 1880 The Parsi Marriage and Divorce Act, 1936

Table 19.1 Important legislations concerning family formation and family dissolution in India

matters including divorce, annulment, property settlements, alimony, and parental responsibility orders. The following legislations are an important part of the Indian family laws.

The Foreign Marriage Act, 1969

In addition to those mentioned in Table 19.1, most states of the Indian Union have got their own family laws more or less on the line of these legislations, considering the significance of local practices and the system of belief. It may, however, be recorded here that though most of these laws have been framed to shield the interests of women, yet in varying degrees the personal laws of different religions subvert women's right to equality guaranteed under the Constitution of India. In the following discussion, an effort is made to explain as to how the government has responded to various problems that have been encountered by family in India.

Remarriage of Widows – For long, Hindus believed that Hindu widows once married were incapable of contracting a second valid marriage, and the offspring of such widows by any second marriage were held to be illegitimate and incapable of inheriting property. The Widow Remarriage Act was passed in 1856, prohibiting enforced widowhood practiced mainly among Brahmins and a few other castes such as Rajputs, Banias, and Kayasthas. The law was also designed as a relief for child widows whose husbands died before consummation. The Act was further amended in 1956 to incorporate certain provisions in favor of second marriage. This was done with a view to promoting good morals and to ensure the public welfare. All rights and interests which any widow may have in her deceased husband's property by way of maintenance or by inheritance to her husband or to his lineal successors would cease on her remarriage. Yet the problem of young widows in India has not vanished. Currently widows account for 9 % of the female population, and only 40 % of them are over 50 years of age. This suggests that

298 J.P. Singh

despite laws 60 % of widows do not contract second marriage for one reason or the other. Dreze (1990) has contended that the overall incidence of widow remarriage is as low as 1 in 5 or 6. Chen (2000) has reported that only few widows remarry in India. Within her sample of 562 widows, she has argued that the widow remarriage rate is about 9 %. The census data, however, have revealed that widow remarriage rate has been on the gradual rise, especially in towns and cities.

Child Marriage Restraint Act – Both during ancient and medieval periods, child marriages were widely prevalent in India. The young girls lived with their parents till they reached puberty. The child widows were condemned to a life of great agony, shaving heads, living in isolation, and shunned by the society. Hence, the child marriage was outlawed in 1869 through the Indian Penal Code. The first law addressing child marriage was the Native Marriage Act, 1872, which was promulgated by the British colonial regime and fixed 14 as the age of consent to marriage. The Child Marriage Restraint Act, 1929, was passed during the tenure of British rule and in order to incorporate some necessary changes and also to raise the age at marriage to 18 for girls and 21 for boys, and it was amended in 1949, 1955, and 1978. The object of the Child Marriage Restraint Law of 1929 was to eliminate a practice which was potentially detrimental to the life and health of a girl child. Yet the child marriages, as said before, are still widely practiced in India. According to the 2001 census, out of 593 districts in the country, there are 190 districts where the mean age at marriage of females is less than 18 years. The 2011 Census has recorded marginal improvements in the child marriage scenario. The persistence of child marriages implies that laws prohibiting such marriages are not so effective. The state machinery is not so efficient or successful in tackling such a serious social evil because of poor regard for law generally. According to the "National Plan of Action for Children 2005" (published by the Department of Women and Child Development, Government of India), a goal has been set to eliminate child marriage completely by 2010, but till date there is no great improvement worth recording.

Dowry Prohibition Laws – Dowry has become the most essential consideration for marriage of girls in recent years.³ Initially it was prevalent in North India only, but in course of time it has gained social legitimacy all over the country cutting across boundaries of caste, community, and region. Dowry has become such an essential consideration for marriage that rarely any marriage can take place without it. It may be regarded as a functional imperative for family formation in contemporary India. In a very rare case, the demand for dowry is really eschewed. Marriage negotiations tend to break down if there is no consensus between the bride's and bridegroom's families regarding the mode or amount of payment of dowry.

With a view to eradicating the rampant social evil of dowry from the Indian society, the Parliament passed the Dowry Prohibition Act in 1961 which applies not merely to Hindus but to all communities like Muslims, Sikhs, and Christians. Giving, taking, and demanding dowry is a criminal offense under the Dowry Protection Act and the Indian Penal Code. Under the Dowry Prohibition Act, only Metropolitan Magistrate or the Magistrate of the first class is competent to try these offenses. Where any person is prosecuted for taking or abetting the taking of any dowry or the demanding of dowry, the burden of proving that he has not committed an offense shall be on him. The giving, taking, or even abetting to give or take dowry amounts to an offense punishable with imprisonment for not less than 5 years and with fine which shall not be less than Rs. 15,000/- or the amount of value of the dowry, whichever is more. If any person demands directly or indirectly, from the parents or other

³The practice of dowry has become the archetypal institution of modern Indian society. Being an important precondition, the process of dowry giving or taking commonly precedes the actual ceremonization of marriage, and in some cases dowry and its problems also continue in one form or another beyond the actual event of the ceremony. To be capable of offering or meeting a big amount of dowry to marry one's daughter or sister, or to be eligible to ask for a hefty dowry for the sake of marrying one's son or brother, is a matter of social pride. These days, dowry is taken as an important indicator of the social honor of family in the community. The dowry has become a status symbol in view of the rising economic prosperity of the people (Singh, 2005, pp. 199–220).

relatives of a bride or bridegroom, as the case may be, any dowry, he shall be punishable with an imprisonment for a term which shall not be less than 6 months but which may extend to 2 years and with fine which may extend to Rs. 10,000/-.

The Indian Penal Code provides that where any women dies an unnatural death within 7 years of her marriage and it is shown that she was harassed or subjected to cruelty by her husband or his relative for dowry, such death shall be called a dowry death. The husband or the relative shall be deemed to have caused the death of the women. The offense is punishable with imprisonment of not less than 7 years. Whoever, being a husband or relative of the husband, subjects such women to cruelty shall be punished with imprisonment for a term of 3 years. Despite such stringent laws dowry is being increasingly practiced throughout the country. It has assumed such an alarming proportion that the number of cases of bride burning and bride torture, both mental and physical, in law courts is rising, and the media are agog with ever-increasing number of such instances. This is a reflection of a very serious kind of lapse on the part of the state machinery.

The disturbing fact about dowry-related violence is that it is not confined to any particular group, social stratum, geographical region, or even religion. Rather, it is regarded as a universal phenomenon, cutting across all sorts of sociocultural and geographical boundaries. The most disturbing aspect of it is that it is on continuous rise in the country. It has been often reported that like clockwork every 12th hour, a dowry-related death claimed to have taken the lives of over 20,000 women across the country between 1990 and 1993. It has also been reported that at least three girls are burnt for dowry-related demands every day in the state of Karnataka. This may be taken as a matter of grave concern, since the incidence of dowry death is one of the typical problems of the Indian society (Singh, 2005, pp. 199–220). It is not a matter of surprise that those who have got sons or greater number of sons than daughters tend to have developed vested interests in the perpetuation of such a hurtful practice.

Laws of Divorce – As per the ancient Hindu laws, there was no place for divorce, and it was with the codification of Hindu law that the first grounds for the new age laws were laid down. All major religions have their own laws which govern divorces within their own community, and separate regulations exist regarding divorce in interfaith marriages. Hindus, including Buddhists, Sikhs, and Jains, are governed by the Hindu Marriage Act, 1955; Christians by the Indian Divorce Act, 1869; Parsis by the Parsi Marriage and Divorce Act, 1936; and Muslims by the Dissolution of Muslim Marriages Act, 1939, which provides the grounds on which women can obtain a divorce, and the uncodified civil law. Civil marriages and intercommunity marriages and divorces are governed by the Special Marriage Act, 1956. Other community-specific legislation includes the Native Converts' Marriage Dissolution Act, 1866, that allows a Hindu to appeal for a divorce if a spouse converts to Christianity.

In most Western nations, there are approximately 16 distinct reasons for which divorces are granted. In India, however, only five main reasons are generally accepted as sufficient grounds for divorce: (1) adultery, (2) desertion, (3) cruelty, (4) impotency, and (5) chronic disease (Choudhary, 1988; Diwan, 1983).

The women, having being given in marriage by her father or other guardian before she attained the age of 15 years, repudiated the marriage before attaining the age of 18. The Muslim Marriage Act, 1939, restricts Muslim women's right to seek divorce by placing conditions that did not exist in Islamic law and are difficult to prove, such as cruelty and impotency. But a Muslim man has the right to unilateral divorce of triple *talaq*. Polygamy among Muslims continues to remain an issue. While under the Hindu Marriage Act, 1955, polygamy has been declared illegal. Muslim personal law makes the man the sole guardian of a child.

While the Indian intelligentsia often feels that one should have the right to divorce, it is still a highly stigmatizing action. Women are looked upon more harshly than men in this regard. There continue to be segments of Indian society that feel divorce is never a right option, regardless of how abusive or adulterous the husband may be which adds to the greater disapproval for women. A divorced woman often can return to her family, but may not be wholeheartedly welcomed. There is also the risk that a divorced woman's presence would ward off possible marriages for other daughters within the household. Unavoidably, the overall status of the family and household is lowered by having a divor-

J.P. Singh

cee living with among them. A woman's class and caste are a major factor in her acceptance back into society. Women from higher classes tend to have an easier time than middle- or lower-class women in returning to the social order after a divorce. An exception to this model is the extreme bottom of the society who has experienced little rebuff from peers after a divorce. This results from their already atypical status in society (Choudhary, 1988; Diwan, 1983). For these reasons, among some other factors, the divorce rate is about 1.0 % here according to the 2011 Census of India.

Succession and Right to Property – As India has been a highly patriarchal and patrilineal society since ancient days, the Indian women, same as men, never enjoyed the right to be a coparcener in the property of an undivided family or had no right to succession. In order to enhance the position of women in society and extend a sense of dignity in their life, the necessity for laws relating to succession was realized, though the realization was quite late. Under the Indian Succession Act, 1925, everyone was entitled to equal inheritance, except Hindus, Sikhs, Jains, Buddhists, and Muslims. For these communities, excluding the Muslims, a separate legislation known as the Hindu Succession Act, 1925, was introduced. In view of certain shortcomings or limitations, it was amended in 1956 and 1991. Under this Act the Hindu women, along with women of some other communities, had an equal right to parental property in the absence of a will, but the women tended to forgo their right at the time of marriage possibly accepting dowry as a compensation for a share. Women were also reluctant to exercise their right for fear of causing a breakdown in the relations with their natal family.

The Hindu Succession Act, however, makes provision for a Hindu undivided family to ensure that property remains with the male line of descent. A son gets a share equal to that of his father; a daughter gets only a share in her father's share. She cannot reside in the family home unless she is single or divorced and cannot claim her share of property as long as the men of the family continue to live in it. And a Hindu woman has no right to her matrimonial home, unless she can prove that it was purchased with her earnings. However, this law could not do the needful as there was another law the *Mitakshara* coparcenaries (Hindu Law) that had an overriding effect on entitlement of women. According to *Mitakshara* coparcenaries, in a joint family, a daughter had a much smaller share of property compared to the son. If the family owned a dwelling house, then the daughter's right was confined only to the right of residence and not possession or ownership.

Some Muslim laws have been nominally codified in the Shariat Act, 1937; the Dissolution of Muslim Marriages Act, 1939; and the Muslim Women (Protection of Rights on Divorce) Act, 1986. The Shariat Act states that Muslim personal law will govern Muslims and that law has priority over custom. In practice, personal law is based mostly on the interpretations of the Quran. There are four schools of jurisprudence and many more legal traditions, which produce different interpretations. Women's right to property under Muslim law does have *Quranic* sanctions but is limited to half of what their brothers get. However, the 1937 Act categorically denies women any right to agricultural land.

The Parliament of India passed the Hindu Succession (Amendment) Act, 2005, wherein daughters and sons have been given equal rights to property. According to this law, any woman, irrespective of the marital status, has full right to inherit ancestral property just like a son of the family. This law has completely abolished the Hindu Succession Act, 1956 by giving equal rights to daughters in the "Hindu Mitakshara coparcenary property," as sons have.

But the theoretical reforms so far have not been adequate to give all Indian women a right to property on the same footing and terms as men. It varies with region and religion. Even where law has given a right, conventions and practices do not recognize them. Women themselves relinquish their rights. Women, as daughters, wives, daughters-in-law, mothers, or sisters, tend to lose out and often suffer deprivation. There are numerous laws that forbid discrimination between the sexes, but in reality none are effective enough to actually bring about a revolution, a change in society. There is a need for legislation in Muslim law to give equal share of property to the widow and daughter along with sons as done in Turkey.

Right to Maintenance – Maintenance is a right to livelihood when one is incapable of sustaining one-self. Right to maintenance forms a part of the personal law. Obligation of a husband to maintain his wife arises out of the status of the marriage. Hindu law, one of the most ancient systems of law, recognizes right of any dependent person including wife, children, aged parents, and widowed daughter or daughter-in-law to maintenance. The Hindu Adoptions and Maintenance Act, 1956, provides for this right. Under the Hindu law, the wife has an absolute right to claim maintenance from her husband. But she loses her right if she deviates from the path of chastity. In assessing the amount of maintenance, the court takes into account various factors like position and liabilities of the husband. It also judges whether the wife is justified in living apart from husband. Maintenance is a right to get necessities which are reasonable from another. Maintenance includes not only food, clothes, and residence but also the things necessary for the comfort and status in which the person entitled is reasonably expected to live. Right to maintenance is not a transferable right.

Apart from the close kinsmen of husband and wife, other relations in which there is economic dependency are also considered to be entitled to maintenance under the Hindu Adoptions and Maintenance Act, 1956. Accordingly, a widowed daughter-in-law is entitled maintenance from her father-in-law to the extent of the share of her diseased husband in the said property. The minor children of a Hindu, whether legitimate or illegitimate, are entitled to claim maintenance from their parents. Similarly, the aged and infirm parents of a Hindu are entitled to claim maintenance from their children. The term parent here also includes an issueless stepmother.

Under the Muslim law, the Muslim Women (Protection of Rights on Divorce) Act, 1986, spells out objective of the Act as "the protection of the rights of Muslim women who have been divorced by, or have obtained divorce from, their husbands." The Act says that divorced woman is entitled to have a reasonable and fair provision and maintenance from her former husband, and the husband must do so within the period of *idda*, and his obligation is not confined to the period of *idda*. This Act inter alia provides that a divorced Muslim woman is entitled to (a) reasonable and fair provision and maintenance to be made and paid to her within the period of *idda* by her former husband; (b) where she herself maintains children born to her, a reasonable and fair provision and maintenance to be made and paid by her former husband for a period of 2 years from the respective dates of birth of such children; (c) an amount equal to the sum of *mehr* or dowry agreed to be paid to her at the time of her marriage or at any time thereafter according to the Muslim law; and (d) all property given to her before or at the time of marriage or after her marriage by her relatives or friends or by husband or any relatives of the husband or his friends.

Under the Christian law a woman can claim maintenance from her spouse through criminal proceeding or/and civil proceeding. Interested parties may pursue both criminal and civil proceedings, simultaneously, as there is no legal bar to it. In criminal proceedings, the religion of the parties does not matter at all, unlike in civil proceedings. If a divorced Christian wife cannot support her in the post-divorce period, she need not worry as a remedy is in store for her in law. Under the Indian Divorce Act, 1869, she can apply for alimony/maintenance in a civil court or High Court, and the husband is liable to pay her alimony such sum, as the court may order, till her lifetime. The Indian Divorce Act, 1869, which is only applicable to those persons who practice Christian religion inter alia governs maintenance rights of a Christian wife.

Laws of maintenance are of course in place, but they are not very effective and efficient in this part of the world. Laws do not always work for the poor or helpless. The state is often found indifferent to such people. The legal process is very tortuous and torturous here. Illiterate, semiliterate, and the poor woman can seldom dare to take recourse to the court of law. People often fail in their legal obligations to provide maintenance regularly and adequately to the divorced or separated wife, widows, and other dependents. It is often seen that women in difficult situations are usually helped or rescued by their parents rather than by the state. Sometimes certain parents are also either not inclined or in a position to help out such needy women. Since the single women have very little to fall back upon, marriages are relatively more durable here despite all odds.

302 J.P. Singh

Gender Inequality/Discrimination

In India, women were considered as an oppressed section of the society, and they were neglected for centuries. Hence, the Constitution of India has incorporated provisions to guarantee equality before law and equal protection of laws for all. Similarly, there shall be no discrimination against any citizen on the ground of sex. In fact, during the post-independent era, a number of laws have been enacted in order to provide protection to women, for instance, the Dowry Prohibition Act, 1961; the Equal Remuneration Act, 1986; the Hindu Marriage Act, 1956; the Hindu Succession Act, 1956; the Muslim Women (Protection of Rights on Divorce) Act, 1986; the Commission of Sati (Prevention) Act, 1987; and the Protection of the Women from Domestic Violence Act, 2005. But the laws are hardly implemented in letters and spirit. There is a massive and clinching evidence of gender bias in different walks of life. With respect to degree of prevalence of gender bias, India ranks 10th out of 128 countries of the world.

The sense of insecurity, humiliation, and helplessness always keeps a women mum. Our whole socialization is such that for any unsuccessful marriage which results in such violence or divorce, it is always the woman, who is held responsible. Cultural beliefs and traditions that discriminate against women may be officially discredited, but they continue to perpetuate at the grassroots levels. Family relations in India are governed by personal laws. The three major religious communities are Hindu, Muslim, and Christian, each having its separate personal laws. They, as said before, are governed by their respective personal laws in matters of marriage, divorce, succession, adoption, guardianship, and maintenance. In the laws of all the communities, women have fewer rights than that of men in corresponding situations. It is really depressing that women of the minority communities in India continue to have unequal legal rights and even the women of the majority community have yet to gain complete formal equality in all aspects of family life. This is basically the problem of gender inequality based on religious belief.

Several legal reforms have taken place since independence in India, including on equal share of daughters to property. Yet gender equality with respect to succession or right to property remains illusive. Establishment of laws and bringing practices in conformity thereto is necessarily a long-drawn-out process. The government, the legislature, the judiciary, the media, and civil society have to perform their roles, each in their own areas of competence and in a concerted manner for the process to be speedy and effective.

Domestic Violence Laws

The Domestic Violence Act, 2005, has concretely dealt with the problem of domestic violence taking into consideration all the related laws and has attempted to reduce the numerous ancillary problems generally faced by such legislations. This legislation is well placed in the Indian context and social scenario, clearly reflective of the mind-set of the Indian men. The Act is thus a very vital piece of legislation from the feminist point of view. The occurrence of domestic violence against women arises out of the patriarchal setup, the stereotyping of gender roles, and the distribution of power, real or perceived, in society. Following such ideology, men are believed to be stronger and more powerful than women. They control women and their lives and as a result of this power play, they may hurt women with impunity. The Domestic Violence Act was passed in furtherance of the recommendations of the United Nations Committee on the CEDAW (Convention of the Elimination of All Forms of Discrimination Against Women). The Domestic Violence Act promotes the rights of women guaranteed under Articles 14 and 15 of the Constitution of India. Domestic violence is one among several factors that hinder women in their progress, and this Act seeks to protect them from this evil. The Act deals with various forms of abuse that were either not addressed earlier or that were addressed in ways not as broad as done here.

This piece of legislation has been long overdue. It is a comprehensive law and addresses all issues related to women. It is for the first time that an Act has been passed to address women's issues in such detail. The Domestic Violence Act is indeed a very progressive legislation because it not only recognizes women who are in a live-in relationship but also extends protection to other women in the household, including sister and mother, and thus the Act includes relations of consanguinity, marriage, or through relationships in the nature of marriage, adoption, or joint family; thus, "domestic relationships" are not restricted to the marital context alone. In addition to physical violence of beating, slapping, hitting, kicking, and pushing, the Act also covers sexual violence like forced intercourse, forcing his wife or mate to look at pornography or any other obscene pictures or material and child sexual abuse. Another good thing about the Act is the fact that it deals with domestic violence regardless of the religion of the parties, as many times wrongs are perpetrated (ab)using the protection afforded by personal laws. It is thus secular in outlook in protecting women's rights. The new law also addresses sexual abuse of children and forcing of girls to marry against their wishes. This certainly proves that the new Act has been formed keeping the current relationship culture in India and the irregularities in the previous domestic violence laws in mind. It is, however, too early to predict the usefulness of this legislations to its target beneficiaries and the society as a whole.

Conclusions

The rise in the number of single-member household, breakdown of traditional joint family system, increase in incidence of divorce, individual male migration to cities for work, erosion of authority of patriarch, the attrition of traditional family values, increase in the number of working mothers in cities and single parents, rise in domestic violence and practices of dowry, neglect of children and elderly, and poor regard for family laws are enough indications of the danger that the family and ultimately society are progressively facing in India. To combat the continuing erosion of values and the institution of family, there is a need of a set of strong, consistent policies to strengthen the Indian family system. Otherwise, India would be left with no choice, but to face the same problems which are generally faced by many families of developed countries now. To be more specific, the family needs an increased support in the areas of child care, social services, income assistance, and health services than ever before. It is, however, recognized that the formulation of a comprehensive single national policy given the large size and heterogeneity of society like that of India is quite a difficult and cumbersome task.

At the same time, it is also recognized that the formulation of new norms for a desired type of family system based on modern values is perhaps fraught with serious problems of various kinds. The state may not have the required political will to do so for some political expediency or mileage. Since ours is a soft state, law does not always prove to be so effective, and hence, it may be difficult to regulate the Indian family system through a formal public policy. Increasing state intervention in an informal organization like family may be unpalatable to many, and it could be counterproductive as well. It is, however, not argued that the development of a national family policy would be an exercise in futility. In fact, in view of problems of various kinds and possible challenges of the future, there is a need of Family Policy Council in each state of India to conduct policy analysis, promote intergenerational solidarity, facilitate strategic leadership involvement, and influence public opinion. It should be an autonomous entity with no link with the state except for financial aid, and it should have a uniform purpose: helping family in responsible parenthood, serving as a voice for the family, and assisting advocates for family ideals who aim to recapture the moral and intellectual high ground in the public arena. It is recognized that under the prevailing circumstances the civil society can play a more crucial and effective role than the state. In any case, because of rising individualism, competitiveness, and openness in society and ever-increasing aspirations for higher attainments in life coupled with

J.P. Singh

greater autonomy of individuals in society, an ideal family life may be a distant dream. Wittingly or unwittingly, the people should by and large remain prepared to pay the likely prices of modern or postmodern way of life. Traditionalism is no answer, either.

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Chapter 20

Family Policy in South Korea: Development, Implementation, and Evaluation

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Abstract This chapter describes the sociohistoric context of Korean families and the policymaking process of family policy in South Korea (officially the Republic of Korea, Korea hereafter). Until very recently, Korean families, influenced by Confucianism, have been the primary safety net and care providers with little or no assistance from the government. Recent demographic changes including low fertility, an increasingly aging population, a decrease in marriage, and an increase in divorce and transnational marriages have all contributed to social problems which need a more comprehensive and universal family policy. Major amendments to the marriage law in the Civil Law have eliminated a traditional patriarchal headship system of the family and provided equal opportunity for male and female household headship. This law has also been amended to require divorcing couples to have a period of consideration and to come to a financial settlement for child support. In addition, there have been significant improvements in the family-work balance policy and elderly policy. The newly legislated Framework Act on Healthy Families and the Multicultural Family Support Act provide strength-based and preventive family programs and services to families. Special services for families at risk have been expanded to include low-income families, single parents, and families who have members with special needs or who struggle with domestic violence. Based on these achievements, we can conclude that significant progress in family policy has been made during the last 10 years in Korea. Nevertheless, family policy should continue to develop and be more carefully designed and implemented to encourage men to be more engaged in family life and to shift the strong Korean

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M. Chin et al.

work-oriented culture to a more family-oriented culture. Furthermore, an evidence-based policy should be sought to encourage positive effects and outcomes.

Keywords Aging • Asian Financial Crisis • Basic Old-Age Pension • Certified Healthy Family Specialist • Child-rearing allowance • Child care leave • Child care policies • Child care subsidy • Child support • Civil Law • Comprehensive family policy • Divorce law • Domestic violence • Elderly care • Elderly care services • Elderly policy • Evidence-based policy • Families with special needs • Family—work (balance) policy • Family-friendly social environment • Family-friendly work-place • Family law • Family life education and counseling • Family policy development • Family policy evaluation • Family policy implementation • Fertility • Flextime • Framework Act on Healthy Families • Gender equality • Healthy families • Healthy Family Support Centers • Korea • Korean families • Long-Term Care Insurance for Senior Citizens • Low-income families • Marriage law • Maternity leave • Ministry of Gender Equality and Family • Multicultural families • Multicultural Family Support Act • Multicultural Family Support Centers • On-site child care • Parental leave • Paternity leave • Policies for senior citizens • Reduced work schedule • Single-parent families • South Korea • The Republic of Korea • Transnational marriage • Universal family policy • Work time policies

The Sociohistoric Context of Families and Family Policy Development in Korea

Family Characteristics

Korean families today are changing more than any other period in Korean history. Like in other East Asian countries, Korean families have been strongly influenced by Confucianism. A key influence of Confucianism is familism which involves putting family first, respecting parents, continuing patrilineal family relationships, and socioeconomic ties among siblings and relatives. These ideals have been emphasized as family values from the mid-seventeenth century (Ok, 1989). Thus, Korean families have been the center of personal and social lives. Despite the rapid social changes in the last several decades, Korean families have continued to be the sole or primary support for family members in a private, often isolated sphere (Chang, 2009). In other words, Korean families, in particular women, have been responsible for child rearing and elderly care with little or no assistance from the government or other public entities (Lee, 2009).

The Asian Financial Crisis in 1997, however, brought about major changes in family characteristics in Korea. Demographic statistics quickly reveal these changes in families. First, the overall fertility rate decreased significantly from 1.54 in 1997 to 1.47 in 2000 and to 1.08 in 2005 (Korea National Statistical Office, 2007a). Similar to China, Japan, and other Asian countries that have been influenced by Confucianism, Korea traditionally had large families with the belief that many children, especially sons, were the source of good fortune (Shwalb, Nakazawa, Yamamoto, & Hyun, 2004). However, after the Asian Financial Crisis, the workforce was dominated by nonstandard workers, such as part-time and contract workers, so many young people who hoped to enter the workforce after graduation had considerable difficulty finding jobs and remained unemployed (Eun, 2011). Therefore, they delayed marriage. Because the only legitimately recognized family in Korea is through marriage and childbirth between married couples, the increasing age of the first marriage has meant a decreasing fertility rate.

A second social issue has been the increasing average life expectancy and the resulting need for improved living standards and medical care. Traditionally, Koreans honored a person's 60th birthday with a special celebration, called "return to the birth sexagenary cycle" (Park & Hong, 2012). This celebration represents the completion of a life cycle, because only a very fortunate few were expected to live to that age in the past. However, by 2000 Korea officially became an aging society with 7.2 % of the

population aged 65 and over, and this percentage is estimated to reach 14 % in 2018 and 20 % in 2026 (Korea National Statistical Office, 2006). As these projections suggest, in less than 30 years, Korea will have moved from an aging society to a super-aged society. In Korea, caring for elders has usually been considered the family's responsibility, because traditional Korean families functioned as a unit that protects and cares for all family members (Sung, 2011). Therefore, the increased average life expectancy has created an even greater burden for adult children who have to care for their parents even longer.

A third social issue has been the dramatic changes in marriage and divorce rates. Korea has maintained a strong norm that men and women should get married when they become adults. Because the passage from childhood to adulthood was included in a Korean traditional wedding ceremony, unmarried people have been considered "underage" (Park & Hong, 2012). Marriage has been recognized as a universal passage to adulthood. Another trait of Korean traditional marriage is that marital stability has been far more emphasized than the quality of the couple's relationship. A blessing to newlyweds was "Live until your black hair turns white as the root of a leek," not "Live happily ever after." Until the beginning of the twentieth century, the majority of marriages ended with the death of one spouse. Thus, the crude marriage rate (CMR), the number of marriages per 1,000 persons, remained high and the crude divorce rate (CDR), the number of divorces per 1,000 persons, remained low until the late 1990s; for example, the CMR was 9.4 and the CDR was 1.7 in 1996. However, after the Asian Financial Crisis in 1997, the CMR decreased to 2.3 and the CDR increased to 2.9 by 2004 (Korea National Statistical Office, 2005). As mentioned above, because unstable employment with unpredictable layoffs became common, it was not easy for a young man and woman to marry. In addition, the education level of Korean women rapidly increased and many of them strongly wanted to take jobs after completing their higher education. After the Asian Financial Crisis, Korean families experienced serious financial problems and conflicts over the economic issues. Although divorce was not traditionally allowed, Koreans accepted divorce as a less stigmatized option for an unhappy marriage.

A final social issue has been the increasingly large number of labor migrants and multicultural families formed by transnational marriages. Korea has been known as a ethnically homogeneous country for thousands of years and has maintained a strong ideology of one nation-state (Chin, Lee, Lee, Son, & Sung, 2012). However, in the early 1990s, the lack of rural marriageable men whom Korean women were willing to marry prompted the government to encourage transnational marriages between single men in rural Korea and women of Korean descent living in China (Choi, 2010). With this new policy in place, many Asian women came to Korea for marriage, bringing the transnational marriage rate up to 13.5 % of the total marriages in 2005 (Korea National Statistical Office, 2009). In conjunction with the increase in this population's marriage rate, their divorce rate increased as well. Divorces among transnational couples accounted for 1.2 % of the total divorce cases in 2002 but doubled to 2.4 % in 2004 (Korea National Statistical Office, 2007b). In this context, women who migrated for marriage often experienced marital and in-law conflicts including harassment discrimination due to cultural prejudice and various types of spouse abuse and violence (Women Migrants Human Rights Center, 2008).

The Influence of the Sociohistoric Context on the Social Policymaking Process

The Korean government was consistent in its efforts to maintain a highly family-dependent social policy system until the early 2000s. Until that time, the government had provided welfare services only to families that were not self-reliant. Welfare policies had assisted low-income and other needy families since 1961, and child care policies had supported low-income working families since 1991.

Policymakers, however, agreed on the urgency to improve the overall well-being of Korean families in the early to mid-2000s. Finally, the strong need for public response to family issues led to significant changes in family policy and the administrative branch related to families in Korea (Chin et al., 2012). In 2004, the Framework Act on Healthy Families (FAHF) was passed by the Korean National Assembly.

M. Chin et al.

In 2005, the Ministry of Gender Equality was then expanded to become the Ministry of Gender Equality and Family, which was the first government department in charge of family policy in Korea.

These changes in public policy and the government department have signified a new family policy paradigm in Korea. The new paradigm has operated under the strengths-based model, which assumes that when families' capacities are supported, they are more likely to act on their strengths (Saleeby, 1992). According to this model, the new paradigm has focused on universal coverage as opposed to means-tested services, social responsibility for family well-being as opposed to individual and family responsibility, family strengths as opposed to deficits in families, and prevention orientation as opposed to problem solving (Chin et al., 2012). The Korean government now provides general support for all types of families and encourages a family-friendly social environment and strives to support multicultural families.

Family Policy Development Frameworks: A Review of Family Policies in Korea

Marriage and Divorce in the Civil Law

In Korea, family law is published in the fourth part under the Civil Law and consists of seven chapters. Family law went through major overhauls in 2005 and 2007. In this process, family law specifically enhanced the articles that support gender equality, family members' independence, and child protection (Chung, 2010). In addition, a new family registration law was created as an alternative for the old law designating the head of household. These amendments strongly influenced the current laws about marital and parent—child relationships.

Marriage. Under current family law, the third chapter is the marriage law consisting of five sections about engagement, marriage, and divorce. Those who are 18 years old or older may marry, but minors and the incompetent must obtain the consent of their parents, guardians, or the family council. Polygamy and consanguineous marriage within the eighth degree of kin relationship are prohibited. According to the Family Relationship Registration Act, in order to legalize their marriage, a married couple must submit a signed family relationship registration form by both parties and two adult witnesses to the family registration office in their home province. A couple shares responsibilities for certain family obligations and living expenses and joint ownership of the property acquired during the marriage. Each individual also has a right to manage his/her own property acquired before marriage or the property acquired during the marriage in his/her own name. Major amendments to the marriage law in the Civil Law in 2005 have eliminated the traditional patriarchal headship system of family and provided equal opportunity for male and female household headship. Overall, the current marriage law respects privacy and personal decision making within marriage (Chung, 2010).

Divorce. Couples may divorce either by agreement or court order. Divorce by agreement can be achieved when a couple takes the following steps: (a) files for divorce, (b) attends a guidance counseling session provided by family court, (c) obtains the official confirmation of divorce, and then (d) submits the confirmation form to a family registration office within 3 months. In order to prevent impulsive divorce and protect the underage children's rights and best interests, the current law specifically requires couples who file for divorce to wait to obtain the court confirmation of divorce up to 3 months (1 month for childless couples and 3 months for those who have underage children) from the day of attending the court guidance session. In special cases, divorce can be achieved by court order. That is, a person may file for

¹This chapter is based on the family policies and programs that are effective as of August 2012.

divorce in family court without spousal agreement when there has been adultery, family violence, a missing spouse for 3 or more years, and other serious causes making it difficult to maintain the marriage. The couple can negotiate child support, custody, and visitation in compliance with the child care and parental authority laws. However, family court may change the agreement to meet the children's best interest. The child support implementation laws were further enhanced in 2009.

The Framework Act on Healthy Families and Healthy Family Services

The Framework Act on Healthy Families was established in 2004 as the first explicit family support policy in Korea (Chin et al., 2012). The purpose of this Act is to promote social responsibility for building and maintaining healthy families that support individual family member's needs, protect their rights, and improve their well-being. In particular, this Act explicitly addresses the responsibilities of national and local governments for promoting a democratic family environment, family-friendly social environment, and gender equality in families. This Act also emphasizes the importance of preventing family dissolution, maintaining family relationships through marriage and child birth, and building an informational infrastructure to support healthy families.

One of the important elements of the Framework Act on Healthy Families Act is to require local governments to provide comprehensive and preventive family services through Healthy Family Support Centers (HFSCs). Certified Healthy Family Specialists who have expertise in family services deliver various family services at these centers. As of 2011, 138 HFSCs with qualified specialists have been established across the nation and these centers are continuing to be established (Healthy Family Support Centers, 2012).

Family Life Education and Counseling. Local HFSCs provide family life education programs to help improve the quality of family life and prevent family relationship conflicts. The programs include specific programs throughout the life span of families (e.g., families with young children or adolescents and families in later life) and theme-specific programs (e.g., resource management, couple communication). HFSCs also offer education programs for fathers at their workplaces to increase fathers' participation in family life. In addition, local HFSCs provide on-site, phone, or online counseling services for family problems at no cost or a low cost. HFSCs also specialize in counseling and mediation for divorcing couples. Since recent changes in divorce law strongly encourage couples to engage in counseling before they file for divorce, family counseling is offered to divorcing couples in alliance with family court.

Family-Friendly Community-Building Programs. Promoting a family-friendly culture is one of the core missions of HFSCs. To do so, HFSCs provide opportunities for community residents to participate in family volunteer programs, family leisure programs, and self-supporting neighborhood programs. Local HFSCs also carry out national Family Day campaigns, which promote a family-friendly environment. These programs help families spend time with other families in the community as well as with own family members. Besides these services, local HFSCs provide publicly funded babysitting, integrated services for vulnerable families, and community network building that mobilize community resources.

Family-Work Balance Policies

Family—work balance policies have rapidly expanded since the mid-2000s in response to a paradigm shift in family policy toward a comprehensive approach (Chin et al., 2012). The main legislation of family—work balance policies is the Act on Equal Employment and Support for Work-Family Balance, which was reformed in 2007. Another piece of legislation that provides the legal foundation

M. Chin et al.

for family–work balance policies is the Act on the Promotion of the Creation of a Family-Friendly Social Environment, which was established in 2007 and became effective in 2008. The former legislation focused on supporting individual workers, and the latter focused on creating a family-friendly social environment in the workplace or community. Currently, the Ministry of Employment and Labor and the Ministry of Gender Equality and Family are in charge of implementing family–work balance policies in Korea.

Maternity Leave and Paternity Leave. Female employees are guaranteed access to 90 days of paid maternity leave before and after childbirth. Out of the 90 days, 45 days or more must be allocated after childbirth. Maternity leave takers in larger businesses receive wage replacement from their employers for the first 60 days and then from National Employment Insurance for the remaining 30 days. Workers in smaller businesses are paid from employment insurance for the entire 90 days of maternity leave. National Employment Insurance replaces wages for a monthly maximum of KRW 1,350,000 (approximately US\$1,350). Maternity leave has now become an established part of the workplace culture since the Labor Standards Act reform in 2001. The number of workers who have claimed maternity leave increased from 22,711 in 2002 to 90,290 in 2011 (Statistics Korea, 2012).

Male workers whose spouses give birth are granted 3 to 5 days of paternity leave during the first 30 days after childbirth. Paternity leave was established in 2008 and was extended in 2012 to paid leave for the first 3 days of the leave. Although the length of paternity leave is still restricted, the legal establishment of paternity leave had a symbolic meaning for Korean family policy as a social acknowledgement of the father's responsibility.

Child Care Leave. Following maternity or paternity leave, either parent with a child ages 6 years old or younger can take a maximum of one year of child care leave (also known as parental leave) in one or two blocks. The wage replacement rate of the child care leave from National Employment Insurance is at 40 % of the worker's previous monthly wages with a minimum of KRW 500,000 (approximately US \$500) and a maximum of KRW 1,000,000 (approximately US \$1,000). To receive the wage replacement, the worker must have paid the employment insurance premiums for 180 days or longer before the first day of child care leave. Each parent may claim a child care leave, but only one parent can receive wage replacement if they both take the leave simultaneously. The child care leave was introduced in 1987, but the number of employees taking the leave has risen only since 2001 when employment insurance began to provide wage replacement at a flat rate. The number of workers who claimed the child care leave benefit increased from 3,763 in 2002 to 58,137 in 2011 (Statistics Korea, 2012). Based on our calculation, about 16 % of maternity leave takers claimed the child care leave benefit for some period of time in 2002, but the percentage jumped to 63 % in 2011. However, only about 2 % of child leave takers were fathers in 2011, which indicates that it is far less likely that fathers use the leave.

Work Time Policies. Workers who are eligible for child care leave may choose to work on a reduced schedule instead of taking the full child care leave. Parents on a reduced work schedule can work less than 30 h per week but at least 15 h per week. Like child care leave, workers may take the reduced work schedule for up to 1 year in one or two blocks until the child's seventh birthday. Despite its introduction in 2008, the reduced work schedule was not mandated in Korea until 2012, and the reduced wages resulting from the reduced work schedule was partially replaced through National Employment Insurance.

The major barrier to family—work balance in Korea is the common workplace culture that expects employees to work beyond the normal 40-h work week. According to a report by the International Labour Organization (2011), Korea is one of two countries with the longest weekly hours of work among developed countries across the globe. This report documented that about 30 % of Korean workers worked more than 53 h per week in 2009–2010. To change this culture of long work hours, the Ministry of Gender Equality and Family introduced a Family Day campaign, which encourages workers to have family time every Wednesday after normal working hours instead of working overtime. However, substantial additional efforts are needed to change the workplace culture that takes overtime for granted.

Other Family–Work Balance Policies. In addition to leave and work time policies, the Korean government has begun to encourage a more family-friendly environment in the workplace and community through the Act on the Promotion of the Creation of a Family-Friendly Social Environment. A family-friendly work environment in this Act refers to a workplace that provides family-friendly workplace support policies, including (a) flexible work arrangements (e.g., flextime, telecommuting, part-time work), (b) child care and education support (e.g., paternity leave, child care leave, on-site child care, resource/financial support for child education), (c) other dependent care support (e.g., elderly care, family medical leave), and (d) employee support (e.g., health, education, and counseling programs).

Under the Act on the Promotion of the Creation of a Family-Friendly Social Environment, the Ministry of Gender Equality and Family has implemented the Family Friendliness Index (FFI) and Best Family Friendly Management accreditation to enhance social awareness of the importance of a family-friendly work environment. The FFI is an index that quantitatively measures how family friendly a workplace is by scoring the level of family-friendly workplace practices and culture. The FFI has been used in 1,500 workplaces since 2009 and the results are announced every year. Since 2008, the Ministry has granted Best Family Friendly Management accreditation to organizations that actively employ family-friendly workplace practices and management. The number of accredited organizations increased from 13 in 2008 to 95 in 2011 (Ministry of Gender Equality and Family, 2012a).

Child Care Policies

The Infant Care Act is the core legislation related to child care policies for children ages 0–5 years old, and the Ministry of Health and Welfare is in charge of these child care policies. Child care facilities and providers are largely in the private sector with a substantial increase in public support for parents through child care subsidies. Out of 39,842 child care facilities across the nation in 2011, most facilities were established in private or other non-government settings except for 2,116 publicly established facilities or approximately 5 % of the facilities (Ministry of Health and Welfare, 2011). The national child care accreditation program has been underway since 2005 to assure high quality of care at all child care facilities.

Child Care Subsidies. Families with young children are eligible for child care subsidies, which are paid to child care facilities as an electronic voucher, until the child reaches his or her sixth birthday. The eligibility criteria and the amount of the subsidy were significantly expanded particularly in 2012. For children ages 0–2 years old, all expenses for child care facilities are subsidized regardless of family income and assets. For children ages 3–4 years old, households earning 70 % or less of the average income among all households with children ages 5 years old or younger are eligible for the subsidies that the parents can use when they pay for child care facilities. All 5-year-old children are eligible for child care subsidies regardless of the family income through the *Nuri* Curriculum, a common curriculum that integrates child care and early childhood education. The *Nuri* Curriculum will be extended to children ages 3–4 years old in 2013.

Child-Rearing Allowance. The child-rearing allowance was introduced in 2009 to provide financial support for families that do not utilize child care facilities. Families earning no more than 120 % of the national minimum cost of living are eligible for the child-rearing allowance until their child's third birthday. This allowance is provided at a flat rate depending upon the child's age. Children with special needs or children in lower-income rural families are also eligible for the flat-rate child-rearing allowance until the child's fifth birthday.

Other Child Care Policies. On-site, nonprofit child care is mandated at workplaces hiring a total of 500 or more workers or 300 or more female workers. In 2012, the government began to announce an online list of workplaces that have not established on-site child care as a type of punishment. In addition

M. Chin et al.

to child care facilities, parents may use publicly funded babysitting services at home on a part-time or full-time basis. These services were introduced in 2007 as a backup child care arrangement when neither a child care facility nor the parents are available. The service fee varies depending upon household income and is categorized into four levels.

Policies for Senior Citizens and Their Families

The Korean government has introduced several Acts to support the elderly due to the increased number of senior citizens and the burden on their caregivers who are usually family members. The Act of Welfare of the Aged was first implemented in 1981 as the first legislation exclusively targeted to older Koreans. In 2005, the Framework Act on Aging Society and Population was established in response to the rapidly aging population. As a result of this Framework Act, the Korean government adopted a five-year Framework Plan on Aging Society and Population Policy with the goal of building a sustainable society by restructuring Korea's socioeconomic systems and establishing comprehensive policy plans. Following the first-stage plan (2006–2010) that aimed to build a fundamental basis for an aging society, the second-stage plan (2011–2015) is currently being implemented. During the first-stage plan, the Basic Old-Age Pension, Long-Term Care Insurance for Senior Citizens, and Elderly Care Services were introduced.

Basic Old-Age Pension. To support economic security among senior citizens, the Basic Old-Age Pension was introduced in 2008 based on the Basic Old-Age Pension Act. This Act is a noncontributory pension, paid monthly, for older Koreans whose incomes and assets are relatively limited. Since 2009, 70 % of all Koreans ages 65 year or older have been eligible for the pension depending upon their monthly incomes and assets.

Long-Term Care Insurance for Senior Citizens. The Act on Long-Term Care Insurance for Senior Citizens is a major accomplishment in the area of elderly care from a comprehensive perspective. This Act, passed in 2007 and implemented in 2008, aims to improve the well-being of older Koreans and to reduce the burden of care for their family members by providing universal care services regardless of income. Individuals who are 65 years old and over or those who are younger than 65 but suffering from a geriatric disease are eligible for the benefits from the Long-Term Care Insurance. To receive the benefits, the elderly person must fall between a grade of one (most severe) and three (moderate) on the on-site Long-Term Care Insurance needs assessment, which determines the person's needs for long-term care assistance with activities of daily living (ADLs). Once approved, the person receives mainly institutional care or home care depending upon his or her grade on the needs assessment. The institutional care benefits include a residential care subsidy when the elderly person is placed in a long-term care facility. Home care includes support for physical activities and housework, home bathing and nursing, day care centers, and assistance purchasing or leasing equipment.

Elderly Care Services. Older Koreans who live alone or who need assistance with activities of daily living are eligible for Elderly Care Services. These services consist of Elderly Care Basic Services and Elderly Care Total Services. Elderly Care Basic Services provide senior citizens living alone with regular safety checks, life education, and health and welfare services at no cost. Elderly Care Total Services is designed for older people who are not eligible for benefits from the Long-Term Care Insurance but still need some assistance with activities of daily living. Families earning less than 150 % of the average household income are eligible for Elderly Care Total Services. To receive these services, recipients' health needs to be classified into certain grades related to certain services on the Long-Term Care Insurance needs assessment. Elderly Care Total Services includes assistance with activities of daily living and care at home or at a senior day care facility. The service fee, paid as a voucher, is determined on a sliding scale based on the household income.

Support for Multicultural Families

As part of the initiation of developing and implementing multicultural policies, the Multicultural Family Support Act was established in 2008. Through three amendments, this Act has specifically focused on providing multidimensional, professional support for legal aliens and immigrants who marry Koreans and have children within these marriages. This Act aims to effectively deal with current social problems that many multicultural families are facing mainly due to their racial/ethnic backgrounds, language barriers, and cultural differences, resulting in successful acculturation and healthy family lives (Chin et al., 2012). To accomplish this goal, the national and local governments, Multicultural Family Support Centers (MCFSCs), and designated officials, professionals, and organizations are responsible for providing members of multicultural families with the necessary support.

The Korean government also provides customized services to multicultural families during the four stages of the multicultural families' life cycle. In the transnational marriage preparation stage, the Korean government strictly controls the matchmaking business to protect the human rights of marital immigrants and provides premarital education for the immigrants and their spouses prior to their entrance into Korea. During the early stage of multicultural family formation, comprehensive services are provided to the multicultural families through MCFSCs. To help multicultural families in their daily lives in Korea, a website (http://www.liveinkorea.kr) called "Danuri" provides information and knowledge to multicultural families in eight languages including Cambodian, Chinese, English, Filipino, Korean, Mongolian, Russian, and Vietnamese. The government also provides services and information in multiple languages regarding domestic violence, along with operating emergency centers and shelters for migrant women who are victims of violence. In the child-rearing and adaptation stage, various parenting support programs are available to multicultural families with children including parenting education, language education for children, and child life care services for children who have low academic achievement or experience difficulties in emotional or social development to help the parents in child rearing and increase parental competence. In the final stage of capacity building, services including vocational training and self-support groups are provided to help multicultural families become economically and socially independent.

Policies Supporting Families at Risk

The Korean government has provided welfare services to low-income and other needy families since the early 1960s. However, family policies have gradually expanded for vulnerable families including low-income families, single-parent families, families with special needs, and families living with domestic violence.

Support for Low-Income Families. The main antipoverty legislation, the National Basic Livelihood Security Act (NBLSS), was reformed in 1999 and went into effect in 2000. This Act was designed to establish a national minimum income level of Koreans regardless of age, gender, and ability to work, unlike the former Act that only covered people who were unable to work due to conditions such as age and health. As a social security program, the NBLSS protects the minimum standard of living of low-income families and enhances their independence by providing cash assistance, healthcare, and housing assistance. In addition to these benefits, a self-support program was introduced in the form of a welfare-to-work program to enhance the capability of welfare recipients by providing job training and placement. The income threshold level for eligibility is based on the minimum cost of living. This benefit mandates that if the household income is less than the minimum cost of living, the household receives the difference between the minimum cost of living and the household income. The benefit structure including in-cash and in-kind support varies depending on the household income and the number of family members in the household.

M. Chin et al.

Support for Single-Parent Families. After implementing the family policy for low-income families, Korea introduced a family policy for single-parent families with the Single-Parent Family Support Act, which directly targets low-income, single-parent families. Eligibility for this support includes families with a household income level at 130 % of the minimum cost of living and with a child under age 18 (Ministry of Gender Equality and Family, 2012b). Based on this Act, the Korean government provides several benefits to low-income, single-parent families. For example, the government provides monthly child-rearing allowance to low-income, single-parent families with a child under 12 years old and tuition to families with a child in high school (the public mandatory education system covers tuition for elementary and middle-school education in Korea). In addition, single-parent families who are not able to collect child support from the child's noncustodial parent can receive free legal advice and services. Welfare facilities are also available where low-income, single parents can stay for a certain period of time to help them become independent. There is additional support for grandparents raising grandchildren and teen single parents. For example, the government provides a dispatched housekeeper and a tutor for the child and provides an extra child-rearing allowance to grandparents raising grandchildren. Single parents who are younger than 24 years old can also receive extra child-rearing allowance support for the school qualification exam (similar to the GED), tuition for high school if they want to go back to high school, or cash assistance.

Support for Families with Special Needs. Several major laws in relation to family members with special needs have been enacted including the Welfare of Persons with Disabilities Act in 1989. As of 2008, the Enforcement Decree of Anti-Discrimination Against and Remedies for Persons with Disabilities Act was enacted to prohibit discrimination against persons with special needs. In addition, according to the Disability Pensions Act in 2010, persons with severe disabilities receive a disability pension.

The Korean government provides support for family members with special needs based on the Registration System. The types of special needs that are covered increased from 5 types in 1988 to 15 types including physical, visual, auditory, linguistic, intellectual, developmental, and mental disabilities. The Korean government has also provided several social welfare services to families caring for persons with special needs including income maintenance programs (e.g., disability allowance for low-income people and children with special needs and disability pension for severe disabilities), healthcare support (e.g., medical expense support for low-income persons with special needs, support for assistive devices), work-support program (e.g., job training, expansion of jobs for persons with special needs in public sectors), and care services (e.g., personal assistant services for persons with severe disabilities, rehabilitation vouchers, support for families with children who have special needs). Furthermore, the government supports rehabilitation and independent living by providing residential facilities, centers for independent living, and rehabilitation hospitals.

Support for Families with Domestic Violence. Due to the increasing demand for governmental involvement in dealing with domestic violence, the Act on the Prevention of Domestic Violence and Protection of Victims was originally established in 1997 and has been amended multiple times. Despite the existence of the Criminal and Civil Acts regulating domestic violence, this Act has played an important role in preventing domestic violence, protecting domestic violence victims, and rehabilitating domestic violence offenders. Under this Act, the Ministry of Gender Equality and Family and local governments are responsible for establishing, operating, and evaluating (a) domestic violence laws and policies, (b) domestic violence reporting systems (e.g., emergency call services), (c) protection facilities (e.g., short- and long-term facilities, protection facilities for foreigners and persons with special needs, boarding and lodging, counseling, medical support, legal aid, criminal investigation, victims' continuing education), and (d) prevention and counseling programs (e.g., temporary protection, transfer, research, prevention education).

Family Policy Implementation and Evaluation

In this chapter, we reviewed the sociohistoric background of family policy development and specific policies in the areas of family formation/dissolution, healthy family services, family—work balance, child care, elderly policy, multicultural family services, and special support for families with risk factors such as poverty, single parenthood, special needs, or domestic violence. Since it has long been the custom to have children within the bounds of a legal marriage, the decline in the marriage rate, increase in the divorce rate, and decrease in the fertility rate have combined to present special challenges in Korea. To eliminate the obstacles that may prevent or delay marriage, the traditional male-favored headship system was eliminated from the marriage law. To prevent indiscriminate divorce, the legal divorce procedures became stricter. To assist with family and work balance, child care services and family—work policies were expanded. Health family services were introduced to promote family values and well-being. Multicultural family services were also introduced to help multicultural families adjust to life in Korea. Finally, an extensive elderly policy including the Basic Old-Age Pension and Long-Term Care Insurance for Senior Citizens was implemented to respond to the rapidly aging population.

The Asian Financial Crisis in 1997 was a significant event that shifted the paradigm of social policy in Korea, from a residual model of welfare policy to a universal model of social policy. While there were existing services for families before the crisis, it was only after the crisis that family policy with a family perspective was introduced. The national and local governments began to consider the family as a main purpose of the policy as well as the unit of service delivery, and important foundational laws were enacted to facilitate the implementation of the new family policy. Significant refinement and improvements were made in the family—work policy, child care policy, and elderly policy. Most uniquely, healthy family and multicultural family services were systematically delivered through local Healthy Family Support Centers (HFSCs) and Multicultural Family Support Centers (MCFSCs) across the nation.

Three major accomplishments in family policy are (a) the improvement of gender equality in families and society, (b) the expanded support for child care, and (c) an increase in the public interest in healthy families and multicultural families. While it is not explicit, gender equality is an underlying purpose of the marriage and divorce policy, intervention for single-parent families, family—work balance policy, healthy family policy, and multicultural family policy. Through development in these policy areas, the institutional basis for gender equality has been enhanced. For example, women's labor force participation and family—work balance have been steadily promoted: women's labor force participation slightly increased from 47.1 % in 1998 to 49.7 % in 2011 (Statistics Korea, 2011); and the number of women who used maternity leave increased from 22,711 in 2002 to 75,742 in 2010 (Ministry of Employment and Labor, 2011).

The most dramatic advancement in family policy took place in child care services. The national and local governments expanded the child care policy by increasing the child care budget; the national government child care budget jumped approximately 100 times between 1991 and 2012 from KRW 28.4 billion (approximately US \$28.4 million) to KRW 3 trillion (approximately US \$3 billion). Due to this increase in financial investment, the proportion of children enrolled in child care facilities exceeded the average of the Organization for Economic Co-Operation and Development (OECD) countries (Organisation for Economic Co-operation and Development [OECD], 2012).²

Finally, the government promoted healthy family initiatives and provided free, community-based family life education, counseling, and other family activity opportunities. As of 2011, approximately 60 % of local governments had established Healthy Family Support Centers with qualified specialists

²While the OECD average rate of children younger than 3 years of age in formal child care was approximately 30 % in 2008, the corresponding rate was 37.7 % in Korea. While the OECD average rate of children aged 3–5 in formal care was approximately 77 % in 2008, it was 79.8 % in Korea.

M. Chin et al.

and provided services to 1.2 million residents across the nation (Healthy Family Support Centers, 2012). This initiative is a unique part of Korean family policy in that only a few countries utilize such services as an important government policy instrument.³

Conclusion and Recommendations

In spite of the accomplishments in family policy in Korea, there are significant challenges ahead for Korean family policy. First, family policy has not been extensive or effective enough to encourage deep cultural changes. The Korean government has steadily expanded family—work balance policies including maternity leave, child care leave, and a reduced work schedule, yet the utilization rate is surprisingly low due to the unsupportive workplace culture (Chin et al., 2012). To make significant changes, policymakers should pay more attention to how they can make changes in the traditional long working hours and the work-oriented culture. One suggested way is to target men and to collaborate with workplaces. Workplace-based father education or family-friendly workplace programs can reach men more easily than community-based programs. The Best Family Friendly Management accreditation may help recruit private companies and workplaces and encourage male workers' participation in these workplace-based programs.

Another challenge is related to the organizational aspects of these policies. Family policy areas are administered by several government ministries. The Ministry of Health and Welfare administers the child care policy, elderly policy, policy for low-income families, and policy for families with special needs. The Ministry of Gender Equality and Family administers healthy family services, multicultural family services, support for single-parent families, and some parts of the family—work policy. The Ministry of Employment and Labor administers the family—work balance policy. The Ministry of Education, Science, and Technology administers pre- and after-school child care. The fact that several government ministries administer family policy is not a problem in itself, but there is little collaboration or governance among the ministries leaving underdevelopment or overlap between policy areas. For example, different types of child care services (e.g., publicly funded babysitting services, center-based child care, school-based child care) are not well coordinated. Some children receive benefits from more than one source and other children are left out of service systems.

The absence of an evidence-based approach in policymaking is another problem. Because family policy has been expanded over a short period of time, the policymakers have not been able to conduct a solid policy evaluation and receive feedback for the policymaking process. Some parts of the policy (e.g., fully subsidizing 0–2-year-olds who use child care facilities) have been introduced by political leaders who are preparing for the next presidential election. Without deliberate consideration and policy evaluation, it is difficult to design and implement good policies or to expect positive effects and outcomes from those policies. This is a role of academics. As Huston (2008) argued, research communities should strengthen the scientific base and communicate their findings more actively to several audiences including policymakers.

Many scholars and professionals have successfully generated ideas and actively participated in the policymaking process in Korea. Throughout the 2000s, many academic papers, on which family policies could be based, have been published in the fields of family studies, social work, sociology, and women's studies. These studies include a variety of topics which had been given little attention before such as low-fertility issues (Kim, 2006; Lee, 2009), married women's plans for childbirth

³ The Framework Act on Healthy Families has some similarities to the Healthy Marriage Initiative in the USA. The Healthy Marriage Initiative was established after the 2006 reauthorization of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA; PL 104–193) and provided \$150 million for demonstration/evaluation projects to promote healthy marriages and responsible fatherhood, especially among needy families (Bogenschneider & Corbett, 2010).

(Chung & Chin, 2008; Park, 2008), prospects and coping strategies of an aging society (Lee, 2007; Lee & Lee, 2011), successful aging (Cho, 2010), caring stress and facilities for the elderly (Kim, 2007; Shin, 2010), elderly living alone (Ju, 2010; Lee, 2010), various families types (e.g., adoptive families, grandparent-headed families, single-parent families, families with special needs) (Koo, 2006; Lim, 2006; Park, 2007; Sung & Chin, 2009), and multicultural families (Kim, 2009; Yang & Chung, 2006). In part because of these studies, similar efforts are being made to develop and evaluate the recently created family programs (Kim, Kwak, Hong, & Kim, 2009; Song & Jeong, 2008).

While the results and implications of these studies have informed family policymakers, more rigorous evaluation research needs to be conducted to encourage a more evidence-based policy. Huston (2008) stated that the trend toward requiring evidence as a basis for policy and practice represents a fundamental acknowledgement that scientific, objective information matters for good policy. Finally, Korean researchers need to communicate more effectively with international communities of family policy researchers and practitioners and share scientific information and experience. Lessons from international experiences can contribute to Korean family policy researchers and policymakers to reduce the trial-and-error approach and to develop a comprehensive policy more efficiently.

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Chapter 21 Policy Responses to Population-Declining Society: Development and Challenges of Family Policies in Japan

Yoshie Sano and Saori Yasumoto

Abstract With declining fertility and an increasingly aging population, Japan faces a critical turning point in terms of family policy. These demographic changes, which have occurred against a backdrop of long-term economic stagnation, have strained many current social programs including universal health care and the national pension plan to the breaking point and threaten continued erosion of Japan's safety net. In response, the Japanese government has implemented various policies and mounted campaigns aimed at increasing total fertility rate and overall family well-being in order to secure a more robust labor force, today and in the future, to support Japan's aging population. Yet the effectiveness of such policies has been undermined by social norms, gender ideologies, and values that are deeply entrenched in Japanese culture. In this chapter, we present an overview of current Japanese family policies with relevant background information and identify challenges to family policy development and implementation in Japan.

Keywords Aging • Demographic changes • Fertility • *Ie* system • Japan

Japan has undergone fundamental changes in its population pyramid over the last several decades. Specifically it is experiencing one of the lowest birthrates and the fastest rates of aging in the world. These changes threaten to overburden various existing social policies and programs, most of which assume a smaller elderly population and a growing active labor force. In addition, long-term economic stagnation since the late 1990s and the Great East Japan Earthquake and Tsunami disaster in 2011 are forcing Japanese policy makers to reconsider the effectiveness and sustainability of many programs. While these changes present challenges to policy makers and practitioners, it is also an opportunity for family scientists to review current family policies and provide tangible policy recommendations that match the needs of modern Japanese families.

Currently, the lowness of Japan's total fertility rate (TFR)—the average number of children that would be born to a woman over her lifetime—is a significant concern for many policy makers. According to the Ministry of Health, Labour, and Welfare (MHLW) (2011), TFR has continued to

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320 Y. Sano and S. Yasumoto

decline since the 1970s reaching a low of 1.26 in 2005. Although the rate improved slightly to 1.39 in 2010, it is not known if the TFR's downward trend has come to an end. There are multiple reasons for the decline in TFR. First, the proportion of individuals who remain unmarried throughout their lifetime has increased. In 2010, 20 % of men and 11 % of women were expected to never marry in their lifetime (MHLW, 2011). By 2030, it is predicted that 30 % of men and 20 % of women will remain unmarried throughout their lifetime. Second, among individuals who marry, the average age of first marriage has continued to increase. While the average ages of first marriage in 1960 were 27 and 24 for men and women, respectively, by 2010, these ages had increased to 31 and 29. The trend of marrying later in life is primarily attributed to the increase in number of women with higher education (45 % of Japanese women pursued post-secondary education in 2010, as compared to 2 % in the 1950s).

Another significant change in Japan's demographic is the growing elderly population. At 85.9 and 79.4 years, life expectancy for Japanese women and men, respectively, is among the highest in the world (Ministry of Health, Labour, and Welfare [MHLW], 2012a). Longer life expectancy has lengthened the period after retirement. On average, men live approximately 14 years and women, 21 years, after retiring at the age of 65. Longer life expectancy has increased demand for pensions, medical care, and various other supports. Combined with low FTR, the rapidly aging population threatens to overstrain many social programs such as the national pension system and the universal health insurance system, both of which are supported by the active labor force.

These demographic changes have occurred in a context of rapidly changing family structures since the conclusion of World War II. After its defeat in WWII, Japan was occupied by the United States. During this period, traditional Japanese values were challenged by American concepts of gender equality, personal freedom, and individuality that were introduced, among others, through the Westernstyle educational system adopted after the war (Tamura & Lau, 1992). Before the war, Japanese family structure was delineated by the "ie" system. Ie literary means family or household, which typically included three generations or more and had clear hierarchy based on seniority and gender. A main characteristic of the ie system was a patriarchy in which the most senior male household member held ultimate authority over various matters, including the marriage of family members. Strongly influenced by Confucianism, women in Japan were expected to obey men. Women could not own property, initiate divorce, or retain custody of a child after separation (Osawa, 1998). After the war, ie system was abolished as a result of revision of the civil code and introduction of the concept of individualism. Women gained the legal right to own property, initiate divorce, and to claim child custody, although they did not and have not yet enjoy equal power to men. The number of three-generational households has also declined substantially. In the 1960s, over one third of households were three generational, and nearly half of households comprised nuclear families consisting of a married couple and their children. Today, less than 10 % of all households comprise three-generational families. Only one fifth of households consist of a nuclear family, while nearly two third of all households comprise either single persons (37 %) or couples without children (19 %) (MHLW, 2011). Despite these changes in household structure, influence of the ie system on family life, social customs, and various family policies remains strong, although at a somewhat lower level.

Overview of Family Policies in Japan: Framework and Implementation

In the postwar era, Japan's priority was economic growth, and little attention was paid to policies to support families (Boling, 1998). However, as a result of the recent "crisis" of declining birth rate and aging population, family policy has become a topic of national debate. Evaluation and revision of Japanese family policy is made particularly difficult by the lack of a clear philosophical framework. Below we describe how the policy framework to support families in Japan represents a patchwork of conflicting philosophies that juxtapose individual rights against traditional *ie* ideology, traditional gender ideology, and social and corporate cultures.

Policies Related to Family Formation and Dissolution

Prior to World War II, arranged marriage was the norm in Japanese society, because marital ties were critical for the identity of an *ie* (family). The prevalence of arranged marriages declined significantly after abolition of the *ie* system. Today, approximately 90 % of marriages are based on romantic love (National Institute of Population and Social Security Research, 2010). The divorce rate has also increased over the same period. Divorce among couples with minor children, which accounts for more than half of all divorces (Ministry of Health, Labour, and Welfare [MHLW], 2010a), can be especially complicated given the lack of clear policy regarding parental custody, child support, and family support after divorce.

Marriage/Remarriage. To marry in Japan, couples are required to submit a civil marriage registration at a municipal government office. Legally, only this civil marriage registration constitutes marriage and religious ceremonies do not confer legal status. There are several legal requirements for marriage. For example, individuals related by blood, adoption, or other marriages cannot marry each other. Individuals under the age of 20 cannot marry without the consent of their parents. In addition, certain requirements differ by gender. To marry, men must be 18 years or older and women must be 16 years or older. According to the Ministry of Foreign Affairs [MOFA] (n.d.), this age difference is based on an assumption that women mature faster, both physically and mentally, than men. Furthermore, a woman cannot remarry for 6 months after dissolution of a previous marriage, while no such restriction exists for men. According to the law, the different waiting period for remarriage is intended to prevent confusion regarding the paternity of a child born around the time a marriage is dissolved (Takahashi, 2004). The different marriage requirements based on gender reflect the social atmosphere and ideologies at the time the laws were created. However, they are now criticized by many as being outdated and as violating the principles of gender equality.

A unique aspect of Japanese marriage is the issue of family name. Japanese law requires a married couple to use the same family name. Thus, couples must choose either the husband's or wife's last name upon submission of the marriage registration. Although the law does not specify which name a couple should use, approximately 96 % of women choose, or are pressured to choose, their husband's last name (Ministry of Health, Labour, and Welfare [MHLW], 2005a). Adoption of the husband's last name as a family name is rooted in the *ie* system described earlier. Under the *ie* system, marriage equaled removal of a woman from her ie (family of origin) and entry into the husband's ie (family). Taking a husband's last name, then, carried with it the symbolic meaning of becoming a part of the husband's family and terminating membership in the family of origin. While the ie system no longer exists in Japan, the tradition of choosing the husband's name as a family name remains. The movement to revise the law to allow wives and husbands to have different last names has been gaining momentum since 1980s, as increasing numbers of Japanese women obtain higher education and achieve financial independence through employment (Ishiyama, 2009). Meanwhile, such reform is opposed by a significant number of conservatives who claim that to do so would weaken family ties. An amendment to the marriage law to allow a couple to choose different last names is currently being debated at the national level.

Divorce. There are four types of divorce in Japan: divorce by mutual agreement, by mediation in a family court, by judgment in family court, and by judgment in district court. Currently, 90 % of divorces are the result of mutual agreement between husband and wife (Miyazaki, 2009). According to the MHLW (2010a), the divorce rate increased in the 1980s and 1990s, peaked in 2002, and declined up to 2009. In 2010, the divorce rate was 1.99 per 1,000 individuals, similar to the rate in European countries such as the Netherlands (1.86), United Kingdom (2.05), and France (2.08), but lower than that in the United States (3.40). A recent trend worth noting is the increase in divorce rate among couples in middle to late adulthood. The majority of such divorces are initiated by wives, with the most common reason cited being personality differences (Tsukahara, 2003). Given that the most commonly cited

322 Y. Sano and S. Yasumoto

reason a half century ago was finances, the current attribution indicates a shift in marriage expectations, at least those of wives', from financial security to personal satisfaction (Tsukahara).

More than half of the divorces (58.5 %) involve children under the age of 20 (MHLW, 2010a). Unlike in Western societies, in approximately 80 % of the cases, sole child custody is granted to mothers; the granting of joint custody is rare (Miyazaki, 2009). This represents a dramatic change from the 1950s, when child custody was given to fathers in the majority of cases, based on the *ie* ideology that children belong to the paternal family. The shift in custody reflects an increasing emphasis on parenting consistency and continuity of a child's environment. It is believed that children benefit most from being cared for by the same person who played the main parenting role prior to divorce (Madoka, n.d.), which, in most cases, is the mother. As the number of fathers actively involved in child rearing increases, challenges have begun to mount related to the preferential granting of custody to mothers by the courts.

Perhaps due to this social ideology that favors mothers as primary caretakers of children, women in international marriages face unique challenges related child custody upon divorce. International marriages between Japanese and non-Japanese spouses have been on the rise especially after the 1980s (MHLW, 2005a). Although the number of international marriages has declined since reaching a peak in 2006, the number of international divorces has continued to increase (Ministry of Foreign Affairs [MOFA], 2012). A large proportion of international marriages involve marriage to a non-Japanese Asian from countries such as Korea or China. This pattern is particularly common for Japanese men. However, approximately one in ten Japanese women marries an individual from a Western country such as the United States, Canada, or United Kingdom. A significant number of cases have been reported in which one parent, upon divorce, takes their child(ren) back to their home country without the other parent's consent (MOFA, 2012). In particular, the Japanese government has received multiple claims on international kidnapping from eight Western governments including the USA, Canada, the UK, and France related to Japanese women who have returned to Japan with their child(ren) after divorce. As a result of international pressure over the past 30 years, in late 2011, Japan finally started the process of ratifying the Hague Convention on the Civil Aspects of International Child Abduction—a treaty that guarantees the return of a child who is abducted by one parent and transported across international boundaries. While many welcome Japan's ratification of the treaty, the move is criticized by some as failing to consider the complexity of individual cases. Such return without due consideration of the mothers' and children's safety could, for example, result in a return to a domestic violence situation, which may have been the original reason for fleeing.

Child Support Payment. According to Japanese law, both parents, regardless of custody status, are responsible for all aspects of child rearing, including financial. Yet there is no clear policy regarding child support payment after divorce. Ninety percent of divorce in Japan takes place by agreement and not through judgment by a court (Miyazaki, 2009). For such divorcing couples, a simple submission of a divorce registration to a municipal government office concludes a divorce. Although a parent with child custody has to be identified at the time of divorce, no agreement regarding child support payment is required (Shimoebisu, 2008). As a result, less than 40 % of divorcees have some kind of agreement regarding child support payment, and only two thirds of divorcees with some kind of agreement have written agreements (Ministry of Health, Labour, and Welfare [MHLW], 2007). The percentage of mothers who actually receive child support payment is even lower. In 2006, less than 20 % of divorced mothers reported that they received the payment.

The reason most cited by mothers for not having an agreement and not receiving child support payment is men's inability to pay (MHLW, 2007; Single Mother Forum, 2006). At the same time, a significant number of mothers also reported the father's lack of awareness of the importance of child support as a reason for the father's noncompliance (Single Mother Forum). Although these were reasons provided by the mothers, not by fathers, the data suggest that the compliance rate will not increase

unless there is improvement in both fathers'—particularly low-income fathers'—earning capacity and awareness regarding child support payment.

Domestic Violence. The concept of domestic violence (DV) is relatively new in Japan, although violence has existed for a long time. Under the patriarchic *ie* system, men dominated women and children, and violence toward women was hidden or even taken as a normal part of family life. Consequently, Japan did not have an explicit domestic violence law until 2001, when the Act on the Prevention of Spousal Violence and the Protection of Victims was enacted. According to a national survey conducted by the government, even after the passage of the law, approximately 33 % of women and 17 % of men reported having been a victim of DV in the form of physical, psychological, or sexual violence (Cabinet Office, 2006).

While creating a comprehensive law regarding DV is an important first step to raising awareness and providing assistance to victims, the law has also been criticized for multiple reasons. Kainou (2010) summarized the four main criticisms of the law as follows. First, only physical violence—both actual acts and threats of—is considered violence. Other types of violence such as psychological, social, and financial violence are not covered by the law. Second, the law only deals with violence between spouses. Although the law considers social marriage by cohabitation the same as official marriage, a significant number of DV cases involve individuals in romantic relationships outside of or prior to marriage. Third, the law does not criminalize domestic abuse. The law allows district courts to issue restraining orders against abusers for up to 6 months, to evict abusers for 2 weeks, and to fine abusers. But such measures may not be sufficient to protect women and children. In addition, the law places a heavy burden on the victim to prove domestic violence in order to receive such protection. Finally, the law lacks a comprehensive vision regarding the support of victims. Although each prefecture is required to establish a Spousal Violence Counseling and Support Center, such centers only provide temporal shelter for women and not long-term support. In short, advocates for battered women argue that much more comprehensive legal protection must be established to safeguard victims of DV.

Policies Related to Child Rearing

Improving policies related to child rearing is one of Japan's top priorities today. The Japanese government has established various committees and initiatives since the "1.57 shock" of 1990—at which point the total fertility rate had dropped to a then all time low. Numerous reports have demonstrated that the low TFR is closely related to a lack of supportive child-rearing environment resulting from a shortage of childcare facilities, obstacles to mothers' workforce participation, and a lack of men's involvement in household chores and child rearing (Chitose, 2004). Recent policies related to child rearing are, thus, driven by a national agenda to increase fertility rate and can be grouped into three categories: policies related to (1) childcare, (2) work-family balance, and (3) financial support for child rearing.

Childcare. A major childcare initiative aimed at increasing fertility rate is the Basic Direction for Future Child Rearing Support Measures, commonly known as the "Angel Plan." The Angel Plan, which was first formulated in 1994, encompasses comprehensive policies for establishment of local support centers, improving the educational environment of children, and promoting gender equity in child rearing, with special emphasis on increasing access to flexible childcare services for working parents. The overall goal of the plan was to create a framework for the entire society (i.e., families, communities, businesses, and government) to support child rearing. However, efforts by the government to intervene did not increase fertility rate. As a result, the Angel Plan was revised in 1999 and again in 2004 to expand its scope from supporting working mothers to promoting more flexible work environments and establishing a more individual-based, gender-equal society with regard to child rearing (Chitose, 2004).

324 Y. Sano and S. Yasumoto

Another policy dealing specifically with childcare facilities was the *Taiki Jido Zero Sakusen* (Campaign for Zero Waiting List for Childcare Facilities), first launched in 2001, and revised in 2008. Traditionally, childcare facilities in Japan typically only accepted children older than 3 years of age. In 1985, the number of childcare facilities had declined to an all time low due to the decrease in numbers of children (Ministry of Internal Affairs and Communications, n.d.). Ironically, 1985 was also the year in which the Equal Employment Opportunity Law (EEOL), which prohibits gender-based discrimination in recruitment, hiring, promotion, and job assignment, was passed. The EEOL expanded employment opportunities for women, including working mothers; however, mothers with young children faced significant challenges in finding childcare. The goal, then, of the Zero Waiting List Campaign was to support working families with children by expanding the number of childcare facilities, especially for children aged zero to three, increasing numbers of qualified staff, creating various after-school programs, creating frameworks for local communities to support families with children, and encouraging private companies to provide more flexible working hours (Ministry of Health, Labour, and Welfare [MHLW], 2008).

Work and Family Balance. Dual-earner couples with children face significant challenges to achieving work-family balance. Due to strong social expectations and continuing gender-based division of labor, working mothers shoulder the majority of the burden of household management and child rearing. Japanese men are expected by society to be the primary breadwinners, and men's identities are often defined by their employment (North, 2011). Furthermore, long work hours, unpaid overtime, and weekend/holiday work are commonly accepted as part of Japan's work culture. Furthermore, it is difficult for men to take time off "work" to be with their families. For example, in 2008, only 1 % of eligible fathers took childcare leave compared to 91 % of mothers (Ministry of Health, Labour, and Welfare [MHLW], 2009). Social norms related to gender and work, then, are obvious obstacles to achieving work-family balance.

The Childcare and Family Care Leave Law guarantees paid leave to care for newborn infants and elderly family members. Leave takers are entitled to receive 50 % of their pre-birth wage during their time of leave (MHLW, 2009). The law has been amended numerous times throughout the 2000s to increase the leave allowance, extend the duration of leave, expand eligibility to workers in small firms, encourage more men to utilize the leave, and expand the ages of target children. According to Ministry of Health, Labour, and Welfare [MHLW] (n.d.), the maximum length of leave was extended from 12 up to 18 months. In original version of the law, fathers were allowed to take a parental leave once; however, the law was revised to allow fathers to apply for a second paternal leave if they only took a brief leave in the 8-week period following the birth of their child. In addition, although fathers with stay-at-home partners were originally ineligible to take a parental leave, the law was revised so that fathers could take parental leave regardless of their partners' employment status. The law also includes a provision that places limits on the working hours of employees who care for young children and/or elderly.

While these revisions are certainly welcome improvements for working parents, less than 2 % of fathers take parental leave (Ministry of Health, Labour, and Welfare [MHLW], 2010b). According to fathers who have taken the leave, hierarchical Japanese corporate culture, which is deeply rooted in traditional Japanese culture, does not support men taking paternity leave (Porter & Sano, 2009). Corporate culture which values obedience to norms, conformity, and self-sacrifice for the sake of the company implicitly discourages employees from exercising their right to balance work and family.

The Child Allowance. Currently, less than 4 % of Japan's social security budget is allocated to families with children, which is extremely low compared to the 56 % allocated to the elderly (Katsumata, 2004). One policy aimed at providing financial support for child rearing is the Child Allowance. The Child Allowance is cash assistance, which, despite having existed in Japan for 40 years, has become one of the most debated and revised policies in recent years.

The Democratic Party of Japan (DPJ) came into power in 2009, with a promise to introduce a universal child benefit to all families with children irrespective of their income level. They reasoned that child rearing should be the shared responsibility of society as a whole. Under DPJ's Child Allowance plan, starting in 2010, monthly cash assistance has been provided to families with children under the age of 15. At first, all families were eligible to receive this assistance, but later an income cap was established. The assistance was to be used to promote child well-being. However, just 2 years after its implementation, the allowance was canceled along with the defeat of the DPJ in the Upper House election. The opposition parties fiercely attacked the allowance and the DPJ's lack of a clear plan to sustainably fund the allowance, particularly at a time when the costs of recovery from the Great East Japan Earthquake and Tsunami of 2011 were projected to be extremely high. The Child Allowance reverted to essentially the same policy that existed before the DPJ came to power in 2012, which featured a lower allowance amount and tighter income caps. Despite the good intentions of supporting families with children, short-term changes in the Child Allowance policy have caused confusion and have engendered frustration and distrust toward policy makers.

Policies Supporting Families at Risk

According to a report by International Money Fund (2007), in many countries around the world, Japan included, socioeconomic disparities have widened in the last 20 years. The relative poverty rate in Japan is 16 %, the sixth highest; Japan's Gini coefficient—an index of social inequality—is 0.33, placing the country in the 11th place in terms of inequality among OECD countries (Organization for Economic Co-operation and Development [OECD], 2011). Japan has undergone a fundamental shift in socioeconomic structure as a result of multiple factors including globalization, the spread of information technology, long-term economic stagnation, the casualization of employment, and reduced scope of social welfare programs. Overall, these changes have increased the number of families at risk.

Families in Poverty. The Ministry of Health, Labour, and Welfare [MHLW] (2010c) reported that the poverty rate in Japan has steadily been increasing, with 16 % of population living in poverty in 2009, as compared to 12 % in 1985. The child poverty rate also increased by 5 % over the past 24 years from 11 % in 1985 to 16 % in 2009. Not surprisingly, the number of welfare recipients has increased since the mid-1990s. The recent jump in welfare enrollment after the Great East Japan Earthquake in 2011 pushed the number of welfare recipients in 2012 to over two million people, the highest number since the government started to collect data. Approximately 43 % of welfare recipients are elderly, 33 % are individuals with disability, and 8 % are single mothers (MHLW, 2011).

One significant factor contributing to the increase in number of welfare recipients is the abandonment of the stable employment system that had been a unique feature of the Japanese economy. During the period of rapid economic growth from the mid-1950s to mid-1970s, the majority of private companies operated under a system of lifetime employment, with stable employment being provided in exchange for loyalty and often long hours of work. Starting in the 1990s, however, companies have been decreasing the proportion of full-time workers in favor of temporary or part-time workers, ostensibly to increase competitiveness in the global economy by reducing costs associated with full-time employment. In 2010, 34 % of Japan's labor force comprised temporary or part-time workers (Ministry of Internal Affairs and Communications, 2011). This casualization of employment has increased the number of working poor, who are unable to make ends meet through work. In recent years, young people have been facing increasing difficulty in finding stable employment (Organization for Economic Co-operation and Development [OECD], 2008), leading to a sense of frustration and hopelessness in the society overall.

326 Y. Sano and S. Yasumoto

Public assistance programs targeting families and individuals in poverty in Japan are primarily governed by the Daily Life Security Law, whose intent is to protect a minimum standard of living for all citizens. Assistance is provided primarily in the form of living assistance and assistance in the areas of housing, health care, education, child rearing, employment, and funerals (Garon, 2002). It is noteworthy that food support is not explicitly included as an assistance subcategory. All basic necessities including food are intended to be covered under the rubric of living assistance. The level of assistance a recipient can receive is determined on the basis of multiple factors including family size, income level, and location of residence (urban vs. rural).

The government emphasizes that public assistance is the "safety net of last resort" (Ministry of Health, Labour, and Welfare [MHLW], 2005b, p. 127), and it is intended to be supplementary assistance. To be eligible for public assistance, individuals must have exhausted all other resources, savings and assets, capacity to work, assistance from other programs including the national pension, and support from family members and relatives. This last criterion, which is perhaps unique to Japan, places tremendous burden on both public assistance recipients and their family members, especially now that the traditional *ie* system previously characterized by strong family networks has been abolished. Furthermore, the receipt of public assistance is highly stigmatized in Japan and creates sense of shame among not only recipients but also their families (Garon, 2002). The government's emphasis on the supplementary nature of the assistance, the social expectation that families will support poor family members, and the social stigma associated with receiving assistance all serve to discourage individuals in need from applying for public assistance.

Single-Mother Families. Single-mother families (families with a female head of household between 18 and 60 years of age with no spouse/cohabiting partner and with minor child(ren) under 18) are among the most economically disadvantaged categories of families in Japan. At a first look, the percentage of public assistance recipients who are single mothers is relatively small (8 %) compared to the elderly (43 %) and disabled (33 %) (MHLW, 2011). The small percentage of single-mother families among public assistance recipients prevents their problems from being perceived as a national issue. Nevertheless, they are among the most disadvantaged groups who suffer the negative consequences of poverty. In 2010, 153.7 per thousand single-mother households received public assistance compared to 59.1 per thousand elderly households. In fact, single-mother families are five times as likely as households overall to experience poverty and to have to rely on public assistance.

In response to the increasing number of divorced and single-mother families on public assistance, policy makers in Japan, starting in the 2000s, have enacted reforms to limit welfare expenditures. For example, one of the major policies supporting single mothers is the Act on Welfare of Mothers with Dependents and Widows. Since 2003, single mothers are subject to a time limit whereby the allowance is automatically reduced after 5 years. At the same time, services and programs such as vocational training centers, childcare facilities, and stronger enforcement of child support payment (when such agreements exist) have been expanded to improve single mothers' access to work and income. Similar to the United States and the United Kingdom, the goal of Japan appears to be promotion of self-sufficiency through work.

However, given that workforce participation among single mothers in Japan is already close to 90 %—the highest among industrialized countries (Bradshaw et al., 1996)—some researchers (e.g., Fujiwara, 2008) question the efficacy of such welfare reforms. The government's emphasis on self-sufficiency through work may be "missing the mark," and other critical factors may constrain the economic well-being of single-mother families. First, the wage gap between men and women in Japan is still large. The average woman's wage is 67 % that of the average man (Ministry of Health, Labour, and Welfare [MHLW], 2012b). Second, educational attainment, which is a strong predictor of earning capacity, is significantly lower for single mothers than married mothers (Fujiwara, 2008). Finally, few divorced mothers have formal agreements with their former spouses regarding child support payment. Even with such agreements, only a small percentage of mothers actually receive regular child support

payments at the full amount (see Child Support Payment section above). These and other structural barriers and socioeconomic factors need to be taken into consideration when formulating policies targeting single-mother families.

Policies Related to the Elderly

Japan is well known as a country with high life expectancy. Currently, 22.1 % of total population is 65 or older (JARC, 2012), putting Japan in the category of a "super-aging society." Although the large share of elderly population is beneficial to society in many respects (i.e., rich knowledge), it presents numerous challenges as well. According to the Cabinet Office (2012a), the greatest concerns felt by ordinary Japanese citizens are preparing for retirement (55 %) and the future of their finances/estate (42 %). Incidences of *kodokushi* ("death in isolation" of elderly people who lived alone without any community or family care) have been on the rise, with nearly 2,000 elderly individuals facing death in isolation in Tokyo in 2011 (NISSEI Basic Research Institute, 2011). The National Police Agency (2012) also reports that over 200 people commit suicide each year due to stress related to elderly care. In 1996, the Japanese government established comprehensive policies on aging, as part of an effort to alleviate citizens' concerns regarding the various challenges related to an aging population. Here, we review three governmental approaches to assisting the elderly population.

Financial Support. According to the JARC (2012), 26.4 % of the elderly population reported experiencing financial difficulty, compared to 8.5 % who reported being financially comfortable. It was also revealed that the elderly are three times as more likely to receive some form of public assistance compared to individuals in other age groups. According to a report from the MLHW (2008), employment among the elderly is increasing due to extension of the retirement age and reentry into the labor market after retirement. The percentage of 60-year-olds hoping to remain employed has increased from 34.1 % in 2006 to 41.2 % in 2007 (MLHW, 2008). While advances in medicine have enabled elderly individuals to stay healthy and remain in the labor force, it is also true that many elderly need to work longer because of financial insecurity. The Cabinet Office (2012b) has established various services and programs to assist elderly individuals seeking employment. One example of such a program involves the provision of funding to enable private companies to extend the retirement age from 65 to 70 years of age.

The government has also been trying to increase the level of payouts from the government-managed National Pension Plan. However, many have criticized the government's current approach, complaining that they will not receive sufficient monetary support after they retire compared to the amount of what they are currently being asked to contribute. A survey by the Cabinet Office (2012b) revealed that approximately 80 % of 20-, 30-, and 40-year-olds are worried that they will not be able to survive on the pension they expect to receive after retirement. A more sustainable social security system needs to be created by, for example, changing the current tax system (Cabinet Office, 2010).

Mental and Physical Health. In general, the elderly in Japan are healthier than their cohorts in other countries. 64.4 % of Japanese elderly reported their health condition as fair, as compared to 61.0 % in the USA, 53.5 % in France, and 43.2 % in Korea (JARC, 2012). Yet Japan faces many challenges related to the physical and mental care of the elderly. The death in isolation and depression or stress related to elderly care mentioned above are two examples of such issues. With the shift away from multigenerational households to nuclear families and single-person households, the elderly, especially in depopulated rural areas, often face both physical and emotional isolation. With the declining potential for family-based elderly care, the role of public care becomes all the more critical.

In an effort to provide more comprehensive elderly care, the Japanese government instituted a Long-Term Care Insurance System (*Kaigo hoken seido*) in 2000. While welfare of aging and elderly

328 Y. Sano and S. Yasumoto

care were dealt with separately under the previous system, under the new policy, the two were combined and reorganized to improve efficiency. The policy was a major improvement in terms of being more user-friendly and considering the actual needs of the elderly people (i.e., what services they need) rather than focusing on the needs of the service providers (i.e., what kinds of service they can provide) (Inoue, n.d.). Although the new system has been beneficial in many respects to the elderly in terms of providing better care, it is not without its issues. Care recipients have been asked to bear a greater share of the costs associated with the care and, for example, must now pay 30 % more per doctor's visit than before (Inoue). Such an increase is highly problematic, given that many elderly people are already struggling financially.

Living Environment. The vast majority of public and private spaces in Japan are not designed to readily accommodate the elderly. For example, elderly individuals in powered wheelchairs tend to struggle getting around the city due to a lack of ramps and elevators as an alternative to stairs. Every year, over 200 elderly individuals who use powered wheelchairs are involved in traffic accidents (The Metropolitan Police Department, 2004). In depopulated rural areas, which tend to have substantial aging populations, in addition to experiencing isolation, the elderly tend to have limited access to appropriate medical and social services.

To improve the living conditions of the elderly, the Japanese government has encouraged local districts to organize community-based caregiving teams to check on elderly community members on a regular basis. In any discussion of elderly care, it is necessary to also keep in mind the burden borne by family members providing elderly care, as their needs tend to be ignored. As a result, the community-based social networks have been established to support family members who are involved in elderly care. In addition, the Japanese government has proposed increasing the number of assisted living and barrier free apartments available to the elderly (Cabinet Office, 2010). However, the execution of proposed projects has been delayed due to the reallocation of funds following the Great East Japan Earthquake and Tsunami of 2011.

Assessment of Family Policies in Japan

Japan has reached a turning point in terms of family policy. In the contexts of a declining and aging population and economic stagnation, many family policies created after World War II are simply no longer sufficient to meet the changing needs of diverse families. The government's efforts to encourage gender equality, support child rearing, promote family well-being, and assist the aging population are often undermined by entrenched customs, practices, and institutions that perpetuate the traditional ie ideology, gender role expectations, and culture. For example, although Japan's newer laws regarding marriage and divorce appear to be gender neutral, social customs and gender ideology that are deeply rooted in the ie system prevent the establishment of true gender equality in terms of family formation and dissolution. The government's policies regarding child rearing and elderly care are intended to comprehensively cover a broad range of issues on the level of the individual and community. Despite the ambitious intent of these policies, the social expectation for women to act as nurturing caretakers and the cultural value placed on self-sacrifice for group and family continue to play a dominant role in determining the division of household labor. As a result, in reality, the majority of caretaking responsibilities continue to be borne by women. Similarly, the expectation that men will be the primary breadwinners and sacrifice time and energy for the good of the companies that employ them remains strong. Particularly in the current climate of global competition and increasingly unstable employment, there is substantial pressure, both implicit and explicit, for men not to exercise their right to pursue work-family balance.

The de facto ineffectiveness of Japanese family policies is partly a result of the historical motivation for creating such policies. Many policies related to women, family, and children were formed either as a response to international pressure or a particular domestic issue. For example, Japan's decision to finally ratify the Hague Convention on the Civil Aspects of International Child Abduction is seemingly a response to long-time international pressure. The Equal Employment Opportunity Law of 1985 was established in order to comply with the Convention on the Elimination of all Forms of Discrimination against Women, which was ratified in Japan in 1985. Similarly, the Act on the Prevention of Spousal Violence and the Protection of Victims was enacted partly as a response to the United Nations' Declaration on the Elimination of Violence against Women in 1993, as well as the Beijing Declaration at the Fourth World Conference on Women in 1995. As described at the outset of the chapter, the current focus on family policy related to child rearing and elderly comes from a national sense of "crisis" with regard to Japan's rapidly declining and aging population. Such reactive policy development belies the lack of a clear philosophical foundation to guide and shape a cohesive family policy framework.

Furthermore, unlike the United States and some European countries, policies in Japan are primarily delivered "top-down" (Boling, 1998, p. 185), rather than coming from primary stakeholders such as families, community members, and interest groups. The government typically decides, based on reports and opinions of professionals as well as expert advisors, which issues require governmental attention. According to Boling, an advantage of relying on professionals for policy innovation lies in their ability to formulate tangible recommendations based on examination and comparison of similar policies in other countries. A potential weakness, on the other hand, is lack of attention to the perspectives of the target population or specific context. The original Angel Plan (see Childcare section), for example, focused on expanding mothers' access to work, but failed to take into consideration the corporate culture, which might function as a significant obstacle to mothers' employment. Given the continuing influence of deeply rooted traditional ideologies, customs, and values regarding gender roles and employment in Japanese culture, inattention to these contextual constraints and beneficiaries' actual experiences may, in fact, delay or hinder the development of effective policies.

In addition, certain policies, despite being theoretically on point, may be ineffective if they lack mechanisms for enforcement. For example, while the government claims that protecting women's safety from domestic violence is one of the most important goals of society, the law neither makes domestic violence a crime nor provides sufficient protection for victims. Another example is the ineffectiveness due to lack of enforceability in child support payment. The current high rate of child poverty, especially among single-mother families, is a serious concern for the nation. Yet the law does not require couples to conclude an agreement on child support payment at the time of divorce, and there are few enforcement mechanisms for collecting unpaid child support. Similarly, while policies have been established to create more flexible work environments for working parents—i.e., by expanding scope of parental leave and limiting working hours for employees with caretaking responsibilities—there are no serious consequences for noncompliant businesses.

Lack of funding also limits the efficacy of policies implementation. While comprehensive policies aimed at increasing fertility rate, supporting child rearing, and promoting women's workforce participation exist, there are insufficient funds to fully implement these. Katsumata's (2004) comparison of expenditures on families as a percentage of GDP in OECD countries demonstrated Japan's extremely low level of spending on families. Katsumata demonstrated that countries that spent a larger share of their national budget on families—Sweden, Denmark, Finland, France, etc.—also experienced higher fertility rates or successfully reversed declining fertility rates, while countries that spent less on families—Italy, Spain, Korea, Japan, etc.—experienced lower fertility rates.

Overall, despite the development and implementation of various policies and programs, the government's policy goals have not been achieved satisfactorily. Without tangible mechanisms to enforce policies and sufficient funding, Japan continues to rely, as a primary solution, on care by families and individuals, women in particular, which is both accepted and reinforced by traditional ideology and values.

330 Y. Sano and S. Yasumoto

Conclusions

Our overall assessment of family policies in Japan is that policies that only take into consideration simple demographic and economic factors have not been and will not be as effective as hoped. Families exist and function in the context of cultural norms, traditions, and social values. Although modern Japan has been strongly influenced by Western ideologies of individualism, gender equality, and personal freedom, especially from the United States, traditional ideologies and values of collectivism, social hierarchy, and self-sacrifice rooted in Confucianism, Buddhism, and Japan's traditional *ie* system remain strong. In this regard, Japan is distinct from many industrialized countries. Japanese scholars, intelligentsia, and policy advisors are able to provide valuable information regarding the successes and failures of family policy in other countries. However, capturing the perspectives and experiences of primary stakeholders—everyday families—as well as understanding the broader context in which policies will be implemented are equally critical in policy formulation. In order to successfully deal with the declining fertility and rapidly aging population in Japan, the Japanese government will need to craft family policies that are uniquely fit to reality of Japanese families living in the context of Japanese society, backed by mechanisms of enforcement and sufficient funding.

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Part V Family Policies in Australia

Chapter 22 Reform, (R)evolution and Lingering Effects: Family Policies in Australia

Daryl J. Higgins

Abstract The characteristics of Australian families have changed considerably in the past few decades. Demographic and social shifts (such as the increasing community acceptability and prevalence of divorce, cohabitation and ex-nuptial births) have led to a range of evolutionary policy shifts, particularly relating to family law, and adoption. Reforms have also occurred in areas affecting income, work and family life, including child care, child support and contingent welfare payments, aimed to benefit children. New frameworks to address child abuse and family violence demonstrate the centrality of safety for effective family policy in Australia.

Keywords Welfare reforms • Gender • Workforce • Child protection • Family violence • Poverty • Place-based interventions • Policy evaluation

Family Characteristics in Australia

The characteristics of Australian families have undergone considerable change over the past few decades. Population growth – largely due to net overseas immigration – is expanding and deepening Australia's cultural diversity. Greater diversity in race, culture, language and religion and the growth in our population present many challenges, such as maintaining the availability and quality of our community services for a much broader range of service users. The Australian population is increasingly concentrated in major urban areas – principally around the southeast coast (where industry and economic activities are focused) – with a noticeable growth in outer suburbs of each of the major metropolitan areas. As the population grows, families are becoming smaller and more fluid, and a greater variety of family forms and compositions are evident. In addition, the continuing ageing of the population ensures that the generational span of families will progressively widen.

Like other Western countries, partnership formation, stability and birth rates have changed dramatically in Australia, as have associated social attitudes and values, which both result from and fuel such changes. As outlined by Hayes, Weston, Qu, and Gray (2010), key changes over the past 30 years have included a reduction in average household size (down from 4.5 in 1911 to 2.6 in 2006), an increase in

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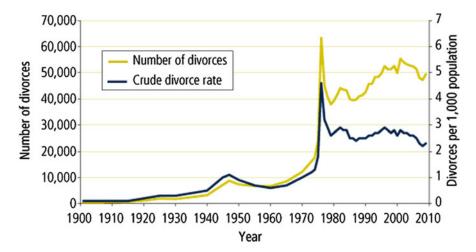


Fig. 22.1 Crude divorce rate and number of divorces, 1901–2009 (Sources: ABS (various years) Marriages and divorces (Catalogue No. 3310.0). Reprinted from Qu & Weston (2011))

the number of lone parents who were never married, an increase in the number of un-partnered parents (whether single or separated/divorced) living with children, an increase in the number of single-occupant households and couples living with no children, a decrease in couples living with either dependent or nondependent children, a reduction in the crude marriage rate, a massive rise in the number of marriages preceded by cohabitation (from 16 % in 1975 to 78 % in 2008), a progressive decline in the crude divorce rate (to 2.2 per 1,000 in 2008, after it jumped in 1976 to 4.6 following the introduction in the previous year of 'no-fault divorce' in Australia; see Fig. 22.1) and a rise in the average age at which women have their first child (therefore reducing the available time span for pregnancies – and consequently the actual number of children, resulting in a smaller average Australian family).

The Australian Institute of Health and Welfare's latest biennial publication, *Australia's Welfare 2011*, outlined some key factors that set the context for policy and service delivery in Australia. These included the structural ageing of the Australian population, differences between the structure of the Aboriginal and Torres Strait Islander population (2.5 %) and the non-Indigenous population due to higher fertility and earlier mortality among Indigenous Australians, increased numbers of people living with disability (as well as related disability care needs), sustained low fertility rates (below the replacement rate since 1977 – though a slight rise from the historic low of 1.7 births per woman in 2001 to 1.9 in 2009) and a highly urbanised population: 64 % of Australians live in the eight capital cities (AIHW, 2011a).

A range of other 'macro' factors affect Australian families and the policies needed to respond to changing needs:

Economic changes. The Australian economy has undergone major structural changes in the past two decades, such as a continuation of the post-WWII decline in manufacturing (which differentially affects low-income families living in areas previously dependent on manufacturing) and the current mineral resources boom (affecting regional areas, particularly in the two geographically largest states: Queensland and Western Australia).

Technological changes. These include the rise of digital media, social networking services and the ways that innovations in technology influence shared family time and activities of families (see Bittman & Sipthorp, 2012).

¹ Urbanisation has been a strong feature of the Australian social 'landscape' from the nineteenth century.

Migration. Australia has a long history of multiculturalism; however, recent arrivals – particularly humanitarian migrants – are likely to face challenges, including dealing with the effects of experiences prior to their arrival in Australia, such as the trauma experienced by asylum seekers and refugee families; coping with isolation from family and friends overseas; and accessing culturally appropriate education and service systems that meet the families' needs (AIFS, 2012).

Policy Framework Developments

Marriage

Family policy in relation to legislation concerning marriage – and marriage dissolution – has taken a couple of revolutionary steps in the past three decades. As highlighted earlier, the enactment of the Family Law Act 1975 introduced the notion of 'no-fault' divorce. Not surprisingly, the change was followed by a massive increase in the number of divorces in the following year. Since that subsequent peak in 1976, however, divorce rates have steadily declined. There have been three major shifts in marriage policy since the landmark 1975 legislation: (a) the extension of the jurisdiction of family courts to hear matters relating to ex-nuptial children and the increased recognition of de facto marriage, which corresponds to the massive rise in the number of couples cohabiting (whether instead of or as a precursor to marriage); (b) the major shift in post-separation parenting arrangements to increase the time spent between children and each parent, in order to foster meaningful relationships, where it is safe to do so – with the concept of 'shared parental responsibility' enshrined in 2006 amendments to the Act, and subsequent strengthening in 2012 of provisions to promote the safety of children and women at risk of violence (including abandoning the concepts of 'custodial' or even 'residential' parents where shared parental responsibility is not set aside, instead referring to the allocation of 'care time' with each parent); and (c) the recognition of same-sex relationships as equivalent to other domestic partnerships (i.e. heterosexual marriage de jure and de facto) in policies and entitlements under most Commonwealth and state/territory legislation (e.g. for purposes of superannuation, inheritance, welfare and family court jurisdiction in relation to property and/or children), with the exception of the Marriage Act, which defines marriage as a relationship between a man and a woman.

As noted by AIFS (2012), the relationship formation trends identified earlier – arising from cohabiting relationships outside of legal marriage, in particular, among de facto and same-sex couples – have created the impetus for legislative change at a range of levels. De facto relationships represent an increasingly common pathway to marriage in Australia² and an increasingly frequent setting for child-bearing. These social changes led to legislative reform, including the referral of power to the Commonwealth Government by all but one of Australia's states,³ to align legislation and processes for resolving financial disputes resulting from the breakdown of non-married couple relationships with those applying to married couples.

The introduction of legal mechanisms for the recognition of same-sex relationships, including defining financial entitlements in relation to superannuation, insurance and government payments and bringing post-separation financial disputes between same-sex couples under the umbrella of the Commonwealth (federal) Government's family law processes (via amendments to the Commonwealth *Family Law Act 1975*), is an example of the ways in which reforms are occurring in Australia to the recognition and definition of families under a range of legal instruments.

²The most recent data from the Australian Bureau of Statistics is that 78% of marriages registered in 2011 were preceded by cohabitation (ABS, 2012).

³The state of Western Australia has its own parallel legislation, with family law matters being dealt with by a WA state court rather than a federal family court.

Adoption: Past Family Policy, Its Lingering Effects, and Reforms

In the decades prior to the mid-1970s, it was common in Australia for babies of young, vulnerable women (usually unwed mothers) to be adopted. The level of shame and silence that surrounded pregnancy out of wedlock was matched by mounting social pressure to meet the needs of infertile couples and societal views (and organisational practices in hospitals, children's homes, government welfare departments and other agencies) that prioritised the needs of 'deserving' infertile couples and largely failed to support or address the needs of unmarried or other vulnerable young parents. At its peak, there were almost 10,000 adoptions in 1 year (1971–1972). Since then, rates of adoption dropped significantly and, over the last two decades, have remained relatively stable at less than 500-600 children per year (e.g. there were 384 adoptions in 2010–2011; AIHW, 2012). While the adoption process in Australia was at its peak, adoptions were 'closed'. Closed adoption was where an adopted child's original birth certificate was sealed forever and an amended birth certificate was issued that established the child's new identity and relationship with their adoptive family. Mothers were not informed about the adoptive families, and the very fact of their adoption was usually kept secret from the children. Changes in legislation now allow access to information (if no veto from the other party was put in place). The majority of local adoptions (those of children born or permanently residing in Australia) are now 'open'.

There is a range of reforms and significant events that have contributed to the shifts away from peak period of adoption in Australia in the late 1960s and early 1970s:

- The Council of the Single Mother and Her Children was set up in the state of Victoria in 1970, and a national equivalent set up in 1973 aimed to challenge the stigma of adoption and provide support to single and 'relinquishing' mothers.
- The status of 'illegitimacy' was changed to 'ex-nuptial' births, starting in 1974 with a Status of Children Act in two states (Victoria and Tasmania).
- Abortion also became allowable under some circumstances in most states from the early 1970s; see the 1969 Menhennitt ruling (R v Davidson) in Victoria and the 1971 Levine ruling in NSW
- The Commonwealth Government introduced the Supporting Mother's Benefit in 1973.
- Further legislative reforms started to overturn the blanket of secrecy surrounding adoption (up until changes in the 1980s, information on birth parents was not made available to adopted children/adults).
- Beginning in 1976 with the state of New South Wales (NSW), registers were established for those
 wishing to make contact (both for parents and adopted children). In 1984, Victoria implemented
 legislation granting adopted persons over 18 the right to access their birth certificate (subject to
 mandatory counselling). Similar changes followed in other states (e.g. NSW introduced the
 Adoption Information Act in 1990).
- By the early 1990s, legislative changes in most of the eight states/territories ensured that consent for adoption had to come from both birth mothers and fathers.

These practices have been an ongoing influence in the lives of many affected by an experience of adoption from the past – including mothers, fathers, adopted people, adoptive family and their partners and extended family (see Box 22.1).

Box 22.1 National Survey of the Needs of People Affected by Past Adoption Practices

The aim of this research study was to utilise and build on the existing research and evidence about the extent and effects of past adoption experiences on individuals who have experienced closed adoption practices in Australia, to strengthen the evidence available to governments to address their current needs, including their need for information, counselling and reunion services. The main sources of data collection were online surveys for all persons directly affected – including birth mothers and fathers, adoptees, adoptive families and extended families – and for service providers, as well as qualitative follow-up interviews and focus groups. In a 300-page report on the national study, the authors, Kenny et al. (2012), identified the following key needs of people affected by past adoption practices:

- Acknowledgement, recognition and increased community awareness of and education about past adoption practices and their subsequent effects
- Specialised workforce training and development for health and welfare professionals to appropriately respond to the needs of those affected
- Review of the current search and contact service systems, with a commitment to develop improved service models
- Improved access to information through the joining of state and territory databases, governed by a single statutory body
- Improved access to and assistance with costs for mental, behavioural and physical health services
- Ensuring that lessons from past practices are learned from and translated where appropriate into current child welfare policies (e.g. in relation to current adoption, permanency plans for children in under statutory child protection care, assisted reproductive technology including donor insemination and surrogacy)
- Creating and enhancing adoption-specific services to respond to the consequences of past practices

Source: Higgins (2010b) and Kenny, Higgins, Soloff, & Sweid, (2012)

Current Alternative Family Policy: Out-of-Home Care

In order to ensure the safety of children and young people, all states and territories in Australia have the responsibility for monitoring concerns regarding the risk of harm to children from abuse and neglect. If protective measures cannot be put in place to ensure children's safety in the care of their parents, statutory child protection departments have the responsibility to intervene. Despite the large growth in the number of Australian children in alternate care ('out-of-home care') over the last two decades (see Table 22.1; Higgins, 2011a), adoption of these children is rare. This is because there is a strong push for them to be restored to – or maintain active contact with – their parents. In addition, most state/territory child protection statutory authorities have the capacity to (a) make permanent care orders and/or (b) have policies relating to the creation of permanency plans when there is no foreseeable likelihood of children being able to safely return to the care of their parent (i.e. making decisions about alternative long-term foster/kinship care placements for children in out-of-home care as early as possible to avoid the negative consequences of continuing to have failed attempts to restore children with birth parents). Unlike adoption, these foster/ kinship care arrangements do not formally extend past a child turning 18 years of age and the birth certificate is not altered.

Table 22.1 Number of children on care and protection orders living in out-of-home care in Australia on 30 June 1990, 2000 and 2010

Year	Children in out-of-home care	Total population of children	Rate per 1,000
1990	12,406	4,188,795	3.0
2000	16,923	4,766,920	3.6
2010	35,895	5,092,806	7.0

Sources: AIHW (2001, 2011b); WELSTAT (1992). Reproduced from Higgins (2011a)

While the number of children and young people *entering* care in the last 5 years has remained relatively stable (at just over 12,000 per year), the total number of children *residing* in out-of-home care at any one time has grown significantly due to the increased number of children entering the care system early in their lives and staying in it for longer

Influence of Socioeconomic Context on Social Policymaking Process: Poverty

One of the most significant influences on family well-being is the economic prosperity of the country, and how this translates to individual family well-being, and the risk of poverty. Having an adequate income and a sense of security about future income is well recognised as being a critical aspect of well-being for families (Adema, 2012; Howe, 2012). Key issues relating to the economic security of families are the availability and adequacy of employment, the systems to support families on low incomes or those experiencing unemployment and the ways in which these factors influence family well-being (AIFS, 2012).

During the global financial crisis (or the 'Great Recession') of 2007–2009, Australia successfully avoided the level of economic downturn that was experienced in the UK, USA and continental Europe – and which continues into 2012–2013. Technically speaking, Australia avoided a recession, or any significant change in income inequality – even though unemployment did have some small growth (Whiteford, 2011). Although Australia has a relatively low level of joblessness overall, due to the concentration of unemployment in specific households, the number of families in which there is no adult member of the household in paid employment ('family joblessness') is high compared to many other OECD countries. 'Family joblessness' is the single most important cause of child poverty in Australia and has been linked to poorer developmental outcomes for children (see Hand, Gray, Higgins, Lohoar, & Deblaquiere, 2011). These outcomes for children growing up with family joblessness include lower educational attainment and poor health (Whiteford, 2009).

As well as macro-economic policies, to prevent family poverty, governments in Australia use a range of welfare payments to support families, such as unemployment benefits, disability support pension and parenting payments for low-income and single parents. Through child support payments, governments also ensure that the resources to care for children are shared more equitably between parents after separation. However, government payments sometimes have strings attached. Taylor, Stanton and Gray (2012) argued that a number of new forms of conditionality have been applied within Australian social security policy in the past couple of decades that attempt to draw a link between the receipt of government cash benefits ('welfare payments') and changes in parental behaviour in order to address concerns about the welfare of children. They provided four examples: the Maternity Immunisation Allowance, the Improving School Enrolment and Attendance through Welfare Reform Measure (SEAM), compulsory income management (also known as 'welfare quarantining' - where a percentage of payments is set aside for spending only on priority items) and payments for single parents. The behaviours these measures target are, respectively, to maximise the full participation of children in scheduled immunisations; to ensure school attendance; to prioritise household expenditure away from gambling, pornography, alcohol and 'junk food' to meeting children's needs⁴; and enhance workforce participation (and, thereby, economic well-being of families).

⁴In their review of the evidence on income management, Buckmaster and Ey (2012) concluded that at that time of their publication (May 2012), the 'evidence provided for or against income management is inconclusive' (p. 2).

Work and Family

There have also been some significant shifts in the way that specific family characteristics intersect with workforce participation and capacity. Increasingly, the model of the male breadwinner has been exchanged for parents sharing the care and work responsibilities and is associated with greater reliance on formal or informal child care. Workforce participation of women with young children has increased – though participation levels remain significantly lower than most OECD countries (Adema, 2012). A higher proportion of families have mothers working part time rather than full time than most OECD countries (Adema).

The proportion of couple families with children where both parents are employed has increased (from 56 % in 1998 to 61 % in 2010) (AIHW, 2011a, see p. 63). There has been a corresponding drop in the number of 'jobless' couple families (from 8.5 % in 1998 to 5.3 % in 2010) and single-parent 'jobless' families (from 58 % in 1998 to 45 % in 2010) (AIHW, see p. 64).

Blaxland, Mullan and Craig (2009) analysed a range of work and family policies in Australia between the years 1992 and 2006. Their analysis highlights features such as the rising cost of early childhood education and care, the increase in the number of families receiving cash assistance from the Commonwealth Government, the drop in the eligibility of income support for single parents and the rise in casual and part-time employment. Craig, Mullan and Blaxland (2010) concluded that new tax policies implemented during the late 1990s and early 2000s favoured families with one full-time earner. The consequence was that while full-time working hours for fathers lengthened, mothers faced substantial financial disincentives to working full time. When asked in the 2005 Parental Leave Survey in Australia about policies that would have helped them with employment after the birth of their child, the policy women most commonly cited was affordable child care (40 %) (Baxter 2012).⁵

There have been two significant changes since the period of their analysis. The first was the introduction in 2011 of a means-tested paid parental leave, a government-funded entitlement for working parents of up to 18 weeks paid at the national minimum wage. The University of Queensland is currently evaluating the scheme (Martin et al., 2012). The second change is the introduction on 1 January 2013 of a 2-week government-funded paid paternity leave, known as 'Dad and Partner Pay' (for an overview and history of Australia's family leave policies, see Rush, 2013).

An enquiry into the extent and causes of insecure work in Australia found that casualisation and fixed-term employment are affecting millions of Australian workers with adverse consequences for many families (Howe, 2012). Particular job sectors also present unique challenges to families, potentially causing disruption to parenting roles due to dislocation (such as for fly-in/fly-out and drive-in/drive-out workers in industries such as mining or remote services; see Morris, 2012) or other significant changes in job role and location (e.g. defence personnel commencing or returning from active deployment) (AIFS, 2012).

In order to care for children, parents reported that they most commonly used the following arrangements: flexible work hours, unpaid leave, informal care arrangements, paid leave (carers and holiday leave), working from home, taking children to work with them and rostered days off (Baxter, 2012).

Child Care

With dual-parent employment continuing to rise, for many couples, having children is a key transition point in their lives in terms of participation in the paid workforce. Providing subsidies to families

⁵The Parental Leave Survey was conducted in 2005 as part of the Longitudinal Study of Australian Children. See www. polsis.uq.edu.au/highlights-from-the-parental-leave-survey-december-2006

⁶See http://www.humanservices.gov.au/customer/services/centrelink/paid-parental-leave-scheme

unable to afford child care or after-school care is an example of the broad secondary service system Australia has that contribute to Australia's children being safe and well.

Child care is an important family-related policy, sitting in between the policies relating to family well-being (helping parents manage their complex lives), employment policy (assisting with participation of parents), gender equity (a tool for ensuring that the responsibility of child care does not fall unequally on women), education (preparing children for being 'school-ready') and child well-being (being a source of early identification for developmentally vulnerable children) and providing a high-quality care environment, even if this is not what children may be enjoying at home. Each of these relates to families and the central tasks of parenting and participation for families (AIFS, 2012).

A range of studies has demonstrated the benefits to families – particularly of high-quality child care for disadvantaged families (Wise, da Silva, Webster, & Sanson, 2005). However, specific strategies may be needed with improving access to vulnerable families, such as Indigenous Australians (Ware, 2012). Transitions from home to early childhood education and then onto school are important in terms of preparing children for engagement and school achievement (which is best achieved through partnerships between parents and educators/institutions) and are predictors of long-term academic and occupational achievement (Rosier & McDonald, 2011).

Families at Risk

Prevention of Family Violence, Abuse and Neglect

Governments across the country recognise the problem of child abuse and family violence and the importance of early intervention and prevention, as well as responding to the needs of victims. This includes a focus on domestic and family violence, child maltreatment, bullying, elder abuse and sexual assault and violence. Domestic and family violence is recognised as a major social issue in Australia. Power and control in intimate relationships can be exerted in a range of ways, including physical, emotional, social, financial and sexual violence. Two significant frameworks/plans have been developed in Australia that set the direction for addressing the causes and consequences of violence – including family violence, child abuse and neglect:

- The National Framework for Protecting Australia's Children 2009–2020 (COAG, 2009)
- The *National Plan to Reduce Violence Against Women and Their Children 2010–2022* (National Council to Reduce Violence Against Women and Their Children, 2009)

Both of these frameworks are population-based or 'public health' approaches, focussing on the causes (also referred to as risk factors or special determinants) in order to reduce the incidence of violence, abuse and neglect. Reviews of services – such as family law, child protection and juvenile justice systems – reveal a common set of family problems that typically lead to engagement with these service systems, namely, family violence, mental health issues and addictions (to alcohol, tobacco, drugs and gambling).

Although community violence and assaults are part of the focus, prominence is given to the problem of family violence and maltreatment, and the strategies needed to prevent it intervene early in at-risk families and respond to the needs of victims and families when it has occurred.

I have argued elsewhere that it is not sufficient to simply 'bolt on' preventive programmes to the current child protection processes; rather, it is important to completely rethink the role and function of child protection systems within the wider range of policies and programmes aimed at promoting the well-being of children (Higgins, 2011a; Higgins & Katz, 2008). This is of particular importance in Indigenous communities for two reasons: (a) the over-representation of Indigenous children in statutory child protection activities and (b) the potential for community-owned and community-led

initiatives to support the health, well-being and safety of Indigenous children in culturally appropriate ways (Higgins, 2010a). It is also not enough to move from one structure to another. The fundamental issues are not structural but relate to the functions and the culture of child protection systems (Higgins & Katz, 2008).

Increasingly, researchers are recognising not only that children are often subjected to multiple forms of abuse and neglect but that they experience a range of other threats to their safety and well-being, such as bullying and peer victimisation (Higgins, 2011b). Prevention efforts are being implemented in settings such as schools, community organisations, workplaces and the media, as well as programmes targeted at men and boys to develop and promote gender-equal, respectful relationships with girls and women (National Council to Reduce Violence Against Women and Their Children, 2009). Some of the key systems that intersect in relation to effective service-delivery responses to family violence and abuse include forensic/crisis services, family law courts, Family Relationship Centres, mediation services, civil justice processes (e.g. bankruptcy proceedings), adult-focused services whose clients include vulnerable parents (e.g. mental health, drug and alcohol and housing services), family support services, child protection departments and juvenile court systems (in both justice and care/protection matters) and adult corrections services.

Place-Based Interventions for Families

The issue of locational disadvantage is becoming an increasingly prominent policy focus across a range of departments and portfolios at every level of government in Australia – often with a whole-of-government or inter-organisational flavour. Governments are aware of the geographic concentration of disadvantage and are implementing place-based interventions/supports to vulnerable groups, such as Indigenous families, migrants, refugees and other culturally and linguistically diverse families.

All families, to a greater or lesser extent, require the support of their communities. Those with children who are disadvantaged or vulnerable, however, may need particular support to assist them to manage the transitions in their lives, ensure that their children are safe and well and enable family members to experience positive relationships, be protected from harm and, in turn, contribute to building stronger, more resilient communities. The Australian Government has this as one of the aims of the Family Support Program and was a key component of the Stronger Families and Communities Strategy (see Box 22.4).

Australian Aboriginal and Torres Strait Islander Families

Given the clearly identified inequalities between Indigenous and non-Indigenous Australians (COAG, 2008), it is important to recognise the issues faced by Aboriginal and Torres Strait Islander families and their particular experiences and needs. All state, territory and Commonwealth governments in Australia have committed to the Closing the Gap initiative to address disadvantage experienced by Indigenous Australians.

The Australian Government Productivity Commission provides a regular report on government expenditure on activities to close the gap on Indigenous disadvantage. They highlight key aspects of Indigenous communities that relate to family well-being – for example, that Indigenous women are 35 times and Indigenous men 21 times as likely as non-Indigenous Australians to be hospitalised due to family violence-related assaults (Steering Committee for the Review of Government Service Provision (SCRGSP), 2009a, b).

The COAG Closing the Gap agenda is based on seven building blocks that are necessary to address the significant disadvantage of Indigenous families and communities: schooling, early childhood, employment, health, housing, community safety and governance and leadership. The *Closing the Gap Clearinghouse* provides access to summaries of the evidence base regarding what works to address Indigenous disadvantage by tackling each of these challenges.⁷

Other Families in Need

Disability not only affects individuals with a physical or mental health condition but also affects family members who have care responsibilities (Edwards & Higgins, 2009). Understanding the needs of family members with a disability – and their carers – across the lifespan is a priority area for family-focused research as Australia moves towards significant policy reform, including the progressive introduction of a National Disability Insurance Scheme (NDIS). The aim of the NDIS is to provide resources for people with significant and permanent disability to have a personalised care plan that reflects their own goals and aspirations (see www.ndis.gov.au).

Another example of vulnerable families for whom greater assistance may be required are grand-parent-headed families. According to the Australian Bureau of Statistics, grandparents now care for more than a quarter (26 %) of children in Australia on a regular basis. In 2011, that equated to 936,999 children aged up to 12. Grandparents are included as part of the focus of the Australian Government's Family Support Program and, when they have responsibility for care of children, may be eligible to receive parenting payments, or use services such as Family Relationships Centres, or have disputes about care of children settled through the Family Court. The Commonwealth also funds 25 facilitated peer-support groups for grandparents across the country ('MyTime for Grandparents'; see http://www.fahcsia.gov.au/our-responsibilities/families-and-children/programs-services/family-support-program/family-and-children-s-services/mytime-for-grandparents-peer-support-groups).⁸

Policy Implementation and Assessment: Examples of Good Practice

Case Study: Australian Family Law

In 2006, Australia's family law system underwent some significant changes, with a focus on cooperative parenting, avoiding litigation (e.g. through family dispute resolution (FDR), a compulsory step for separating parents where there are no safety concerns) and sharing parental responsibility for children after separation. Kaspiew et al., (2011) noted:

The 2006 reforms were partly shaped by the recognition that although the focus must always be on the best interests of the child, many disputes over children following separation are driven by relationship problems rather than legal ones. These disputes are often better suited to community-based interventions that focus on how unresolved relationship issues affect children and assist in reaching parenting agreements that meet the needs of children. (p. 8)

⁷The Closing the Gap Clearinghouse is a Council of Australian Governments initiative jointly funded by all Australian governments. The Australian Institute of Health and Welfare is delivering it in collaboration with the Australian Institute of Family Studies. See www.aihw.gov.au/closingthegap

⁸ For further information about grandparents and post-separation care arrangements, see Qu et al., (2011).

Box 22.2 Evaluation of the 2006 Family Law Reforms

The AIFS Evaluation was based on an extensive research programme and provides a comprehensive evidence base on the operation of the family law system. The Evaluation included three main projects: the Legislation and Courts Project, the Service Provision Project and the Families Project. Each of these projects comprised a number of sub-studies, with 17 separate studies contributing to the Evaluation overall. The research design focused on examining the extent to which key aspects of the objectives underpinning the reforms had been achieved. The Evaluation involved the collection of data from 28,000 people involved in the family law system, including parents, grandparents, family relationship services staff, clients of family relationship services, lawyers, court professionals and judicial officers. It also involved the analysis of administrative data and court files.

Source: (Kaspiew et al., 2011). The full report on the evaluation is available from www.aifs. gov.au

Although the objectives of the 2006 changes were to encourage greater involvement by both parents in their children's lives after separation, they also brought with them the responsibility for systems to protect children from violence and abuse and ensure the safety of all family members. AIFS undertook a major evaluation of the 2006 changes that arguably is the largest of its kind internationally (see Box 22.2).

According to Kaspiew et al. (2011):

The evaluation evidence indicates that the 2006 reforms to the family law system have had a positive impact in some areas and have had a less positive impact in others. Overall, there has been more use of relationship services, a decline in filings in the courts in children's cases, and some evidence of a shift away from an automatic recourse to legal solutions in response to post-separation relationship difficulties.

A significant proportion of separated parents are able to sort out their post-separation arrangements with minimal engagement with the formal system. There is also evidence that FDR [Family Dispute Resolution] is assisting parents to work out their parenting arrangements.

A central point, however, is that many separated families are affected by issues such as family violence, safety concerns, mental health problems and substance misuse issues, and these families are the predominant users of the service and legal sectors. In relation to these families, resolution of post-separation disputes presents some complex issues for the family law system as whole, and the evaluation has identified ongoing challenges in this area. In particular, professional practices and understandings in relation to identifying matters where FDR should not be attempted require continuing development. This is an area where collaboration between relationship service professionals, family law system professionals and courts needs to be facilitated so that shared understandings about the types of matters that are not suitable for FDR can be developed and so that other options can be better facilitated. (p. 16)

Linked to the changes in Australian family law has been a cultural shift around child support, with both parents expected to contribute to the costs of caring for children and with children spending time with both parents after separation (where it is in their best interests and safe to do so); the child support formula is designed to make more equitable any differential in the socioeconomic circumstances of the two households in which parents (Qu & Weston, in press).

Key findings from the AIFS evaluation of the 2006 changes to the family law system, along with conclusions from two other reports commissioned by the Commonwealth Attorney General, were instrumental in shaping a number of further changes in family law policy, with the implementation of the latest revisions to the Family Law Act that strengthen the framework for responding to family violence and child abuse concerns (Croucher, 2012).

State of Research on Families as Background for Evidence-Based Policies

Although researchers typically identify lack of funding as an obstacle to conducting much-needed research, in Australia we should still be proud of the wealth of knowledge that we have about families and factors that affect well-being. Having had this as its goal for the past 32 years, the Australian Institute of Family Studies has been at the forefront of creating this knowledge and disseminating widely research findings from others.⁹

To paraphrase from Orwell's *Animal Farm*, while all research is equal, some research is more equal than others! A number of researchers have proposed a 'hierarchy of evidence' which helps explain not only why some research should not be relied upon and assists policymakers with understanding the 'strength of the evidence base'. The Grading of Recommendations, Assessment, Development and Evaluation (GRADE) Working Group; see http://www.gradeworkinggroup.org/) has developed a system for grading the quality of evidence in the health-care field, which has been endorsed by the Cochrane Collaboration, ¹⁰ the World Health Organization and a range of other organisations, journals and medical institutes. Similarly Andrew Leigh identified a hierarchy of evidence, with the pinnacle being systematic reviews (meta-analyses) of multiple randomised trials (see http://economics.com.au/?p=2861). The difficulty in family-related research is that often the type of research usually conducted is not at – or near – the pinnacle of such hierarchies.

Audits of research will often identify specific gaps; however, the body of work is nonetheless significant. For example, in 2011, the Institute published the results of an audit of all research in Australia from the previous 16 years relating to the protection of children – which includes prevention and early intervention work to support and strengthen vulnerable families (McDonald, Higgins, valentine, & Lamont, 2011). The audit showed that overall, a much larger proportion of projects focused upon child abuse and neglect after it had occurred (including the functioning of statutory child protection services) than on issues relating to prevention and early intervention. Sexual abuse research was more common than research on family violence as a form of maltreatment and much more common than research on physical abuse, neglect or psychological maltreatment.

Foster care continues to be an area that receives more attention in research than other types of out-of-home care, such as kinship and residential care. Outcomes for children in out-of-home care ('alternate care' or 'looked after children') are a common topic for out-of-home care research, while topics relating to permanency planning (e.g. reunification, adoption from care) constitute only a small proportion overall of this area of research (McDonald et al., 2011).

Although the proportion of projects focusing upon issues relating to Indigenous Australians has increased over the past 16 years, very few of those projects focus upon issues such as Indigenous community-led solutions to child welfare issues or partnerships between Indigenous communities and government/services. Little research was focused on children with disabilities and adolescence or families from a culturally and linguistically diverse background (McDonald et al., 2011).

⁹Other Australian organisations that conduct research or collate information relating to family well-being include the Melbourne Institute (who run the Household, Income and Labour Dynamics in Australia Study: http://www.melbourneinstitute.com/hilda/), the Australian Institute of Health and Welfare, the Australian Institute of Criminology, the Australian Housing and Urban Research Institute and the Social Policy Research Centre at the University of New South Wales. A central source of information on young families is the Longitudinal Study of Australian Children (a collaboration between Australian Institute of Family Studies, the Australian Bureau of Statistics and the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs: http://www.growing-upinaustralia.gov.au). The advocacy body representing the interests of families is Families Australia, and the peak body for service-delivery agencies is Family Relationship Services Australia.

¹⁰The Cochrane Collaboration (www.cochrane.org) is an international organisation whose primary aim is to help people make well-informed decisions about health care by preparing, maintaining and promoting the accessibility of systematic reviews of the evidence that underpins them. Similarly, the Campbell Collaboration (www.campbellcollaboration.org) helps people make well-informed decisions by preparing, maintaining and disseminating systematic reviews in education, crime and justice, and social welfare.

We can also learn a lot from systematic literature reviews (e.g. early childhood interventions) and drawing comparisons with overseas research. For example, in a systematic review of the efficacy of early childhood interventions, Wise et al. (2005) found that although most of the *evaluation* designs were at least adequate – and often good or excellent – there was considerable variability in the quality of *programme* design and implementation. They noted a complete absence of cost-benefit analyses of early childhood programmes in Australia.

Mechanisms for Evaluating Effectiveness of Policies

The effectiveness of family policy in Australia is evaluated in a range of ways:

- Use of large-scale longitudinal datasets to track families over time (HILDA, LSAC and LSIC¹¹) as
 well as regular surveys conducted by the Australian Bureau of Statistics on issues such as child
 care, parental leave and employment arrangements, which monitor trends
- Analysis of administrative data by government departments and nongovernment service-delivery agencies (e.g. child support, child care)
- Research commissioned to evaluate implementation of new policies or specific changes to legislative/policy environments (e.g. 2006 changes to the Family Law Act see Box 22.2)
- Comprehensive synthesis and desktop review of pre-existing data, reports and evaluations (e.g. a desktop review of the evaluation data relating to the Northern Territory Emergency Response see Box 22.3)

Research and evaluation is typically funded and commissioned by government agencies; however, independent research and analysis is conducted by the university and nongovernment sectors.

Box 22.3 The Northern Territory Emergency Response (NTER)

In June 2007, the Commonwealth and Northern Territory governments implemented a number of initiatives, known as the 'Northern Territory Emergency Response' (NTER) in 73 prescribed Indigenous communities that included most Aboriginal townships and town camps in the Northern Territory. Initially the aim was to reduce child sexual abuse but the high incidence of neglect and the presence of risk factors for other maltreatment types quickly expanded the focus. A range of risk factors for child abuse and neglect were targeted, including: poverty; substance abuse; mental illness; maternal education; overcrowding or unstable housing; health (including children with disabilities or low birth weight); dangerous/unsafe communities; drug/alcohol misuse; unemployment; and parenting skills and capacity (including the stresses on single parents; parents who were themselves victims of child abuse/neglect or poor parenting).

AIFS was commissioned to provide an independent desktop review of existing published data and reports relating to NTER measures to support families (Scott & Higgins, 2011). What we found was that concerns about the safety and well-being of children and families in Northern Territory Indigenous communities were legitimate. However, there is no nationally representative prevalence study of family dysfunction or child abuse and neglect anywhere in Australia to allow for comparisons between the six states and two territories within Australia, or adequate

(continued)

¹¹ For further information on these three national family/household datasets and access to reports based on the analysis of them, see http://flosse.fahcsia.gov.au.

Box 22.3 (continued)

historical data (from prior to the implementation of the NTER) to see whether levels of child abuse/neglect are changing in the NTER communities. The desktop review focused instead on factors known to increase the risk of child abuse (such as parental mental illness, parental substance abuse or family violence), or systems measures (such as notifications, referrals or specific treatment services efficacy data).

Internationally, it is understood that child abuse and neglect (particularly child sexual abuse) is under-reported, but that it is a common occurrence across all family forms and socioeconomic strata (although poverty and disadvantage are generally associated with higher risks of harm, particularly from neglect) (Higgins, 2010a).

Although it may be hard to produce definitive data to examine whether the NTER measures designed to support families and prevent and respond to child abuse and neglect have been successful in reducing the occurrence of child abuse/neglect, evidence suggests that they have increased awareness of the problem of child safety within Indigenous communities and provided additional resources to deal with increased reporting and investigation. These are essential components of the statutory system for identifying and responding to child safety concerns.

Data on long-term changes to family characteristics and social factors known to be associated with higher rates of child abuse/neglect in the NTER communities are not available to demonstrate whether these measures have had the intended effects. Surveys have also shown important positive changes in perceptions of community safety in NTER communities. In terms of supporting families, the limited qualitative and quantitative data available directly for NTER communities suggest that, at the least, the NTER has not made the situation worse for families and children – and many indicators are pointing in the right direction.

Source: Scott and Higgins (2011)

Quality assessments of policy are difficult. As Leigh (2009) noted:

In assessing any policy intervention, we need to know the counter factual – what would have happened in the absence of the policy. (p. 217)

Unless good baseline data are collected prior to a new policy being implemented or there is a staged roll-out or pilot in certain sites (with other sites that are equivalent either not receiving or having delayed implementation of the new 'policy' or intervention, e.g. the evaluation of the Family Court of Australia's Magellan case management model; see Higgins, 2007), it is difficult to attribute any outcomes to the policy per se. A notable example of such an evaluation that included a valid 'counterfactual' was the evaluation of the second phase of Stronger Families and Communities Strategy (SFCS) (led by the Social Policy Research Centre at UNSW in partnership with AIFS). The SFCS involved a series of area-based interventions aimed at families with young (pre-school) children living in disadvantaged areas. The central plank of the evaluation was a comparison of the 'Communities for Children' sites (where funding to family services was increased and improvements made to coordination of services in specific geographic locations with high levels of disadvantage) with similarly disadvantaged sites but where 'Communities for Children' was not operating. Based on a 3-wave longitudinal study of 2,202 families,¹² the evaluation showed evidence that the strategy had positive impacts on families in the intervention sites, with fewer children living in a jobless household and parents reporting less hostile or harsh parenting practices and feeling more effective in their roles as parents (Edwards et al., 2009) (See Box 22.4).

¹²The study is currently continuing, with two additional waves of data being collected in 2011–2012.

Box 22.4 Communities for Children: The Stronger Families and Communities Strategy 2004–2009

The Australian Government implemented the Stronger Families and Communities Strategy 2004–2009 to help families build better futures for children, focusing on pre-school children. There were four key elements to the strategy, the key one being Communities for Children, which was the focus of a national evaluation of the strategy. Under the Communities for Children programme, the Australian Government provided funds to community organisations to develop and implement a whole-of-community approach to enhancing early childhood development in 45 disadvantaged communities across Australia. It included a service coordination component, and injection of new funds to address gaps. A longitudinal survey of 2,202 families living in these communities (i.e., not just clients of specific services) focused on four priority outcomes: healthy young families; supporting families and parents; early learning and care; and child-friendly communities. Positive impacts include fewer children living in a jobless household, parents reporting less hostile or harsh parenting practices, and parents feeling more effective. Positive impacts were also found for hard-to-reach groups. Some negative findings were reported for the health outcomes of hard-to-reach, low-education and low-income families, which perhaps suggested greater surveillance and awareness (and reporting in the later waves of the survey) by these parents of their children's health needs. The evaluators concluded that the results suggest the Communities for Children model makes an important contribution to the well-being of disadvantaged children. Since the evaluation, the programme has been re-focussed on communities with high rates of child protection notifications. Communities for Children Plus is now being implemented in eight locations, with services directed at families with children aged up to 12.

Source: Edwards et al. (2009)

Revisions to Policies Following Evaluations

Conducting research or evaluation is one thing; being able to attribute policy change to a particular research study is something else. Given the modest size of the investment in research activities in Australia that relate to family well-being, in some areas, policymakers have the luxury of being able to draw upon a body of knowledge in order to change policies, but in other areas, the size of the evidence base is slim. However, it is gratifying as a researcher when governments recognise the paucity of research on which to base policy and specifically commission research to fill the gap or an evaluation to assess whether a new policy or a change in legislation has the intended effects. Below, I outline two such recent examples relating to family law and past adoption practices.

1. Family Law: Evaluation of the 2006 Changes

This major project evaluating the effects of the 2006 changes to the Family Law Act¹³ was conducted by AIFS during 2006–2009. It involved a variety of surveys, ranging in size and complexity, including interviewing parents who had separated and their children. AIFS developed the survey designs and sampling methodologies, as well as the strategies to handle sensitive topics with vulnerable populations. The largest survey component of the evaluation was a two-wave longitudinal

¹³ In 2006, Significant changes were made to the Family Law Act that highlighted the vulnerability of families to violence, and the risk to children's well-being of shared care arrangements (and to parents of needing to undergo mediation or 'dispute resolution') where serious risks of violence exist (See Box 22.2).

survey of 10,000 families who had separated since the introduction of the reforms in July 2006. It also included a survey of adolescents (12–18 years old) within those families. The sample included mothers and fathers (sometimes from the same ex-relationship) and was designed using the Child Support Agency's customer database as a sampling frame. Issues covered by the survey included sensitive topics such as violence and abuse, safety, experiences since separation and parent and child well-being. Results of the evaluation were a major contributor to the rationale for further reforms to the Family Law Act that occurred in 2012. These latest amendments to the Act strengthen the provisions to protect women and children from violence in the context of family separation/divorce. (See Box 22.2, earlier.)

- 2. Past Adoption Practices: A National Study of Needs and Service Responses
 The other example is the response to past adoption practices. As outlined in Box 22.1, the AIFS report (Kenny, Higgins, Soloff, & Sweid, 2012) complements the report from the Senate Community Affairs References Committee (2012) into the Commonwealth Contribution to Former Forced Adoption Policies and Practices. On the basis of the senate report on the role of the commonwealth in forced adoption and the AIFS national study on past adoption experiences, the Commonwealth and all states/territories with the exception of the Northern Territory have either issued an apology or announced their intention to do so to all those affected by past practices (see Box 22.1).
- 3. Communities for Children: The Stronger Families and Communities Strategy 2004–2009
 As outlined in Box 22.4, the findings from the national evaluation of the Stronger Families and Communities Strategy 2004–2009 led to refinement and extension of the strategy to new sites focusing on disadvantaged communities with high rates of notifications to statutory child protection authorities about harm to children. A range of promising practices that were identified during the evaluation have also been promulgated to policymakers and service providers through the Australian Institute of Family Studies' information exchanges (see www.aifs.gov.au/cafca/topics/index.html).

Challenges to Implementation and Assessment

In Australia, one of the greatest challenges to implementation of family-related policies is understanding who has jurisdiction and to work collaboratively within a federal system to achieve coordination between levels of government (Commonwealth, the six states, two territories and the vast number of local governments) and with stakeholders (the strong nongovernment organisational sector – who play a key role in service delivery, philanthropy and consumer/advocacy groups).

Conclusion

The role of social sciences in shaping family policy in Australia is difficult to analyse – though we can see some good examples of policy change that have grown from the research evidence, as highlighted earlier. However, we also know from research studies with policymakers that a range of factors contribute to the development of policy, and it is only when 'the stars align' that a clear link can be seen between research and a change in direction (Humphreys et al., 2010).

Sometimes social policy relating to families has been a (r)evolution; other times, they are reforms that quietly build on existing platforms. But there are some good examples of how family policies in Australia have been developed, refined or revolutionised on the basis of good research data.

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Part VI Family Policies in North America

Chapter 23 Canada's Patchwork Policy: Family Policy in the Canadian Context

Hilary A. Rose and Áine M. Humble

Abstract Contemporary Canadian society reflects the same demographic trends found in other western countries: families are smaller, older, and more diverse than ever before. Canada has had family policies since Confederation in 1867, yet it does not have a coordinated national family policy. Key factors that influence Canadian family policy include a decentralized political structure with two levels of government (federal/provincial), a bijural legal system (common law/civil code), and a recent ideological shift (welfare state/neoliberalism). To analyze Canadian family policy, we introduce a two-dimensional framework (i.e., three types of family policy by five family functions), citing examples of each. Given Canada's aging population, we explicitly use a lifespan development perspective as we examine policy with respect to family formation, family maintenance (younger families), family maintenance (older families), family dissolution, and family succession. We discuss the role of assessment and evaluation in family policy development and implementation and conclude with recommendations for policy makers and researchers alike.

Keywords Lifespan development perspective • Family formation • Family maintenance • Family dissolution • Family succession

Canada is the second largest country in the world. Its population, at 33.5 million (Statistics Canada, 2012d), is largely concentrated within approximately 100 miles of its common border with the USA, and its population density, at nine persons per square mile, is small compared to that of other countries (e.g., 90 in the USA). The country has two official languages: 58 % of Canadians speak English and 22 % speak French as their first language. There are also three recognized aboriginal groups in Canada: First Nations (formerly Indians), Métis, and Inuit (formerly Eskimos). Canada is a federation made up of ten provinces, plus three northern territories that fall generally under federal jurisdiction. It does not have a national family policy (e.g., Baker, 1995; Rose, 2012); instead some policies are carried out at the federal government level, some at provincial or territorial levels, and others at regional or municipal levels. Moreover, for historical reasons, family policy in French-speaking Quebec is unique in a number of ways. Thus, Canada's family policy approach has been described as "patchwork" by some authors (e.g., Hurley, 2005).

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In order to think about family policy in Canada, we must first situate family policy in the Canadian context. Thus, we present a brief review of current demographic trends followed by a discussion of five key sociohistorical dichotomies that influence family policy in Canada. We close this section with a brief comment on the state of Canadian research on families as a backdrop for evidence-based family policy. In the next section, we use a lifespan development perspective to discuss Canadian family policy with respect to different family functions: (a) family formation, (b) family maintenance (younger families), (c) family maintenance (older families), (d) family dissolution, and (e) family succession. Following that, we discuss the assessment of selected Canadian family policies (i.e., program evaluation, best practices). Finally, we present our conclusions and recommendations for family policy development, implementation, and assessment.

Characteristics of Canadian Families

In general, Canada shares several major demographic trends with other western countries (e.g., Kamerman & Kahn, 2001). These trends include decreased marriage and fertility rates, and increased cohabitation (particularly in Quebec), lone parenting, maternal employment, divorce, and life expectancy rates (Milan, Vézina, & Wells, 2007; Vanier Institute of the Family, 2010). In addition, due to decreased fertility and increased life expectancy, Canada's population is aging. By the time all of the baby boomers have retired (i.e., approximately 2030), 20 % of the Canadian population will be over 65 years (Vanier Institute of the Family). Currently, almost 15 % of the Canadian population is over 65 years of age, with a median age in Canada of 40 years, and a life expectancy of 79 years for men and 83 years for women. Within a decade, there will be more Canadians over the age of 65 than Canadians under the age of 15, that is, more seniors than children. In 2005, Canada was at the vanguard of legalizing same-sex marriage following the Netherlands, Belgium, and Spain (Rose, 2012).

Due to the enormous multicultural diversity of the Canadian family experience, it is not possible to describe a "typical" Canadian family (e.g., Albanese, 2010) either historically or currently. Nevertheless, some authors have offered a "snapshot," or series of snapshots, of Canadian families (e.g., Albanese; Milan et al., 2007). Household size has decreased over the twentieth century, down from slightly over four people per household 100 years ago to three people per household (Vanier Institute of the Family, 2010). For the first time ever, the 2006 Census reported that there were more single adults (i.e., single, divorced, widowed) in Canada than married adults. As of 2011, there were more Canadian couples (29.5 %) without children under age 24 than there were couples (26.5 %) with children under age 24 (Statistics Canada, 2012b). In addition, one in five Canadians was born outside of Canada (Milan et al., 2007; Vanier Institute of the Family, 2010). In sum, Canadian families today are smaller, older, and more diverse than ever before.

Sociohistorical Factors Influencing Canadian Family Policy

As previously stated, although Canada has many family policies, there is no coordinated national family policy (e.g., Baker, 1995; Rose, 2012). As early as Confederation in 1867, Canada has had policies and programs that impacted Canadian families (McDaniel, 1990). Many of these policies have worked against each other, however, as they were "put in place at different points in history, with different goals and different ideological orientations" (McDaniel, p. 4). As a result, words like "piecemeal" (Krull, 2010) and "patchwork" (Hurley, 2005) have often been used to describe Canadian family policies. At the same time, however, Quebec's coordinated family policy has been championed as a model family policy by several authors (e.g., Jenson, 2002; Krull, 2010).

In thinking about Canadian family policy, there are at least five key sociohistorical dichotomies to consider: (a) federal vs. provincial jurisdiction, (b) common law vs. civil code, (c) the welfare state vs. neoliberalism, (d) universal vs. targeted policy, and (e) family policy vs. a family perspective in policy. We discuss each of these dichotomies in turn.

Federal vs. provincial jurisdiction. Canada is made up of ten provinces (British Columbia, or BC; Alberta; Saskatchewan; Manitoba; Ontario; Quebec; New Brunswick, or NB; Prince Edward Island, or PEI; Nova Scotia, or NS; Newfoundland and Labrador, or NL) and three northern territories (Yukon; Nunavut; Northwest Territories, or NWT). With respect to governance, Canada has a decentralized political structure with two levels of government (Vail, 2002), federal and provincial, with the sparsely populated northern territories generally subsumed under federal authority. What decentralization means is that federal and provincial governments have divided authority over key aspects of Canadian life (Vail; Westhues, 2006). Whereas the monetary system is under federal authority or jurisdiction, the health care system is under provincial jurisdiction. Many aspects of family life are under provincial jurisdiction, but the distinction is fuzzy (e.g., Rose, 2012). For example, although the Divorce Act (1985) is federal, child custody falls under provincial jurisdiction. Most jurisdictions follow federal child support guidelines, but Manitoba, Quebec, and NB have their own child support guidelines. Some authors have concluded that Canada's decentralized political structure is one of the biggest barriers to creating a national family policy (e.g., Baker, 1995; Vail, 2002).

Common law vs. civil code. Historically, Canada was colonized by Great Britain and France, which introduced their own culture, language, and system of law. Canada was comprised initially of Upper and Lower Canada, with Upper Canada corresponding to Ontario and Lower Canada corresponding to Quebec. The population of Upper Canada was generally English-speaking and Protestant, and the population of Lower Canada was largely French-speaking and Catholic. Upper Canada laws were based in English common law (i.e., based on legal and judicial precedents), and Lower Canada laws were based in the French civil code (i.e., based on a comprehensive statement of laws). Thus, Canada is a bijural country; that is, it has two systems of law. As a result, family-related laws vary from province to province, but especially in comparison to Quebec. Separation following cohabitation is an example. Quebec civil code states that ex-partners do not have a right to sue for spousal support upon separation (i.e., cohabiting partners choose not to accept the rights or responsibilities of marriage), whereas in other provinces they do. There was recently a case before the Supreme Court of Canada that questioned the constitutionality of the Quebec law; the Supreme Court upheld the Quebec law (Canadian Broadcasting Corporation, or CBC, 2013).

The welfare state vs. neoliberalism. In Canada, the welfare state was introduced after World War II. This liberal ideology guided universal programs like the Family Allowance (a payment to mothers to help defray the costs of raising children), introduced in 1945, and Old Age Security (a pension), introduced in the 1950s (e.g., Baker, 1997). For the next four decades or so, Canada was described as having a liberal welfare ideology (Esping-Andersen, 1990). Beginning in the mid-1980s, however, similar to other western countries such as the UK and the USA (under Margaret Thatcher and Ronald Reagan), Canada began to shift from the welfare state to neoliberalism or economic rationalism (Baker, 1997). This shift toward neoliberalism (i.e., free trade, privatization, balanced budgets) has been described in terms of "retrenchment" (Lefebvre & Merrigan, 2003) and "restructuring" (Baker, 1997) of the welfare state. The Conservative government elected in 1984 vowed to cut expenditures on social programs; this shift has been described as an ongoing "war of attrition" (Baker, p. 11). This political ideology has persisted in Canada since that time regardless of which government has been in power.

Universal vs. *targeted policy*. Related to the distinction between the welfare state and neoliberalism is the distinction between universal and targeted family policy, which is based primarily on who is seen as needing support. Universal programs are based on the belief that all individuals deserve governmental support, whereas targeted programs are based on the belief that certain individuals have

greater needs than others and are therefore more deserving of governmental support. The Canadian Public Health Association (or CPHA, 2010) considers the introduction of universal programs in Canada (e.g., Family Allowance and Old Age Security, or OAS) to be one of Canada's great social policy achievements. Nevertheless, a shift from universal to targeted policy began during the 1980s, largely a function of neoliberalism and the perceived need to cut government spending on social programs. For example, a special tax, known as the clawback, was introduced on OAS benefits. OAS benefits became means-tested and are denied altogether when a given cutoff point is reached (Battle, 2003; CPHA, 2010). Thus, only certain individuals and families now qualify for programs that used to be universal in nature.

Family policy vs. a family perspective in policy. Several authors have highlighted the distinction between family policy and a family perspective regarding social policy (e.g., Bogenschneider & Corbett, 2010; Jenson, 2008). Families are affected not only by family policies but also by a broader range of social policies (Bogenschneider et al., 2012). In the Canadian context, several policy issues could benefit from a family lens or perspective. For example, affordable housing, accessible transportation, and time spent working outside the home all have implications for Canadian families (Jenson, 2008). In particular, time spent in the labor force is a two-edged sword: more time working means greater family income but also means less time spent with family – time that is needed for family leisure and caregiving (Duxbury & Higgins, 2009). This work-life balance issue is a good example of how social policy (i.e., labor laws) should be viewed from a family perspective. In addition, given the systemic nature of families, policies affecting individuals (e.g., divorcing parents) also influence and are influenced by other family members (i.e., their children) and thus should be viewed from a family perspective (Bogenschneider et al., 2012).

Research on Family Policy in Canada

Over the last 30 years, research on Canadian family policy has experienced a growth spurt. An informal search of the EBSCOhost database at the first author's university shows that between 1983 and 1992, there were six peer-reviewed journal articles published on Canadian family policy. Between 1993 and 2002, that number increased to 50 peer-reviewed articles, and between 2003 and 2012 (in progress at time of writing), there were 115 peer-reviewed articles published about family policy in Canada. In addition to the Canadian Review of Social Policy and Canadian Public Policy, there are disciplinary Canadian journals in psychology, sociology, medicine, public health, law, criminology, and economics (e.g., Canadian Journal on Aging, Canadian Journal of Family and Youth, and Canadian Woman Studies) that publish research relevant to family policy. The Canadian government also awards excellence in research by honoring researchers with the title "Canada Research Chair (CRC)." Among those CRCs who focus on family policy are Anne Gauthier (University of Calgary), the CRC in Comparative Family Policy, and Janice Keefe (Mount Saint Vincent University), the CRC in Aging and Caregiving Policy. Clearly, there is evidence of Canadian research that can inform family policy.

Family Policies and Functions

In this section, we present examples of Canadian family policies. To organize our presentation, we developed a table along two dimensions: types of family policy and family functions from a lifespan perspective (see Table 23.1). We give examples of policies according to three types that have been described in the literature (e.g., Baker, 1995; McDaniel, 1990): (a) legislation (e.g., family laws), (b) income policies (e.g., tax credits), and (c) social services (e.g., programs). We also use a lifespan

	Legislation (e.g., laws)	Policies (e.g., tax credits)	Services (e.g., programs)
Family formation (e.g., cohabitation, marriage, childbirth, adoption)	Civil Marriage Act	Maternal/parental leave benefits	Canada Prenatal Nutrition Program (CPNP)
Family maintenance (younger families) (e.g., childcare, work-life balance)	Section 43 of the Criminal Code (the "spanking" law)	Universal Child Care Benefit (UCCB)	Nobody's Perfect Parenting Program
Family maintenance (older families) (e.g., retirement, elder care)	Economic Action Plan 2012	Compassionate Care Benefit (CCB)	New Horizons for Seniors Program (NHSP)
Family dissolution (e.g., separation, divorce)	Divorce Act	Pension credit splitting	Caught in the Middle Program (Manitoba)
Family succession (e.g., death, inheritance)	Family Law Acts (provincial/ territorial)	Survivor benefits	Funeral and Burial Program (i.e., for veterans)

Table 23.1 Types of family policy by family function

development perspective (e.g., Baltes, 1987) with family functions (e.g., Bogenschneider et al., 2012) highlighted in terms of (a) family formation, (b) family maintenance (younger families), (c) family maintenance (older families), (d) family dissolution, and (e) family succession. For some Canadian authors, "family policy" refers primarily to policies that assist parents in raising and socializing children (e.g., Baker, 1995; Baril, Lefebvre & Merrigan, 2000; Krull, 2010). Given demographic trends described earlier (e.g., Canada's aging population), however, it seems appropriate to examine Canadian family policy from a broader lifespan perspective. It is not our goal to present an exhaustive list of Canadian family policies; we give examples of each type of policy for each family function. Although we focus on federal policy, we consider other policies as well (e.g., provincial Family Law Acts).

Family formation. Family formation refers to how families are created in the Canadian context, and it includes couplehood (whether by cohabitation, marriage, or remarriage) and parenthood (through birth, adoption, or foster care). In Canada, cohabitation or common-law marriage falls under provincial jurisdiction, so laws differ from province to province (especially in Quebec, which does not recognize cohabitation as a de facto marriage). In some instances at the federal level (e.g., joint income tax filing, pension credit splitting after divorce), common-law couples are treated as married couples with many of the rights associated with marriage. With the introduction of the Civil Marriage Act (2005) Canada became the fourth country in the world to legalize same-sex marriage (e.g., Rose, 2012). Bigamy and polygamy are illegal in Canada; these laws were upheld in a landmark ruling in BC (CBC, 2011).

Although adoption falls under provincial and territorial jurisdiction (including adoption by same-sex couples and Aboriginal custom adoption in Nunavut and NWT), laws about assisted reproduction fall under federal jurisdiction. Under the Criminal Code, buying and selling sperm, eggs, and embryos is illegal in Canada, as is paying a surrogate. Beginning in 2007, Assisted Human Reproduction Canada (AHRC, a federal agency) began operating in support of assisted human reproduction, but a court challenge over authority (i.e., federal vs. provincial) led to the closing of the agency (AHRC, 2012). The provinces have taken over health-related aspects of assisted reproduction. For example, whereas Quebec funds fertility treatment as part of its health care, Ontario does not. Furthermore, although abortion is legal in Canada, it is not uniformly available in Canada. For example, in PEI, Canada's smallest province, there are no hospitals that offer abortions (e.g., Shaw, 2006). In addition to funding hospital abortions, the three northern territories also provide travel grants for abortions.

Under the auspices of the federal Public Health Agency of Canada (PHAC) and managed jointly by federal, provincial, and territorial governments, the Canada Prenatal Nutrition Program (CPNP) aims to improve the health of vulnerable mothers and their infants (PHAC, 2011a). The program attempts to reduce the incidence of low birth weight in infants and increase the incidence of breast-feeding by providing funding to community groups who provide nutrition counseling, prenatal vitamins,

breastfeeding support, parent education, and referrals to other services. The program is targeted primarily at mothers who are at risk as a result of teen pregnancy, poverty, and isolation. Over half of the participants had a grade 12 education or less and a monthly income of \$1300 or less (PHAC, 2011b). A third of participants were single parents and another third were immigrants to Canada; a quarter of participants were members of First Nations. As well, almost half of the provinces and territories have implemented the WHO/UNICEF-sponsored Baby-Friendly Hospital Initiative program (i.e., BFI/IAB in Canada) that promotes breastfeeding (Breastfeeding Committee for Canada, 2012). As a result, 30 Canadian hospitals and clinics have been granted the "baby-friendly" designation since the initiative started in 1991.

Family maintenance (younger families). Once families are established, they need to be maintained over decades if not generations. Families at different life stages have different needs, and so we examine family maintenance in the context of both younger and older families. To facilitate the transition to parenthood, Canadian parents, whether biological or adoptive, who have worked and paid employment insurance premiums can access federal maternity and/or parental benefits (HRSDC, 2012a). Benefits are equal to 55 % of a parent's prior earnings up to a maximum of \$45,900 CDN; as of 2012, the maximum per week that could be received is \$485 up to a year, and benefits are taxable. Low-income families are also eligible for an additional Employment Insurance Family Supplement. There are provincial/territorial variations with respect to length of employment security. The transition to parenthood is associated with a shortage of time; working mothers in particular reported experiencing "time crunch" (Zukewich, 1998). Several provinces have therefore introduced a statutory holiday known as Family Day on the third Monday in February; it was first introduced in Alberta in 1990. Currently BC, Saskatchewan, and Ontario also observe Family Day. There is no national Family Day in Canada.

Given the increase in maternal employment in Canada, childcare is a necessity for many Canadian families (Cool, 2007), and not surprisingly, there have been repeated calls for a comprehensive national childcare policy (e.g., Broad & Foster, 2003; Friendly & Prentice, 2009). In 2004 the Liberals promised a national childcare program, but in 2006 the Conservatives replaced the Liberal initiative with the Universal Child Care Plan, consisting of the Universal Child Care Benefit (UCCB) and incentives to create more childcare spaces (regulated spaces are available for fewer than 20 % of children who require care). The UCCB is a taxable benefit (i.e., \$100 per child under age 6 per month) intended to assist families with childcare-related expenses (HRSDC, 2011b). Other federal benefits include the Child Care Expense Deduction, the Canada Child Tax Benefit, the National Child Benefit Supplement, and the Child Disability Benefit. Quebec has had a subsidized daycare program since 1997 (initially \$5 a day; increased to \$7 a day in 2004) as part of its comprehensive family policy (e.g., Krull, 2010). Although not without its critics (e.g., Baril et al., 2000), Quebec's family policy has been seen as a model for the rest of Canada (e.g., Albanese, 2010; Krull, 2010).

Various social service programs are available for young families. Health Canada, in cooperation with the Atlantic provinces (i.e., NB, NL, NS, and PEI), developed a parent education program for young, single parents who are less likely than others to have support or access to community resources. The program, Nobody's Perfect, introduced nationally in 1987, has been translated into several languages and has also been offered in Central and South American countries (Skrypnek & Charchun, 2009). One key aspect of raising children is discipline. In 1991, Canada signed and ratified the UN's Convention on the Rights of the Child. According to Article 19, signatory states shall take measures "to protect the child from all forms of physical or mental violence, injury, or abuse" (United Nations, 1990). As of 2012, however, 32 countries worldwide have outlawed spanking, and Canada is not one of them (Global Initiative to End All Corporal Punishment of Children, 2012). Section 43 of the Criminal Code of Canada (known as the "spanking law") states that corporal punishment of children is legal if the force is reasonable, that is, Section 43 does not allow corporal punishment of infants under 2 years or teenagers (Barnett, 2008). Furthermore, discipline using objects or slaps to the face

or head is unreasonable. In spite of calls to remove Section 43 from the Criminal Code (e.g., Durrant & Ensom, 2012), the Supreme Court of Canada has upheld the law.

Family maintenance (older families). Even after children leave home, there is a need for family maintenance. With Canada's aging population, there is an increasing need for care for older family members (Keefe, Légaré, & Carrière, 2007; Williams, Crooks, Giesbrecht, & Dykeman, 2010), and often this caregiving role falls to a spouse or adult daughter. In some cases, caregivers provide care for both children and aging parents, a situation referred to as "the sandwich generation" (Duxbury & Higgins, 2009; Williams et al., 2010). Furthermore, policies aimed at deinstitutionalizing care have contributed to increasing family caregiving demands. Thus, in 2004, the federal Compassionate Care Benefit was introduced (Service Canada, 2012d). Its goal is to provide job security and income for family members who leave the work force to care for a terminally ill individual. The Home Adaptations for Seniors' Independence (HASI) loan program increases the chances that seniors can remain in their homes (Canadian Mortgage and Housing Corporation, 2012). Provinces have programs for older individuals who require home care and other health-related services. For example, NS, with the oldest population in Canada (16.6 % of its population is 65 years or older; Statistics Canada, 2012d), has a Continuing Care Program and a Continuing Care Strategy to meet the needs of older citizens (NS Department of Health and Wellness, 2008).

Canada's pension system consists of three tiers (Whitehouse, 2010): (a) government transfer programs such as Old Age Security (OAS) and the Guaranteed Income Supplement (GIS), (b) the Canada/Quebec Pension Plans (CPP/QPP), and (c) private pension plans (i.e., through employers) and individual savings plans, which include general savings, Registered Retirement Savings Plans (RRSPs), and tax-free savings accounts (TFSAs). OAS is a universal benefit that is not dependent on being in the labor force, but at a certain income level (i.e., \$69,592 CDN in 2012), the benefit is clawed back (HRSDC, 2011b). In 2012, the government announced that eligibility for OAS would increase to age 67 from age 65 beginning in 2023, arguing that this increase is necessary "to ensure that the OAS program remains on a sustainable path" (Service Canada, 2012a). The GIS provides additional income for low-income seniors; in 2011, 34 % of OAS beneficiaries received some form of GIS (Townson, 2012). Canadians who were employed also receive either a CPP or QPP pension (Whitehouse, 2010). The amount received is indexed to income as employed individuals contribute a proportion of their income to the plan; the higher the income, the better the pension (in 2012 the average monthly CPP amount received was \$528.92 or \$842.98 if a disability benefit was included; Service Canada, 2012a). Finally, the government sponsors programs to assist Canadians with savings (i.e., Tier 3); these programs include RRSPs and TFSAs, both of which allow individuals to save for retirement while reducing taxes.

Related to the aging population and the increased need for elder care is the issue of elder abuse. Under the federal New Horizons for Seniors Program (NHSP), over 10,000 national community projects have been funded to date, many of them focusing on elder abuse. On World Elder Abuse Awareness Day 2012, the federal government announced an investment of an additional \$15 million in NHSP grant money to combat elder abuse (Canada News Centre, 2012). Another way that Canada raises awareness about different forms of elder abuse (e.g., financial) is via the Internet on a Government of Canada webpage (Seniors Canada, 2011). Resources, factsheets, and links to government services are presented in an attractive user-friendly format (e.g., "Fraud. Are you a target?"). With respect to legislation, however, there are no national laws specific to elder abuse (i.e., other than criminal assault), but several provinces (e.g., NS, Yukon) have Elder Protection Acts similar to Child Protection Acts, and Alberta and Manitoba have articulated elder abuse strategies.

Family dissolution. Family dissolution refers to how families break up, whether by separation, divorce, or removal of a child from the home. As an example of Canada's two levels of authority, divorce falls under federal jurisdiction (Divorce Act, 1985), but laws related to the division of assets fall under provincial jurisdiction. Following divorce, couples can apply for pension credit splitting,

allowing couples to split public pensions that have been earned during the marriage. Individuals must apply for this benefit, yet only 15 % of divorcing couples actually apply (Easton, 2009). Canada's first same-sex divorce occurred in 2004 (CBC, 2004). In 2003, when same-sex marriage was legalized in Ontario, a lesbian couple married and subsequently filed for divorce. It took a year for the divorce to be granted due to the discrepancy between Ontario's marriage law and Canada's divorce law. Same-sex divorce may be an issue for Americans who take advantage of Canada's same-sex marriage law. Some American same-sex couples who married in Canada could not divorce in their home states because they were not considered married in the first place (Rose, 2012). Thus, in 2012, Canada's Civil Marriage Act (2005) was amended to allow Canadian courts to grant divorces to nonresident spouses "who reside in a state where a divorce cannot be granted to them because that state does not recognize the validity of their marriage" (Kirkby, 2012, p. 4).

Even though it is a couple that separates or divorces, other family members are affected by the dissolution of the conjugal relationship. Although child support falls under federal jurisdiction, Manitoba, Quebec, and NB have their own child support guidelines. Provinces and territories have maintenance enforcement programs to ensure compliance with child support payments. In Manitoba, children of divorcing parents can participate in a program called Caught in the Middle (Manitoba Department of Family Services and Labour, 2012). In rare cases, family dissolution occurs when children are removed from the home and placed in the child welfare system. There are no national standards for foster care in Canada and not enough placements available given the demand (Ferris-Manning & Zandstra, 2003). Moreover, the child welfare system falls under provincial and territorial jurisdiction making it difficult to get an accurate picture of foster care at the national level – almost 50,000 foster children were counted for the first time in the 2011 Census (Statistics Canada, 2012a). Status (i.e., registered) First Nations children fall under federal authority (i.e., Indian Act, 1985), and these children are disproportionally found in foster care. Currently there is an ongoing human rights complaint with respect to federal underfunding of First Nations child welfare (CBC, 2012b).

Domestic or family violence is sometimes but not always associated with family dissolution. Recent findings (Statistics Canada, 2009) show that spousal violence is twice as common in married (including cohabiting) couples as it is in ex-partners, with women far more likely than men to be the victims. There are over 500 local shelters in Canada for women and children escaping family violence, with over 64,500 admissions reported from April 2009 to March 2010 (Statistics Canada, 2011). The highest rate (i.e., per 100,000 women) of admissions to shelters is found in the northern territories, with the lowest rate found in NL. As one example of policy that could benefit from a family perspective (Bogenschneider & Corbett, 2010), the Criminal Code of Canada includes few specific laws concerning family violence (one example is the law concerning infanticide). Instead, it includes general offences (e.g., assault, criminal harassment, homicide, sexual assault, uttering threats) that can be applied in cases of family violence. Most provincial and territorial jurisdictions have Family Violence Acts as well as Child Protection Acts (e.g., Alberta, NS, NL).

Family succession. Few family policy authors concern themselves with family succession (e.g., Baker, 1995; Bogenschneider & Corbett, 2010), but it is a family function that governments concern themselves with, especially with respect to benefits or tax policies. Family succession can refer to the passing on of a personal estate or family business to the next generation upon retirement (i.e., business succession) or death (i.e., estate succession). Here we focus on death and estate succession. Assisted suicide is illegal under Section 241 of the Criminal Code of Canada. In 2012, however, the Supreme Court in British Columbia ruled that Canada's law against physician-assisted suicide is unconstitutional, and barring an appeal, the federal government has a year to draft new legislation (CBC, 2012a). Inheritance falls under provincial or territorial jurisdiction (i.e., under Family Law Acts). In cases where a family member dies intestate, or without a will, each jurisdiction has guidelines about estate succession. The federal Allowance for the Survivor program provides a monthly benefit to low-income widowed spouses or common-law partners who are not yet eligible to receive OAS. Currently they need to be 60–64, but this will change to 62–66 with the incoming OAS eligibility increases

(Service Canada, 2012a). Individuals from same-sex couples are eligible for this allowance if their partner died after January 1, 1998.

The Canadian Pension Plan's (CPP) Survivor Benefits program consists of three different benefits: (a) death benefit, (b) survivor's pension, and (c) children's benefit (HRSDC, 2011b). The death benefit is a one-time payout to the estate of the deceased person who was receiving the CPP, and the amount received depends on the person's CPP contributions up to a maximum of \$2,500. The other two benefits are monthly benefits paid to the surviving spouse/common-law partner and dependent children. There are certain eligibility requirements regarding the deceased person's CPP contributions and the surviving spouse's CPP benefits that influence whether or not survivors receive benefits and how much they receive. Surviving partners must apply for their allowance and their children's allowance. The children's benefit was \$218.50/month in 2011. Following amendments to the CPP and several class-action lawsuits in the early 2000s, same-sex partners are now allowed to apply for the spousal benefit.

Currently there are no estate taxes in Canada, but three potential taxes exist: (a) income tax due to deemed disposition (e.g., a vacation home is "deemed" to have been sold immediately prior to death and is therefore taxable), (b) provincial probate or estate administration taxes (these vary by jurisdiction), and (c) US estate tax (if the deceased held US assets). There are few services and programs to assist families with family succession. Federally funded programs include the Funeral and Burial Program and the Decedent Estates Program; both of these programs are targeted to specific populations (Service Canada, 2012d). For veterans of Canadian wars, the federal government provides means-tested assistance with respect to funerals and burials. In addition, the federal government provides for the administration of the estates of First Nations individuals living on reserves. Individuals requiring a death certificate have to contact the vital statistics department of the jurisdiction (i.e., province or territory) in which they reside.

Family Policy Assessment

In order to know if policies work (i.e., achieve their goals), they must be evaluated or assessed. Family policies can be assessed in terms of efficiency, adequacy, and effectiveness (Bogenschneider et al., 2012; Westhues, 2006). The federal government requires that its policies and programs be evaluated in terms of program relevance, performance, and cost-effectiveness (Treasury Board of Canada Secretariate [TBS], 2012), but systematic procedures for provincial and municipal evaluations are less clear. Canadian policy evaluations also benefit from cross-national comparisons. The current neoliberalist ideology argues that the federal government spends too much money on social programs, yet comparing Canada's 2007 public social expenditure in terms of GDP with the average of other OECD countries (Adema, Fron, & Ladaique, 2011) suggests that this is not the case. Federal public spending on children's benefits was 1.5 % (OECD average = 2.2 %) and on seniors' benefits was 4.2 % (OECD average = 7 %).

The federal government requires evaluations of its programs every 5 years, and the TBS provides leadership with respect to assessment. For example, the Secretariat has introduced the Results-Based Management and Accountability Framework (RMAF), a template of questions for federal department managers to use to evaluate policies, programs, and initiatives with a goal of improving efficiency and effectiveness (TBS, 2010). Policies and programs can be assessed at different points in time for different reasons, with formative assessments occurring during the program in order to provide feedback about program implementation, and summative assessments occurring after the program as a cumulative measure of the program's outcomes. Additionally, both quantitative and qualitative methodologies are used in evaluations.

Regular program evaluations also identify best practices and provide accountability. The Public Health Agency of Canada sponsors an online best practices portal providing decision makers with

resources to help with health promotion programming (PHAC, 2012). Although these best practices do not necessarily reflect a family perspective, many of them do. The Nobody's Perfect parenting program for at-risk parents is an example of one of these (Skrypnek & Charchun, 2009). In general, however, accessing evaluation results can be difficult because they are not often published in peer-reviewed publications, but rather in government reports (formerly in print, but increasingly online). These evaluations are one example of grey literature, or scientific or technical information produced by governments, nonprofit organizations, or academics that is not disseminated by commercial publishers (Farace, Frantzen, Schopfel, Stock, & Boekhorst, 2005). Although there are concerns about the validity of research found in grey literature, in some cases, it is the only available source of information about government policies and programs.

In 2000, maternal/parental leave benefits were extended from a maximum leave of 30 weeks to a maximum leave of 50 weeks (following a 2-week waiting period). Subsequently, an evaluation of the legislation found that the program changes increased eligibility, participation rates, and satisfaction with maternal/parental leave (HRSDC, 2005). A recent study by Statistics Canada compared leave taking in Quebec (which has more generous benefits, e.g., a paternity leave) with the rest of Canada (Statistics Canada, 2012c). Parents in Quebec were more likely than other parents to take paid leave, particularly fathers. More than $\frac{3}{4}$ of newborns in Quebec had a father who took some leave, compared to about $\frac{1}{4}$ in the rest of Canada. An international study found that the majority of countries (n=180) provided mothers with 100 % wage replacement during maternity leave; most Canadian mothers receive 55 % wage replacement during maternal leave (Chaussard, Garecke, & Haymann, 2008). Critics have argued that the benefit is based on a traditional male model of employment with different implications for "racialized women, women with disabilities, Aboriginal women, lesbians, contingent workers, the self-employed and poor women" (Calder, 2006, p. 116).

The Canada Prenatal Nutrition Program (CPNP), introduced in 1994, provides funding to community groups to provide nutritional and other services for expectant mothers and their infants who are considered to be at risk (i.e., teen mothers, new arrivals to Canada, those living in poverty). In 2010, the Public Health Agency of Canada published a meta-analysis of a number of evaluations of the program using the government's RMAF guidelines (PHAC, 2010). The study found that almost half of mothers reported less social isolation, and about a third of mothers reported improved maternal health and increased initiation and duration of breastfeeding. In addition, participants with high exposure to the program were less likely to have low birth weight infants. The study showed that the CPNP is a cost-efficient program, especially with respect to increased rates of breastfeeding and decreased low birth weight rates. An international assessment of Canada's support for breastfeeding policies (Save the Children, 2012), however, gave Canada a rating of "fair," compared to other developed countries such as Norway with a rating of "very good" and the United States with a rating of "poor." Worldwide, 114 countries guarantee breastfeeding breaks for mothers; Canada does not (Chaussard et al., 2008).

Historically the federal government has not played a role in directly providing care for children (an exception being care for Aboriginal children – and the tragic legacy of the Indian residential school system; Health Canada, 2012). Nevertheless, the federal government has had an indirect role in providing financial support for childcare. The first benefit was the universal Family Allowance or "baby bonus" benefit (introduced in 1945 and eliminated in 1993). As previously mentioned, in 2006, as part of Canada's Universal Child Care Plan, the government announced the Universal Child Care Benefit (UCCB), a monthly payment of \$100 per child under the age of 6 years. The UCCB recently underwent a formative evaluation of its implementation and was found to be cost-effective (HRSDC, 2011a). In addition, the number of eligible children receiving the benefit increased from 89 % in 2006 to 95 % in 2007. The program is not without its critics who argue, among other things, that the UCCB should not be taxable (Battle, Torjman, & Mendelson, 2006).

The National Longitudinal Survey of Children and Youth (NLSCY), a long-term study of child development, began under the auspices of Statistics Canada and HRSDC in 1994. NLSCY findings

showed that the proportion of Canadian children in childcare increased significantly from 1995 to 2003 (Statistics Canada, 2006), although there are not enough licensed childcare spaces to meet the needs of Canadian families (Broad & Foster, 2003). Findings from the NLSCY have also shown that a quarter of Canadian children are considered to be vulnerable, that is, they have negative developmental outcomes (Willms, 2002). Interestingly, vulnerability and poverty were not found to be synonymous (the Canadian poverty rate is 11.4 %, slightly higher than the Organization for Economic Co-operation and Development's average of 11.1 %; OECD, 2011). Compared to 30 other developed countries (i.e., OECD members), Canada ranks 12th for overall child well-being (O'Hare, 2012). Canada's spanking law has also come under the international microscope, given that it is a signatory to the United Nation's Convention on the Rights of the Child which states that children should be protected from all forms of violence or abuse. Although many countries have outlawed spanking, it is legal in Canada to spank a child under certain circumstances (Barnett, 2008).

The Department of Finance recently commissioned a report on the status of Canada's pension system. Contrary to what government leaders have argued, the report concluded that Canada's pension system (which includes the Old Age Security, or OAS) is sustainable over time (Whitehouse, 2010). Furthermore, compared to other OECD countries, Canada spends far less on pensions (4.2 % compared to 7 % on average, OECD, 2011). Whitehouse (2010) concluded that Canada has a high-performing pension system (i.e., financially sustainable); nevertheless, given economic concerns, he recommended increasing the age of eligibility. Subsequently, the federal government argued that in its current form the OAS program is unsustainable, largely due to Canada's aging population. For example, over the next two decades, the number of OAS recipients is expected to double (Service Canada, 2012a). Thus, the federal government announced changes to OAS to ensure that the program remains sustainable for future generations. In particular, Canada is increasing the age of eligibility for OAS from 65 to 67 (and the age of eligibility for the Allowance for the Survivor from 60–64 to 62–66), a change that will be phased in gradually. Future evaluations will need to assess the impact of this policy modification.

In 2004 the government launched a program to assist family caregivers who take time off work to look after a dying family member. Although the Compassionate Care Benefit or CCB was hailed as an example of an "end-of-life care initiative of international excellence" (Osborne & Margo, 2005, p. 1), there were some early criticisms of the program. Initially the definition of a family member was narrow (e.g., spouse, parent), so some family members (e.g., sibling, grandparent) who provided care were ineligible. Furthermore, far fewer eligible Canadians accessed the benefit initially (less than 4 % of the budget was spent on claims in the first year of the program). Subsequently, the program was amended, with the definition of family members broadened to include extended family members and even friends considered to be family members (i.e., fictive kin) (Service Canada, 2012d). A recent evaluation showed that although the CCB is an important step toward assisting family caregivers, the program has not reached its full potential (Williams et al., 2010). For example, awareness of the program is still low (accounting for the lower-than-expected uptake), the application process is frustrating (as is the 2-week waiting period), and the length of the benefit (6 weeks of financial assistance; 8 weeks of secured employment) is too short.

Since the New Horizons for Seniors Program (NHSP) was introduced in 2004, numerous formative and summative evaluations have been conducted. The program's goal is to involve seniors in their communities to ensure that they benefit from and contribute to their quality of life (e.g., volunteerism, mentoring, elder abuse awareness). The program funds community-based projects run by Aboriginal band councils, municipalities, and nonprofit organizations up to \$25,000 per year (\$250,000 for projects targeting elder abuse awareness). A formative evaluation of the Elder Abuse Awareness (EAA) component of the NHSP found that there is a need for elder abuse awareness (which lags behind awareness of other family violence), and the demand for funding for elder abuse awareness is high (HRSDC, 2012b). Although the funded projects were in the early stages of implementation, they appeared to be targeting the program's goals, with half of the funded projects specifically mentioning

physical abuse and half of the funded projects specifically mentioning financial abuse. A summative evaluation of the Community Participation and Leadership (CPL) component of the NHSP found that although seniors participated in the funded projects, they were already active in their organizations, with few new seniors being attracted to the projects (HRSDC, 2012c).

Some policies have been legally challenged rather than systematically evaluated. For example, beginning in 2003 in Ontario (e.g., Rose, 2012), legislation that limited marriage to a woman and a man was found to be contrary to Canada's constitution (i.e., Section 15 of the Charter of Rights and Freedoms). Specifically, not allowing same-sex marriage was seen as a violation of human rights. Thus, Canada's laws changed, first at the provincial and territorial level, and finally at the federal level (i.e., the Civil Marriage Act, 2005). Similarly, laws that have discriminated against cohabiting couples (but not married couples) have seen court challenges on the grounds of constitutionality. One example of this was the case recently before the Supreme Court of Canada that challenged the constitutionality of Quebec's law with respect to spousal support in the case of separating partners (CBC, 2013). Although not typically considered to be assessments, we argue that such constitutional challenges are, in fact, a kind of grass-roots assessment – at least within the context of legislation.

Conclusions and Recommendations

In this final section, we review several key issues previously discussed (e.g., federal/provincial jurisdiction, welfare state/neoliberalism ideology), and we also make some recommendations with respect to policy development and research. First, and perhaps most importantly, Canada has many family policies, at many government levels, but it does not have a comprehensive, coordinated national family policy (e.g., Baker, 1995; Rose, 2012). Such a policy is probably not possible given the political structure of the country (i.e., federal vs. provincial jurisdiction) and the bijural nature of the legal system (i.e., common law in English Canada and the civil code in French Canada). Several provinces and territories have Family Laws Acts, but these are limited in scope as they tend to focus selectively on issues such as divorce and the division of assets. Quebec's comprehensive family policy, however, has been cited as a model family policy (e.g., Jenson, 2002; Krull, 2010). Nevertheless, having articulated family policies at the provincial level complicates policy development at the federal level and contributes to Canada's "patchwork" of family policy.

Similar to the USA, Canada can benefit from using a family lens to develop and assess family policy (Bogenschneider et al., 2012). In addition to policies that have direct effects for families, there are many more policies that have indirect effects on families, such as housing and transportation policies (Bogenschneider & Corbett, 2010; Jenson, 2008). A family lens includes a lifespan developmental perspective (Bogenschneider et al., 2012), and given Canada's aging population, a lifespan approach is essential to help policy makers allocate resources fairly and appropriately. Examples of using a family lens regarding labor policy include the Employment Insurance Maternal/Parental Benefits and Compassionate Care Benefits. An example where a lifespan perspective has not been implemented is Canada's pension plan, in which there are dropout provisions for raising young children (i.e., allowing parents to drop out of the plan for the years they were providing childcare, thus increasing their benefits), but no such provisions for late-career individuals who have to leave employment to provide adult care (BC Law Institute and Canadian Centre for Elder Law, 2010).

Since the 1980s, Canada has shifted from the welfare state with its universal social programs to neoliberalism with its targeted social programs. This ideology has now held sway for four decades regardless of the political orientation of a given government (i.e., conservative or liberal). One implication for families has to do with neoliberal beliefs in reduced government spending and increased privatization. These beliefs have lead in part to policies aimed at deinstitutionalizing care (i.e., the off-loading of care onto family members), which in turn created a need for benefits such as the Compassionate Care

Benefit (CCB). The distinction between universal and targeted programs hinges on who is eligible for benefits. For example, Canada recently broadened the definition of a family member with respect to the CCB. Yet, at the same time, it changed the eligibility requirements (i.e., increased the age of eligibility) for Old Age Security and the Allowance for the Survivor. Ironically, even when programs are described as being universal, they may in fact be targeted. As an example, the UCCB is for parents who provide care for children under the age of 6 years. Given that children over the age of six also need care, this program seems to be more targeted than universal.

Policies must be assessed in order to know if their goals are being met. Different stakeholders have different expectations, however, and these expectations may be in conflict with each other (e.g., cost-effectiveness vs. program impact). The federal government requires that its departments regularly evaluate their programs, but it is less clear what happens at provincial and municipal levels. Although program evaluation is an important first step, teasing out conflicting goals is complicated. As well, policies in one department have implications for those in other departments, or at other levels, with policies sometimes working against each other (Easton, 2009; McDaniel, 1990). For example, changes or cutbacks in federal services (e.g., increasing the age of eligibility) can mean that those services are off-loaded onto the provinces (Townson, 2012). Assessments also take many forms. Nationally, assessments can range from program evaluations to constitutional challenges, and at the international level, assessments can range from cross-national comparisons to political censures (e.g., pressure to endorse the UN's 2007 Declaration on the Rights of Indigenous Peoples, which Canada finally did in 2010).

Benefits and programs have to be accessible in order to be useful. In 2005, the government developed Service Canada, an online access point to almost 80 services available to Canadians (there are also Service Canada Centres where Canadians can apply for benefits in person). Online, the government provides links to information and benefits for Canadians experiencing various life events (e.g., raising a family, being a caregiver, and planning for retirement). According to recent statistics (Service Canada, 2012c), using the online access point (55 million visits in 2009–2010) is more popular than going to a center (10 million visits), but less popular than phoning the department (59 million visits). Nevertheless, there is concern that not all Canadians are aware of benefits available to them. Concerns about low uptake of benefits and programs suggest that Canadians are not well informed. For example, despite information available online about pension credit splitting following a divorce (Service Canada, 2012b), one study showed that only 15 % of eligible Canadians had applied for this benefit (Easton, 2009). Research has also shown that those Canadians who need services the most are least likely to know about them (Stolle & Gidengil, 2010).

In conclusion, we recommend that Canadian policy makers and researchers use a family lens (including the lifespan perspective) consistently when they develop, implement, and study policy. We also recommend that policy makers and researchers continue to evaluate policies, including interactions between policies, and make policies and information about them transparent and accessible to the Canadian public. Finally, we recommend that policy makers and researchers pay attention to the international context in which Canada's policies are situated so that Canada can honor its international commitments – especially with respect to human rights.

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Chapter 24 Romantic/Marital, Parental, and Familial Relationship Policies in the US

Jacki Fitzpatrick and Erin Kostina-Ritchey

Abstract Throughout its history, the United States of America (USA) has been characterized by a duality of cultural value sets that focus on (a) individuality, self-initiative, and privacy as well as (b) social conformity, charity, and social stability. Although there have been time periods when one value set has had more influence on family policy, neither value set has been able to retain prominence. This fluctuation in value prominence has resulted in policies that are transitory and prone to change. In addition, multiple levels of government (e.g., local, state, federal) can create family laws/policies, and there might be little consistency across the levels. Collectively, these conditions contribute to a public policy system that is fluid and emergent. This chapter will provide an overview of the (a) socioeconomic context and (b) specific aspects of family life (e.g., marriage, childrearing, work, care for vulnerable individuals) that are impacted by US policies. A list of specific policies (Table 24.1) is provided to exemplify the development of family laws over time.

Keywords/Phrases Branches of government • Children's rights • Common-law marriage • Conformity • Day care • Gay/lesbian • Individuality • Parens patriae • Privacy • Reproductive technology

Introduction/Impact

The United States of America (USA) is a country with a history of values and policies that have not been fully integrated into a single coherent approach. When European settlers landed on the eastern shores in the 1600s, they were seeking freedom from economic and religious constraints. Thus, there was an early emphasis on individual rights, self-initiative, and privacy (e.g., Kamerman & Kahn, 2001). Yet, these settlers varied in the degree of respect and tolerance that they demonstrated to the indigenous peoples (e.g., Native Americans) that had preestablished cultures and territories. Some settlers assumed that the indigenous populations were ignorant of the proper way to create and maintain families (e.g., Gross, 2003). So, the settlers used various strategies (e.g., education, physical force) to (a) move the indigenous peoples away from the new settlements and/or (b) attempt to alter their daily lives so that they fit the "proper" family model (based on religious or European

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historical models). Thus, there was an early emphasis on conformity, reflected in (a) judgment of acceptability of certain family structures and (b) imposition of compliance for the sake of community stability (e.g., Teitelbaum, 1985).

Since the 1600s, these two main cultural values (individuality vs. conformity) have remained within USA society (O'Hara, 1998). Although there have been periods in which one structure had a clear dominance in public policy, the dominance has typically been brief and temporary. Even in the last 20 years, much of family law/policy has been subjected to ongoing debate, tension, and change (Goode, 2003; Peterman & Jones, 2003; Thomas, 1995).

There is not a single accepted definition of "family" in the USA. Many diverse family structures (e.g., traditional, single parent, divorced, gay/lesbian, remarried, adoptive, cross-generational) coexist in communities across the country. The structures might vary in the degree of legal rights or social acceptance that they experience (e.g., Leon, 2002; Marsiglio & Hinojosa, 2007), but no family can be forced out of a community for simply belonging to one of these structures [for information about demographic characteristics (including family structures), see http://www.census.gov/compendia/statab/2012edition.html]. In addition, various groups (e.g., religious, cultural, political) have the freedom to offer their viewpoint on (a) the parameters of a family and (b) which structures are best/preferred (O'Hara, 1998). These groups can attempt to influence family policies that define family formation processes and access to societal services offered to help families (e.g., Anderson, 2006; Feldblum & Appleberry, 2006). They can also set conditions, such that individuals cannot be part of their groups unless they abide by the group's family definition (e.g., Koppelman, 2004). Yet, no group has gained sufficient influence to permanently set a standard for all families.

Within the USA government, there is no distinct unit dedicated to the oversight of all family policies. Primary family policies (e.g., marriage, parenthood) are managed by the Administration for Children and Families, which is part of a broader agency (Department of Health of Human Services). However, family functions/dynamics are affected by policies that are managed in other government agencies (education, justice). Family laws/policies also can be created at the local (town, city, county), state, and federal level (Peterman & Jones, 2003). It has been argued that these levels are necessary to allow local governments to address conditions specific to their geographic region (e.g., Huffman & Kilkenny, 2007; Krinsky, 2007). These levels of family law/policy are also consistent with the USA cultural emphasis on individuality/self-initiative.

Summatively, these value issues and governmental processes have resulted in a family policy system that is fragmented. Policy consistency across regions, topic areas (e.g., health, labor), and time periods has not been typically achieved (Kamerman & Kahn, 2001). Rather, USA policy/law has been fluid and emergent (e.g., Krinsky, 2007; Meyer, 2010). In comparison to some other countries, the USA is still a relatively young (240 years) country. Thus, the fluidity might simply reflect the "growing pains" of a nation. The fluidity might also reflect the responsiveness of various agencies/levels of government to the family choices of a large and diverse population (approximately 300 million people in approximately 4 million square miles/10 million square kilometers). In addition, the freedoms given to USA citizens (e.g., express opposing viewpoints) might slow resolution on family policy issues (e.g., Feldblum & Appleberry, 2006; O'Hara, 1998; Ryan, 1995). Thus, the lack of policy clarity might reflect what some individuals would consider the best features of USA society.

Socioeconomic Context

Colonial Period (1500s–1800s)

During this period, the USA was an agrarian society. Both indigenous and immigrant populations lived in small communities. The communities survived as a result of their labor (e.g., farming, hunting). Indigenous populations varied in the extent to which they were matrilineal (female-headed) or

24 USA Policies 375

patrilineal (male-headed). Generally, the populations held collectivistic values (Tharp, 2006). Families and children were considered part of the larger community, and communities were responsible for family well-being (Gross, 2003). Multiple adults participated in the care of children. Thus, family wellness was a communal responsibility.

In immigrant families, there was more emphasis on individualistic values. Community support might be available, but was not necessarily imposed. Privacy was protected and many societal functions were conducted in the home. Immigrant families were often patrilineal – fathers were legally and socially treated as the heads of the household (Teitelbaum, 1985). Women and children were treated as subordinate to men in families (e.g., Hartog, 2000). In both indigenous and immigrant cultures, childhood was brief (3–6 years). After these early years, children either engaged in manual labor with their families or were sent away (to other communities/regions) for additional education (e.g., Laslett, 1973).

Industrial Period (1800s–1920s)

Industrialization was a cross-national process of manufacturing and mechanization. As industrial work occurred in centralized locations, many Americans moved from rural (agrarian communities) to newly built urban (city) environments (Teitelbaum, 1985). Transportation also made it possible for people to move away from their ancestral territory. For the first time in USA history, many families/individuals had freedom of mobility (Burks & Rubenstein, 1980). This mobility was consistent with values of self-initiative and privacy, as individuals were free to find communities that fit or accepted their family lifestyle.

However, this freedom was not afforded to everyone. Since the 1600s, various regions within the USA had engaged in slavery. Individuals (often of African or Caribbean/South American descent) were treated as the property of (primarily) white Americans (Dill, 1988). Under these conditions, Americans could impose their will on slaves (as people who needed to be controlled by a superior culture). Slave owners chose whether slave families were kept together or separated (sent to multiple locations). Thus, slave families were deprived of the freedoms available to other families (Pargas, 2009). During the 1860s, a civil war between Northern and Southern states was waged. The Northern states won the war, and the abolishment of slavery became law. However, the abolition did not mean that African-American families enjoyed all the benefits of USA society. Rather, these families were deprived equal rights for many decades (e.g., Fine, Schwebel, & James-Meyers, 1987).

Postindustrial Period (1900-1950s)

The first half of the twentieth century saw significant changes in family formation/policy. In part, as a legacy of the Colonial Period, child labor was legally permitted through the Industrial Period. Thus, children were permitted to work in factories for long periods with no social protections. However, there was a change in social attitudes during the 1910s–1920s. Technological advances (e.g., photography, newspapers) made it possible to bring national attention to the children's working conditions. There emerged an emphasis in USA law on "parens patriae," in which the federal government had a vested responsibility for the well-being of children (Clark, 1991). This emphasis meant the USA could (under limited conditions) supersede the judgment of children's parents. Thus, the government could (a) abolish child labor in most settings (Novkov, 2000) and (b) require that children participate in a national education system.

The emphasis expanded during the Great Depression (1920–1940s). The Great Depression was a transnational economic downfall, characterized by lengthy and widespread poverty. Most families lacked the resources to sustain themselves and local/state governments were unable to meet their needs (e.g., food, shelter). There was some debate about whether (a) families should be left to save

themselves or (b) families needed government support to survive. Given the pervasiveness of the problems, the latter viewpoint took prominence and series of national programs (generally known as the New Deal) were provided (Bremer, 1975).

Immediately after World War II (1945–1950s), there were a series of national programs provided to veterans. These programs (e.g., education grants, job training) made it possible for veterans (and their families) to elevate their incomes. Income made home ownership possible, and millions of families created suburban communities. The veteran benefits have been credited as a source of tremendous prosperity (e.g., Levine & Levine, 2011).

Modern Period (1950s-2012)

The latter half of the twentieth century (1950s–1970s) began with an emphasis upon equality. Similar to the focus on governmental obligation (patriae) to protect children in the 1920s, this period focus on governmental obligation to protect the rights of individuals/families of cultural minority groups (e.g., African-Americans, Hispanic Americans). There was also a Women's Rights Movement to focus on similar equality for females. One focus of this movement was reducing the supremacy of males in various domains (e.g., family life, employment). During this same period, there were significant advances in reproductive/contraceptive technologies. Thus, women had more control over (a) whether they became pregnant and (b) how many children they had (e.g., Ryan, 1995). These technologies also made parenthood (outside of heterosexual marriage) an easier option (for men and women) to achieve (Hernandez, 2012). Among indigenous populations, there was some effort to seek basic civil protections, but there was also an effort to protect/reclaim the unique cultural tradition/laws of their own ancestry (Gross, 2003). Thus, some indigenous groups were afforded the right to create family laws/policies that were distinct from general USA policies. Toward the end of this period, an emphasis on civil rights for gay/lesbian adults began to emerge (Meyer, 2010).

During the last 40 years (1970s–2012), there has been a growth of diverse family structures. A reduction of divorce law restrictions has made it easier to (a) dissolve first marriages and/or (b) engage in remarriages. Via adoption or reproductive technology, men and women can become single parents. Across states/regions, gay/lesbian adults have various levels of legal rights to marry and/or have children. This proliferation has highlighted the dialectical nature of American values. The value of self-initiative supports the premise that individuals should choose the family structure that they prefer (e.g., Scanzoni, 2001). The value of patriae supports the premise that the USA is impacted by family choices, so the government should guide individuals to make "proper" choices (e.g., Goode, 2003; Thomas, 1995). From this latter viewpoint, coercive legal measures to restrict choices can be appropriate and/or necessary.

Family Functions

Marriage

Throughout its history, heterosexual (male and female) monogamous marriage has been presented as a relational model within the USA. It has been idealized as the proper outcome of serious romantic relationships to which adults should aspire. It has been argued that marriage serves several social functions that are good for both individuals and the country (e.g., Goode, 2003; Peterman & Jones, 2003). During the modern period, there have been various resources developed (e.g., premarital education/therapy) to promote and/or sustain marriages.

24 USA Policies 377

However, historians have emphasized that this ideal does not always match the reality of marital or family life (Hartog, 2000). For example, they have noted that divorce rates have been reported since the 1800s and fluctuated over the decades (Shenkman, 1988). In addition, marital stability is not necessarily an indicator of happiness or quality of family life. Unhappily married couples often find that it is too difficult to remain together. Indeed, some family environments have been safer for children (and adults) after couples divorced (Amato, 2000).

In USA history, there were periods during which marriage restrictions were utilized to limit racial integration. Until the 1960s, there were several states in which it was illegal for interracial couples to marry. In the 1967 case of Loving v. Virginia, the USA Supreme Court (the highest USA judiciary authority) ruled that it was illegal to place such restrictions on marriage. Thus, the court ruled that all state laws which prohibited such marriages were illegal. This case has also been used to argue for the legitimacy of other interracial/interethnic couples (e.g., Fryer, 2007).

All states within the USA recognize legal heterosexual marriages (Peterman & Jones, 2003). These marriages typically require a license and ceremony conducted by a religious or legal representative (e.g., judge). However, some states also recognize common-law marriages (e.g., Teitelbaum, 1985). These marriages might not have the same legal elements (e.g., license). Rather, the relationships are recognized as marriages due to behavioral patterns over years (e.g., partners live together and share routine tasks, partners present themselves publicly as a couple). Thus, couples can earn recognition as "married" because they have fulfilled functions that would typically be conducted by husbands and wives (e.g., Semonche, 1965).

It should be noted that some heterosexual couples choose to live together, but not marry (or seek recognition via common-law marriage). These couples would be classified as cohabitors. There are no federal guidelines on cohabitation, and states vary on (a) whether they recognize cohabitation as an acceptable relationship structure and (b) the legal rights to which cohabitors are entitled (Barlow, Duncan, James, & Park, 2005). For example, cohabitors might not have rights to make health-care decisions or even visit partners in the hospital.

Similar to heterosexual cohabitors, gay/lesbian couples' legal rights vary across states. A few states allow gay/lesbian couples to marry. These states indicated that the USA privacy and equality values mean that these couples (a) cannot be prohibited from marriage and (b) should have the same rights/ privileges as heterosexual married couples (e.g., Koppelman, 2004). In contrast, some states have only allowed gay/lesbian couples to have civil unions or domestic partnerships. These unions/partnerships allow couples access to some (but not all) of the rights of marriage (Hernandez, 2012; Meyer, 2010). Thus, partnership laws are consistent with the emphasis on (a) superiority of certain family structures and (b) restrictiveness toward groups who deviate from the structures. In many states, gay/lesbian couples have no legal rights.

In 1996, President Clinton signed the Defense of Marriage Act (DOMA). This act specifies that the federal government recognizes marriage as only occurring between heterosexual monogamous couples. DOMA also stipulated that states do not have to recognize the legal status of couples who do not meet this definition. Thus, a gay/lesbian couple who marries in one state might have no legal marital rights if they move to another state. During the twenty-first century, there has been debate as to whether DOMA should be eliminated to respect the diversity of marital/romantic relationship structures (e.g., Natale & Miller-Cribbs, 2012).

In the USA, divorce is a legal process. Up until the mid-twentieth century, it was common for divorce laws to be restrictive (Shenkman, 1988). Similar to other crimes (e.g., robbery), spouses were required to accuse their partners of harm and seek divorce (as protection from harm). However, this divorce law structure did not deter people who were seeking to end marriages (Hamilton, 2006). There was also a debate as to whether trying to keep spouses in unhappy relationships was good for them, their children, or the society (Amato, 2000). Thus, a no-fault divorce system was created, in which neither spouse has to be a criminal (or at fault). Rather, spouses can simply state that they have irreconcilable differences (Hamilton, 2006).

Domestic violence (physical harm of partners/children) is a crime in the USA legal system. With the exception of immediate protection of self or children, no justification for domestic violence is considered acceptable. In some states, victims do not have to ask that the abusers be arrested. Rather, the police can determine that abuse has occurred and take actions that they deem appropriate for protection (e.g., Johnson, 2010). Thus, domestic violence is a situation in which state/federal authorities typically place a greater primacy on health rights than family privacy rights. This is consistent with the parens patriae emphasis on government responsibility for vulnerable individuals (e.g., Clark, 1991; Hamilton, 2006).

Childbearing

In the USA, childbearing is an individual right. Women are legally recognized as having the right to choose whether they will have children (Van Zyl, 2002). Male relatives (husbands, fathers, brothers) or family elders do not have the legal right to coerce women's childbearing decisions (Dunlap, Stürzenhofecker, & Johnson, 2006). In 1973, the US Supreme Court ruled (Roe v. Wade) that women had the right to have abortions if they wished to terminate pregnancies. States could apply some restrictions on the parameters of abortion (e.g., waiting periods, length of pregnancy), but states did not have the right to make abortions a crime. It has been argued that this decision placed greater primacy on women's rights (to self-determination) than children's rights (to be born or protected by the government).

Reproductive/contraceptive technology is easily available within the USA. Although there are some restrictions on access for adolescents, adults are able to make their own choices. Via genetic donations (e.g., sperm, eggs) or surrogacy, married and unmarried (single, cohabiting) adults are able to become parents (Van Zyl, 2002). Donations also make it possible for gay/lesbian individuals to have children (Hernandez, 2012).

USA adults also engage in adoption (of children born within the USA or other countries). Adoption has been a common part of USA culture since the Industrial Period, and international adoption increased after several wars in the twentieth century (e.g., Hollingsworth & Ruffin, 2002). Thus, some social stigmas/restrictions about adoption have declined over the decades (Suter, Reyes, & Ballard, 2011). Indeed, some parents choose open adoption in which the biological parents have ongoing contact with the adoptive family. Adopted children have the same legal status as biological children (e.g., protection from harm, inheritance rights).

There are not general restrictions/policies as to (a) whether adults have children, (b) whether children are brought into families via natural biology/technology/adoption, and (c) how many children adults choose to have. This lack of restriction is consistent with the American value of privacy and self-determination (Hamilton, 2006). However, this privacy is balanced with an emphasis on self-sufficiency. The government does not provide family allowances/financial support for having children. So, there is a societal expectation that adults will have only the number of children for whom they can provide care without funding from the government (e.g., Dunlap et al., 2006). If parents cannot afford to meet their children's needs and the government has to provide financial support, then some have argued that these adults have abdicated their rights to private decisions. Some laws have been proposed which would limit the reproductive rights of adults who lack financial resources for family self-sufficiency.

Childrearing

Similar to childbearing rights, there is a great degree of freedom in childrearing choices. Unless parents engage in abusive (e.g., beating) or neglectful (e.g., starving) behaviors toward their children,

24 USA Policies 379

governments do not intervene in daily parenting practices (Cahn, 2006). Thus, adults are permitted to choose their own parenting styles, including disciplinary techniques. Parenting classes are offered by many government and private agencies, but the classes are not typically required before or during parenthood. This approach fits with the historical (a) primacy of adults' rights over children's rights and (b) family privacy rights (e.g., Teitelbaum, 1985).

However, the USA is affected by the outcome of childrearing (Goode, 2003). If children are raised effectively, then they are likely to become productive members of society. If children are raised ineffectively, then they are likely to become unproductive or even dysfunctional members of society. In order to increase the likelihood of effective childrearing, there are some legal requirements for child wellness (Teitelbaum, 1985). For example, parents are required to assure that children receive an adequate education (Ethridge & Percy, 1993). Free public education is offered for both boys and girls until late adolescence. In addition, parents are required to assure that children receive immunizations against certain diseases (e.g., measles). These requirements focus on conformity values. However, some states allow parents to decline services (e.g., public education, immunizations) in response to families' religious beliefs systems (e.g., Hamilton, 2006). Thus, these states might place a greater emphasis on individual (religious) rights than communal values (e.g., benefits of an immunized population).

There are emerging trends in the recognition of children's rights. For example, some judges allow children (during divorce proceedings) to express a preference for a postdivorce caretaker. There is a standard to consider children's best interests in family transitions, such as divorce (Clark, 1991). A few states require that older children provide consent for their own adoptions (e.g., Cahn, 2006). Adolescents also have the option (in some states) to become emancipated minors, which terminates the legal rights/obligations of their parents. These trends acknowledge that children might have some insights into (a) family dynamics and (b) their own best interests. These trends also highlight the possibility that there can be discrepancies (a) among adults (Hamilton, 2006) and/or (b) between adult and child perspectives. There is not yet legal consistency on whose viewpoint should take precedence when discrepancies occur.

Work/Family Balance

Since the Industrial Period in the USA, work and family were legally treated as separate spheres (Teitelbaum, 1985). Employers provided payment in return for workers' labor. However, employers had no legal obligation to consider the ways in which work affected families. If families had situations (e.g., child care) that might potentially interfere with work productivity, then it was the families' responsibilities to address these situations with their own resources (e.g., Hamilton, 2006). For example, there is no national child care system in the USA (Anderson, 2006); each family faces the challenges of finding (and funding) child care services. The separate spheres approach respected family privacy but also emphasized self-sufficiency. If families were unable to resolve issues via self-sufficiency, then their employment could be terminated (for insufficient productivity). Given that other family benefits (e.g., health-care access) are directly tied to employment, unemployment is a significant hindrance.

In 1993, the Family and Medical Leave Act (FMLA) was passed. This law gave some protections to employees who needed flexibility to address family situations (Feldblum & Appleberry, 2006). For example, FMLA assures that parents cannot be fired simply because they took time away from work (leave) for childbirth or adoption. However, FMLA does not require that parents receive financial support (from employers or government) during this period. Thus, it is referred to as unpaid leave. Few US families can afford an extended period (e.g., 3 months) of unpaid leave, so they often return to work after only a few days/weeks of leave time. Some groups are concerned that too much assistance would promote inappropriate values/behaviors (e.g., dependency, laziness) and undermine self-sufficiency (e.g., Krinsky, 2007). Therefore, some have argued that restrictive working conditions are a social good.

At-Risk Families

The USA culture has been characterized by ambivalence or contradictions about at-risk families (Fitzpatrick & Gomez, 1997; Kamerman & Kahn, 2001). One approach is based on the premise that family problems are private issues. Within this approach, the government should not interfere with the problems that families face. Even the provision of support services (e.g., medical care, financial allowance) might be seen as a form of interference (Caputo, 2003; Dumon & Aldous, 1979). For some religious groups, family problems represent a form of punishment/retribution from an omnipotent being. Thus, any government assistance questions the existence or righteousness of this being (e.g., Hamilton, 2006). There is also an argument that family members will be closer if they rely upon each other to address problems (e.g., Anderson, 2006). Thus, family self-sufficiency would be hindered by government assistance. From this approach, any government support for families should be kept to a minimum.

In contrast, a second approach is based on the premise that the USA is a generous and charitable country. Compared to other countries, this country has known long periods of peace, stability, and prosperity. Therefore, some have argued that all of its citizens should benefit from its prosperity (e.g., Dobbie, 2009). In addition, the outcome of any family problem is likely to affect the quality of life for the entire country (e.g., Goode, 2003). When one family has a problem, it is hardly noticeable. When 50 million families have problems, impacts on the larger society will be unavoidable and inevitable. There is also an argument that it is unrealistic and even cruel to expect that most families will be able to solve some problems (e.g., poverty, disability) independently (e.g., Mohan, 2010). The USA Constitution notes that its citizens have rights to life, liberty, and pursuit of happiness. Thus, the argument has been made that the government has an obligation to create conditions that facilitate everyone's opportunity to enjoy these rights. From this approach, government support for families should be (a) sufficient to meet basic human needs or (b) ideally maximized to foster wellness (Seccombe, 2000).

Despite its overall wealth, approximately 15% of families live in poverty. In general, the USA government had little involvement in addressing poverty until the New Deal (1930s). The New Deal represented a patchwork of programs (housing, employment) to improve living conditions for families (e.g., Bremer, 1975). Some programs (job training) were designed to provide temporary aid, whereas other programs were designed to be permanent aid for individuals who had little chance of sustained employment (e.g., individuals with disabilities).

The legacy of patchwork continues to this day. It is commonly reported that the combination of private agency/government aid is insufficient to meet the needs of all poor families (e.g., Seccombe, 2000). Government aid programs are managed via diverse departments (e.g., food stamps – Department of Agriculture, rent subsidies – Department of Housing and Urban Development). Although families can utilize services from diverse departments, there are hindrances to accumulation (e.g., Fitzpatrick & Gomez, 1997; Reichman, Teitler, & Curtis, 2005). Thus, the perception of too much aid (from one or more agencies) might preclude eligibility for other services. Some government and charitable agencies have tried to use access to aid as a means to influence personal behavior/family formation (e.g., Broadhead-Fearn & White, 2006). For example, some states provided more financial aid to single mothers who married than single mothers who remained unmarried. These state governments argued that this approach fostered family stability (via heterosexual marriage), and such stability would facilitate a pathway out of poverty (Thomas, 1995). There is currently concern about the financial disparity that is growing between USA families.

If families have members who have physical or psychological disabilities, then they are also classified as at-risk families. Up to the twentieth century, disabilities were treated in a similar manner as poverty. With the exception of war veterans, there was not a general sense that the government had an obligation to provide any assistance. Disabilities were treated as private matters that did not receive open public attention. However, two USA presidents worked to alter the governments' degree of involvement. President Franklin Roosevelt (1932–1945) had polio and facilitated national campaigns

24 USA Policies 381

to (a) improve treatment conditions and (b) find a cure (Rogers, 2007). Thus, he fostered public dialogue about physical disabilities. President John Kennedy (1960–1963) focused public attention on mental health/wellness. For example, he promoted the development of community mental health centers and created a presidential committee to foster the integration of scientific knowledge and client services. These initiatives served as a foundation for later mental health policies (Cutler, Bevilacqua, & McFarland, 2003).

In 1990, the Americans with Disabilities Act (ADA) was passed. Similar to the Civil Rights Movement, ADA was based on the premise that individuals with disabilities deserve equal access to all levels of USA society (Batavia & Schriner, 2001). For example, adults should be able to engage in employment alongside adults without disabilities. As a legacy of the New Deal, individuals who are unable to work can receive financial assistance from the government. However, there is still some debate as to the limits of aid that the government should provide. For example, there is concern that advanced medical technology might make it easier for individuals with disabilities to live for longer periods of time (even decades). Unfortunately, there is no clarity about who will pay for the ongoing care that such individuals/families receive. In addition, there is no consensus on end-of-life decisions (e.g., Nelson, 2011).

A third type of at-risk families has elderly family members. From its Colonial Period, the USA has been a youth-oriented culture (Shenkman, 1988). Older adults have not been consistently revered or received familial/governmental support (Laslett, 1973). If elders had no family members who were able/willing to care for them, they were responsible for seeking their own aid (e.g., friends, charitable organizations). A system of privately and publicly funded residential facilities has been created in the USA. The facilities provide full-time housing to elders who (a) actively choose this residential option or (b) have no place else to live (e.g., Eshelman & Evans, 2002). Since the Great Depression, a financial system was instituted to provide pensions (Social Security) for adults in old age. Individuals contributed to the system during their years of employment and then were given funds after their retirement. Wealthier families can supplement these funds with private retirement accounts and savings.

Implementation and Assessment

Creation and Implementation of Laws

In comparison to other countries, the USA has a different system of policy/law creation (Dumon & Aldous, 1979; Olsen, 2007). Across the levels of government (local, state, national), there is a highly transitory system of public leaders (e.g., mayors, governors, senators, presidents). These leaders are commonly elected for brief terms (2–6 years). At the end of a term, it is possible for leaders to be reelected for additional years. However, reelection is not guaranteed. It is possible for leaders to lose their positions and be replaced by other leaders (who often have opposing viewpoints on policy issues). These new leaders have the option to support, revise, or repeal the family policies/laws implemented by their predecessors (e.g., Woods, 2012).

There are three main branches of the federal USA government (executive, legislative, judiciary). The legislative branch (e.g., Senate, House of Representative) is the location in which new laws are typically proposed, debated, refined, and approved (Feldblum & Appleberry, 2006). This branch also allocates the funding for government programs. Thus, the implementation of policies can be influenced by the amount and consistency of funding (Anderson, 2006; Krinsky, 2007; Olsen, 2007). Defunded programs can simply disappear because they cannot continue to provide programs (e.g., premarital education), even if the underlying law/policy has not changed. Additionally, the president has the authority to sign executive orders (Duncan, 2010). Thus, presidents can implement certain decisions with little input/oversight from the legislative branch. The judiciary branch (e.g., courts, judges)

evaluate the legal merits of laws/policies. These judges can determine whether laws/policies are fair in concept or implementation.

It is possible for USA citizens/groups (outside of these branches) to influence the direction of policies/laws. Organizations that value a specific family structure (e.g., heterosexual spouses with biological children) or particular groups (e.g., indigenous populations, elders) can try to influence leaders to (a) support laws/policies that fit their vision and (b) modify/repeal laws that are contrary to their vision (e.g., Feldblum & Appleberry, 2006; Fitzpatrick & Gomez, 1997). Both organizations and political leaders vary in the extent to which they utilize scientific or best practices information to make decisions about family laws/policies (Quinn & Magill, 1994).

Thus, the family law/policy process within the USA is rather fluid (Kamerman & Kahn, 2001). Laws/policies are frequently in flux, as they can be revised at any time. In contrast to its weaknesses, there are some advantages to the fluidity. For example, USA law can be highly responsive to crisis events or changing social conditions. Sometimes a single event quickly inspires the implementation of new policies/laws/programs intended to protect all citizens who might be impacted by similar situations (e.g., Bomar, 1934; Levenson & Cotter, 2005). Thus, reactivity to one incident can create preventive protection for many other families. (See Table 24.1 for a list of sample laws/policies that have been created during the past 100 years).

Table 24.1 Sampling of US laws

Policy/law/court decision	Year	Relevance	Groups most directly impacted
New York v. Sanger	1918	Court ruled that doctors can advise married patients about birth control for health purposes	Couples
Civil Service Retirement Act	1920	Created a retirement pension program for government employees	Elderly
Buck v. Bell	1927	Court ruled that forced sterilization of individuals with disabilities is not illegal	Individuals with disabilities
Lindbergh Law	1932	Made child kidnapping a federal crime	Children
Social Security Act	1935	Provided financial aid to elders, adults who were blind, and children with disabilities	Elderly; individuals with disabilities
Fair Labor Standards Act	1938	Set federal restrictions on child labor (e.g., age, hours worked)	Children
Prince v. Massachusetts	1944	Court ruled that government has authority to regulate the actions and treatment of children	Families
Perez v. Sharp	1948	Court eliminated ban on interracial marriage in California	Couples
Brown v. Board of Education of Topeka	1954	Court ruled separate schools for black and white children were unconstitutional	Children
Civil Rights Act	1964	Outlawed discrimination based on race, religion, and/or ethnicity	All groups who had been relegated to racial/ religious minority group status
Food Stamp Act	1964	Provided poor families with financial assistance for food	Poor families
Head Start Act	1965	Provided early education/day care for children from poor families	Poor children
Older Americans Act	1965	Created the administration on aging to coordinate services for elders	Elderly
Immigration and Nationality Act	1965	Eliminated nationality quotas and stressed family reunification among immigrants	Transnational/immigrant families
Family Law Act	1969	California created first "no-fault" divorce law	Couples
Wyatt v. Stickney	1971	Court ruled that individuals with disabilities could not be kept in institutions without proper care	Individuals with disabilities

(continued)

Table 24.1 (continued)

Policy/law/court decision	Year	Relevance	Groups most directly impacted
Women, Infants, and Children	1972	Provided health care and food support for poor women and children (up to age 5 years)	Poor families
Section 8 of the Housing and Community Development Act	1974	Provided rental assistance to poor families	Poor families
•	1975	Required free and appropriate public education for children with disabilities	Individuals with disabilities
Public Law 93–647 Title IV Social Security Act	1975	Enforced child support collection from nonresidential parents	Families
Indian Child Welfare Act	1978	Focused on Native American family unification and established standards for adoption	Indigenous families
Legislative Bill 38	1977	Nebraska classified marital rape as a crime	Couples
Kirchberg v. Feenstra	1981	Overturned state laws which designated men as "head and master" of families	Couples
Bowen v. American Hospital Association	1984	Increased focus on child abuse prevention and treatment	Children
Nursing Home Reform Act	1987	Provided support for improved residential care for older adults	Elderly
Air Carrier Access Act	1988	Prohibited airlines from withholding flight services	Individuals with disabilities
Fair Housing Act	1988	Prohibited housing discrimination against families and people with disabilities	Families; individuals with disabilities
Ryan White Comprehensive AIDS Resource Emergency Act	1990	Provided assistance to poor people with AIDS and their families	Individuals with disabilities
New Jersey Family Development Initiative	1992	"Bridefare" programs which provided increased support to poor women who married	Poor families
Personal Responsibility and Work Opportunity Reconciliation Act	1996	Reduced financial aid to poor families and increased work requirements	Poor families
Adoption and Safe Families Act	1997	Expanded children's rights for easier and quicker adoption	Children
Goodridge v. Department of Public Health	2003	Massachusetts legalized gay/lesbian marriages	Couples
Medicare Prescription Drug, Improvement, and Modernization Act	2003	Provided easier access and less expensive medical care for older adults	Elderly
Lifespan Respite Care Act	2006	Provided support for supplemental care for older adults	Elderly
Proposition 8		California citizens voted to not legalize gay/lesbian marriages	Couples
Option of Adoption Act	2009	Georgia allowed embryo adoption (gave pre-birth parenthood to adults who would raise child)	Families

Best Practices

Given the dialectical nature of USA values and mutability of law, it makes sense that there is limited agreement on best practices in family policy (e.g., Goode, 2003). As there is no consensus on a (a) definition of family, (b) central source for law/policy implementation, or (c) central source of research/evaluation, it is difficult to achieve coherence. This situation is complicated by the fact that some groups view the same policies in very different ways.

For example, there is not a national child day-care system within the USA. Rather, there is an amalgam of options. Some day-care centers receive financial support from governmental or charitable agencies (e.g., Woods, 2012), whereas other centers are run as for-profit businesses. Day care varies considerably in its accessibility and quality for poor, middle-income, and wealthy families (Perlmutter & Bartle, 2003). More broadly, there is debate as to whether child care centers are good for USA society. Some groups argue that the centers provide an essential service to poor and middle-income families because they increase the likelihood that parents can seek/engage in employed work (e.g., Anderson, 2006). In addition, there is some evidence that day care is good for families because it promotes healthy child development (e.g., Caputo, 2003). In contrast, other groups argue that child day care is harmful because it undermines parental authority and/or allows parents to abdicate their responsibilities. Indeed, it has been suggested that day care represents an outsourcing of family obligations to strangers (Hochschild, 2005).

Research

Within the USA, there is not a single source of research on families or family policy. Research can be conducted by professionals in diverse settings, such as government offices, foundation/agencies (that are not controlled by the government), universities/colleges, and for-profit corporations. Researchers have the freedom to determine the focus of their studies. Thus, some researchers have concentrated on family structures (e.g., Leon, 2002; Marsiglio & Hinojosa, 2007), whereas other researchers have concentrated on social policies (e.g., Anderson, 2006; Krinsky, 2007; Levenson & Cotter, 2005). When research is completed, there is not a single source (e.g., government office) which uses the research findings to guide family policy.

The lack of research coherence (within the USA) is consistent with the cultural values of individuality and self-initiative. In general, researchers are free to study the issues/topics that are of interest to them. Compared to a centralized government office, researchers might be more familiar with the local conditions in the communities (e.g., Dunlap et al., 2006) and thus better able to design salient studies. It is possible that this freedom encourages creativity in exploring social problems and ingenuity in identifying new policies (King, 2011). In contrast, this highly individualized research might be a hindrance to social progress. There are thousands of social scientists within the USA, and it would be difficult to collate the data from all of their research. Even if all the data could be centralized, it might take years to (a) identify the key issues from all studies and (b) make policy changes. By the time that such a process was completed, social conditions might have changed. Thus, there is a concern that research is challenged to keep pace with the critical issues that affect public policy and/or family life (e.g., Krinsky, 2007).

Conclusion

Recommendations

At the time that this chapter was written, a presidential election campaign was being conducted. This campaign allowed the major political parties (and some smaller parties) to advocate for the social policies that they prefer. At this time, it is unknown (a) who will win the election, (b) what policy changes they will enact, (c) how the changes will impact USA families, and (d) whether any changes they create will be upheld after the next presidential elections (2016, 2020, etc.). This election

24 USA Policies 385

process in the USA is relatively transparent, so it is well known to researchers, policy professionals, and families. Thus, the fragmented and fluid nature of family policy is not particularly surprising to USA citizens (e.g., Richter, 1986; Woods, 2012).

Under these conditions, it can be challenging to implement a sustained national policy research program. In the absence of such a program, researchers can still take some proactive steps. For example, researchers could be more active in coordinating their efforts. They can create consortiums to share expertise and conduct research collaboratively (e.g., Lemke, Witt, & Witte, 2007). Researchers can also develop more direct partnerships with family service providers (Cornille, Mullis, & Mullis, 2004). These partnerships increase the likelihood that (a) research results will be used to improve family services and (b) service providers' knowledge will contribute to the research design. Some researchers have also emphasized the importance of qualitative studies with at-risk individuals/families (e.g., Broadhead-Fearn & White, 2006; Dunlap et al., 2006). They have noted that families can provide valuable insights into policy/program implementation. Finally, it has been argued that family specialists (e.g., service providers, researchers) have to learn how to communicate effectively with policy professionals. It is necessary to convey specialists' knowledge in a manner that is useful, relevant, and easily understood by the policy leaders (Friese & Bogenschneider, 2009). For example, specialists can create impact statements that would identify the likely effect (of various policies) on families.

Finally, there is much that can be gained by taking a more global view of family policies/programs. Each country has a unique cultural history in its public policy (O'Hara, 1998), yet it is possible to make adaptations from each country's best practices (Olsen, 2007). A cross-national comparison will identify ways in which other countries are successfully addressing the needs of at-risk families/individuals (e.g., elders, refugees). It should also be noted that USA citizens directly involve themselves in transnational policies when they engage in family processes such as international adoption (Hollingsworth & Ruffin, 2002) or binational marriage. USA families have changed repeatedly over the centuries, and these family formation processes might simply reflect emergent trends. The mutability of the USA policy/law system might be advantageous in adapting to family trends in the twenty-first century.

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Chapter 25 Families and Policies in Mexico

Cristina Gomes

Abstract In Mexico, several specific laws, regulations, and policies for families were applied according to the political fragmentation and social inequalities, in the face of fragmented regulations and rights and multiple actors allowing access to policies. Poor families live with little and low-quality land and housing, labor instability and precarious conditions of employment, and low wages, and moreover face demographic challenges such as the well-being of three or four generations living together. In the last two decades, policies of nutrition, education, healthcare, childcare, and cash transfers have increased their coverage at local and national levels, although there is a lot of institutional overlapping in responsibilities and resources. Mexico has developed good practices through laws, regulations, and policies to eliminate family poverty and to promote welfare and social inclusion, implementing innovative programs to support more vulnerable families and their specific needs. However, it is relevant to establish negotiations, agreements, and contracts to encourage cooperation among sectors and among local and national levels at legislative, judiciary, and executive systems in order to expand and consolidate the results achieved.

Keywords Family • Social policies • Poverty • Inequalities

Introduction

Families in Mexico have historically been influenced by socioeconomic, political, and institutional fragmentation and inequalities in policy coverage and quality. The change from an agrarian and rural to an industrialized and urban society reproduced the historical exclusion of the majority of poor and ethnic groups in rural and urban areas. In both contexts, the poorest families have been able to progressively access some infrastructure and services in the twentieth century, but not formal employment or citizenship recognition, nor access to social security policies and rights. Political fragmentation has existed since independence and the prerevolutionary period and continues until the present day, despite the revolution, dictatorships, and nationalist governments which have variously needed to negotiate with decentralized local power and its hybrid forms and rules, even during and after periods of industrialization and urbanization. Laws and rights have always begun and have always been applied first in Mexico City and then progressively in other more developed states, while many youths

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and adults migrate from rural to urban areas or to the United States looking for better wages and rights. The most vulnerable families have been focused upon during the last two decades by policies such as the *Seguro Popular de Salud*, a child day-care program for poor children and mothers; the program *Oportunidades* for poor families with small children, who receive economic cash transfer, access to education, health, and nutrition; *Abriendo Espacios* and the National Labor Linkage Network for the disabled; the law on Protection for Single Mothers and the Protection Act for women who are heads of family; and a specific law to prevent and protect women suffering violence.

The Impact of Sociohistorical, Economic, and Political Contexts on Families and the Policymaking Process in the Country

Modernity, globalization, flexible labor markets, and migration in Mexico have impacted social and family life. Children's education, support, and care for the sick, disabled, and elderly; the economic maintenance of the household; the dialogue; and the emotional and psychological support between parents and children have been progressively transferred from families to educational and social security institutions. However, social security is historically available only to some privileged families — mainly those with formal employment. Public policies have been increasingly focused on the family as the main component of social protection for its members, while families have diversified and women have sought to reconcile their productive and reproductive roles.

Family Characteristics in the Country: Diversity and Inequalities

Several studies report an increasing secularization of marriage in Mexico up until 2000, with a growing number of marriages – particularly civil marriages. Union is the first step in the process of establishing Mexican families, legalized in later stages of the family life cycle according to the different socioeconomic and cultural conditions of families and communities. Policies to promote collective union regularization were common in the first half of the twentieth century, contributing to its secularization (Ojeda, 1995; Quilodrán, 1994).

Generations in Mexico have increased their life expectancies and the stability of their marital status throughout the twentieth century. Men continue to live with their spouses until the end of their lives, and very few are divorced or widowed, while the large majority of women are also married but have higher rates of divorce and widowhood, compared to men. This result is due to three factors: (a) longer female life expectancy, which extends into old age; (b) the age difference in couples (as most women are younger than their spouses, giving them even more time to live as widows); and (c) the lower rate of subsequent marriages of women who are divorced or widowed, compared to men.

The emergence of divorce and new family forms – such as informal marriage or cohabitation, new marriages with children from previous marriages, teenage pregnancy, and the diversity of family forms – has created changes in the relationships between men and women, parents and children. Higher education and work among women are accompanied by changes in female autonomy and in decisions regarding how they enter into, remain in, and leave marriage, thus expanding even more the variety of family forms. As a result, the percentage of families headed by women increased in the 1990s. However, when compared to other Latin American countries, Mexico has one of the lowest proportions of female-headed households in Latin America, due to its high proportion of indigenous people, whose cultural customs include universal early marriage.

Despite improvements in education and the economic participation of women, with decreases in birth rates per female from 6 to less than 3 children on average, teenage birth rates remain high, partly due to the indigenous worldview that values early marriage and childbearing, but also in urban areas, where teenage pregnancy has persisted, particularly among those with lower educational levels.

Female adolescents are those with the highest proportion of unplanned children and are exposed to greater health risks, neglect, abandonment, and abuse, as well as higher infant mortality rates, contributing to the reproduction of poverty among female adolescents.

Several studies have identified support systems such as family, peers, and school mediating the context and individual determining factors for becoming pregnant early, related to the limited life prospects and the cultural value of early marriage and motherhood as a form of economic and social security.

The Mexican pattern of family structure is 80 % of nuclear households headed by a man (of one generation or another) accompanied by a spouse, and the remainder are mainly female-headed households (14 %), with a smaller group of households headed by an unmarried man (6 %) (Gomes, 2006). However, one out of three households headed by a woman is in reality headed by an elderly woman over 60 years of age, and this proportion is increasing with the aging process and the high proportion of older women who, after widowhood, continue living alone as heads of their households or live with children and other relatives (Gomes, 2001). A history of conflict, fragmentation, and inequalities has led to recent changes in family formation, conflicts in family life, and the availability of family support networks, as described below.

Political Fragmentation and Conflicts and Their Impact on Families: Local Power Versus National Power

Mexico has a millenary history, with a fragmented and conflictive political organization of hundreds of small states that enjoyed varying degrees of autonomy, a multiethnic social and cultural heritage, and an economy based on subsistence agriculture. Most of these traits progressively changed, but they are still visible today in hybrid aspects of Mexican society (Jáuregui, 2008; Martínez, 2008).

The contact and relationships between Indian and Spanish inhabitants led to *mestizaje* (racial mixing). Sexual relations were mostly informal, but mixed marriages were recognized, especially between Spanish and indigenous people in good social positions. Catholic religious indoctrination was the basis of evangelism and church administration in local domains, imposed religious practices, baptisms, attendance at mass, and the worship of saints, and also asserted Christian norms regarding sexuality, marriage, and family practices (Martínez, 2008).

The independence movement led to a fragile federal government that had to deal with multiple local powers, political conflicts, and decades of old divisions, resulting in an alternation of several democratic presidents and dictatorships until 1859, and also in the loss of more than half its territory to the United States (Jáuregui, 2008; Vázquez, 2008). The reforms implemented by President Juarez unified the country, separated the state from the Catholic Church, and suppressed religious orders and birth and marriage registration by the church (Vázquez), expanding education and establishing Spanish as the national language, thus unifying the old fragmented and corporate society. In 1911 President Porfirio Diaz established an authoritarian and dictatorial government, creating a secular national identity and developing the economy and infrastructure system and the modern legal, economic, political, and social institutions that exist until today. The population increased from nine million in 1877 to fifteen million by 1910 (Guerra, 2008; Vázquez). Popular groups formed the basis of the 1910 Revolution and a new authoritarian, legitimized, and stable state, reinforcing the national identity (Garciadiego, 2008), establishing agrarian reform, and creating the ejidos (small-scale communal landholdings with their own authorities and institutional arrangements, with local property and social regulation mechanisms between the family and the community to access land and public resources, marriage, and inheritance rights). These local authorities overlapped and weakened municipal and national powers, and contributed to local political divisions (Castellanos, 2010; Del Rey, 2006).

The creation of the National Revolutionary Party (today's *PRI*) allowed for the political control of conflicts and promoted social, political, and economic stability for almost seven decades (Aguilar, 2008). As a result, increases in life expectancy allowed that three generations could live

simultaneously: the elderly born in the Revolutionary period, their adult children, and their young grandchildren (Gomes, 2006). *Ejido* lands were divided between generations and intensively exploited, reducing their productivity. Currently most of the original *ejido* populations are elderly, and many have died or migrated. By the 1980s there were 28,000 *ejidos*, representing nearly half of the national territory and two-thirds of peri-urban lands, 34 % of which were extremely poor (Díaz-Caravanes, 2012).

In 1992, an amendment to Article 27 of Mexico's constitution and a new agrarian law legalized the privatization, the rental, and the sale of *ejido* lands, which were converted to individual properties and some were annexed as peri-urban areas (Lewis, 2002; Nuijten, 2003; Wilshusen, 2010). The process of land privatization occurred in parallel to the rapid population growth, industrialization, urban development, and massive migration from rural to urban areas. In the Mexico City metropolitan area, the population increased from 1.5 million in 1940 to 8.5 million in 1970 and reached about 18 million in 2000 (INEGI, 2010). Beginning in the 1980s, economic crises reversed the urban growth process and reoriented migratory flows towards medium-sized cities and to the United States (Díaz-Caravanes, 2012; Galindo, Escalante, & Asuad, 2004; Tuiran et al, 2001).

Fragmentation and exclusion of the majority of poor, indigenous, rural, and peri-urban families from formal social policies increased inequalities in coverage and the quality of formal housing, social security, and other policies and rights. Currently, Mexico has a population of 112 million, of which 26 million are dispersed among 189,000 small communities (of less than 2,500 inhabitants), and 48 million live in cities with over 100,000 inhabitants (INEGI, 2010). Historical fragmentation still underlies extreme contrasts between rural and urban areas, formal and informal sectors, and men and women, continuing the exclusion of ethnic and poor families.

The Influence of Socioeconomic, Labor Market, and Social Policy Fragmentation: Areas of Residence, Ethnicity, Gender, Generations, and Poverty

Social policies in Mexico have been always centered on families, either explicitly or implicitly. In this section we discuss social policies that are implicitly aimed at families. Although these policies are based on social rights for workers, labor benefits are expanded to all the family members. In the next section, laws and policies explicitly aimed at regulating families will be discussed.

Mexico has a very low tax collection rate (12 % of GDP) and a very high evasion rate (35 %), which explains the limited capacity of public finances to implement redistributive policies (Organization for Economic Co-Operation and Development [OECD], 2011). Although industrialization promoted increases in employment, real wages, and purchasing power, policies in housing, social security, and other sectors have never produced universal rights, reaching only a minority of workers (close to 40 %), almost all of whom are located in large cities and the major branches of industry, commerce, and government (Aguilar, 2008).

Family Policy Framework and Developments Targeting Different Family Functions

Rights in Formal Labor Market, Social Security, and Marriage

The labor market in Mexico has a wide variety of labor contracts, social policies, and institutions, resulting from a complex and fragmented historical evolution of Mexican society and rights, and almost always concentrated in urban areas and mainly in Mexico City. President Diaz established the

provision of health services only for formal workers and their families. Progressively, local governments established labor rights such as housing, workweeks, and social security cofinanced by employers and employees. In 1925, the Institute of Social Security for government workers, *ISSSTE*, was created. In 1943 several fragmented institutions were centralized into the Mexican Institute of Social Security (*IMSS*), and the Health Secretariat was created to address the needs of families of informal workers (García Cruz, 1962).

As formal work and social security are concentrated in urban areas, the labor force participation rates are higher in larger cities than in small ones. In larger cities, 90 % of adult men work, but after 65 years of age (the retirement age), 35 % of them still work without a pension. In rural areas, as many as 30 % of the men over 85 years of age continue to work without pensions. On the other hand, the participation of adult women in labor markets increased from 15 % in 1970 to 35 % in 2000, most of them in urban areas, while in rural areas, the proportion is less than 10 % (Gomes, 2003).

Regarding formal workers, in 2000, the *IMSS* covered around 40 % of the total population, while the *ISSSTE* covered 6 %, almost all in urban areas, and less than one out of three elderly persons received a pension. In the smallest rural areas, employment, pensions, and education, healthcare, and infrastructure services are scarce and unqualified, and local authorities remain too fragmented or weak to face challenges and deficiencies in local economy and policies for families (Gomes, 2003).

Since 1982, successive economic crises have promoted the informal labor market even more and have debilitated pensions and healthcare institutions. In 1997 a pension reform progressively transferred new contributors to the individual private accounts for retirement, *AFOREs*. The *IMSS* reduced their urban affiliated from 23 million in 1996 to 3.3 million in 1999, with 1.7 million of pensioners and their families. The new *AFOREs* took on 13.5 million taxpayers and pensioners. The new model reinforces the exclusion of informal workers and rural and low-income families. Until 1986 most of the benefits were family pensions for widows, orphans, and ancestors, which tripled from 100,000 to 300,000 between 1970 and 1983. However, thereafter these pensions stopped growing, while disability and old-age pensions underwent a more impressive increase from 400,000 in 1983 to 600,000 in 1996. Permanent disability pensions also experienced major growth beginning in the mid-1980s (Gomes, 2003).

Gender inequalities continued the strong male predominance among the few pensions offered by the social security system in general. There is only one retired woman for every three or four retired men. There are twice as many disabled men compared to women with disabilities, even though women make up more than 70 % of the total of elderly population and are mostly married or widowed, with the right to inherit their husbands' pensions (Gomes, 2004).

The National Health Service consists of various institutions for formal workers and their families (IMSS, ISSSTE, PEMEX, etc.), and the Health Secretariat for the rest of the population, regardless of employment status, which is funded primarily by federal tax revenues, with users paying minimal fees determined by their socioeconomic status to use these services. Since 2002, a new program, Seguro Popular de Salud (SPSS), was created, funded by the Federal (83 %) and state (17 %) governments, and covers the majority of uninsured families without formal employment, who cannot pay for a private healthcare plan. The SPSS covers 40 % of the uninsured population while the IMSS Solidarity covers 10 %. This distribution varies between states and according to the age or gender of the users (Azuara, 2007; Azuara & Marinescu, 2011; Gomes, 2003).

Social assistance is provided by the System for Integral Family Development (DIF), which has a particular focus on the nutrition of children living in poverty, while the program *Oportunidades* was created in 1997 and has achieved important results in reducing poverty and improving nutrition and education for children, and health inclusion for poor families (SEDESOL, 2012).

This multiplicity of institutions and programs continues the fragmentation in society. Around 40 % of formal workers and their families can even overlap affiliations, making payments to and having rights in more than one institution, while informal workers and families (60 % of the total) and poor families (more than 40 %) are supported by another complex group of institutions and programs, which also overlap functions and benefits.

Rights, Legislation, and Policies to Reconcile Productive and Reproductive Work

Family-Work Balance

In Mexico, the demographic transition occurred over a few decades, when life expectancy increased from 45 to 70 years, and birth rates decreased from 6 to less than 3 children per woman on average. In the 1950s, women had many children, but mothers did not live long enough to see their children marry and have grandchildren. Currently three or even four generations live simultaneously, representing a challenge for public policy, societies, and families. Women have fewer children and reduce the time they need to devote to reproductive work and housework, but survival into old age increases the need for care and support for the elderly.

However, indigenous and less educated and poor women have shorter lives and have more children. Rural and poor areas contain many children but few young adults (since they migrate to cities or other countries). The poor and indigenous people accumulate lags in education, higher birth rates, and higher mortality rates. The higher birth rate of rural, poor, and indigenous groups implies a longer reproductive work cycle for women, major institutional deficiencies, and fewer job opportunities.

Poverty and Gender Inequalities in Labor Markets and Social Protection

In the labor market, women are overrepresented in the informal sector, particularly those who are married with small children and single mothers, who need to work flexible hours. Therefore, social security and childcare coverage possesses large gender gaps and disadvantages for women.

Poor women and children are likely to work in order to supplement household income. However, precarious employment is not exclusive to extremely poor groups – there are also wealthier people working in precarious conditions. Women who are heads of households and are the main contributors of income in their homes are likely to not be poor, compared to men. Women who are spouses work far less than the heads, except for spouses living in extreme poverty. Poorer women who are married work in greater proportions when their husbands are self-employed and have no regular income. In short, poverty among women and longer workdays may be more prevalent when they are married and have many small children and their husbands do not have a stable income (Gomes, 2008). This combination of vulnerabilities indicates that work-family reconciliation policies can be a key mechanism for poverty reduction among such families.

Maternity Leave

Most women work in the informal sector and have no rights to guarantee the balance between their productive and reproductive work. This is the case of women working in domestic activities, as caregivers, casual workers, farmers, and other informal and precarious jobs. All the rights guaranteed by legislation to protect women during the maternity period are restricted to women working formally, who are able to use childcare services of social security systems and receive full pay during their 12 weeks of maternity leave (there is no paternity leave), and its costs are covered by the social security system.

Regarding childcare, since 1973 the *IMSS* has provided 1,450 institutions to insured working mothers and widowed or divorced parents, covering 237,000 children, mainly in urban areas (IMSS, 2012). In 2010 the government created a day-care program to support poor families without access to *IMSS* and *ISSSTE*.

Mexican legislation does not prohibit pregnancy tests in hiring women or dismissal during maternity and does not guarantee that women can assume the same position they held before pregnancy upon their return to work. Still, rights regulated by laws are not always implemented, so they must be permanently monitored. Also, the biggest challenge to the inclusion of informally employed women in this set of rights continues to be the creation of alternative schemes to provide basic social protections for informal workers, and to promote the reconciliation of productive and reproductive work for poor families.

Family Policies Supporting Families at Risk

Families in Poverty

In 2010, the National Council of Evaluation (*CONEVAL*) estimated that 10.4 % of the population are extremely poor and 35.8 % are moderately poor, giving a total of 46.2 % who may be considered poor (CONEVAL, 2011). Factors related to the extreme poverty of families are housing overcrowding and the high number of children, and factors related to moderate poverty are the lack of telephones in housing and the low level of education of the head of the family (Gomes, 2008).

The main program oriented to poverty reduction in Mexico is based on conditioned cash transfers to families with children, the program *Oportunidades*, which provides scholarships and food and promotes the use of health services. A gender perspective is reflected in the delivery of cash transfers to women and the higher benefits for girls, which allows for gender equality in elementary schools. Family is the focus of the program, since all the family members are taken into account and are involved in benefits and/or in co-responsibilities. For example, small children receive food complements, the elderly receive a specific cash transfer, and all family members have to visit a doctor periodically. The program covers one out of four families (5.8 million families) and has increased the level of education and nutrition among children and youth, contributing to reducing child and maternal mortality and has helped to reduce poverty.

Although poverty reduction strategies have contributed effectively to achieve its main objectives (such as increasing the level of income, nutrition, education, and health access), they should establish mechanisms for the labor inclusion of the youth and poor women involved in the program.

Elderly Families and Policies

In Mexico, one in four households has an elderly member, and that proportion is higher in rural areas. Between 1990 and 2000, the percentage of married elderly individuals decreased from 64 % to 53 %, while divorce rates increased from 3 % to 8 % and the percentage of singles remains close to 7 %. Changes in marital status reflect the greater survival at older ages especially among women, implying greater proportions of widowhood and rearrangements of households in old age. The departure of adult children and the death of a spouse lead to the increasing of the empty nest and single-person households (Gomes, 2006).

It is customary to assume that the status of the elderly people at home is characterized by a situation of dependency or "burden on the family." However, 60 % of them assume a role as the head of their households, and more than 50 % are the main economic contributor for the household income. The dependent elderly are a smaller group of spouses, and almost all are women (93 %). Elderly heads of family represent 19 % of the total of heads of all types of households in the country, and – considering only one-person households – elderly heads of family account for almost half of the total.

Leadership in elderly families is also a gender issue: 85 % of men are heads of households, compared to 35 % of women in the same position. After 60 years there are seven female heads compared to three male heads of household, and both are more common in rural areas (Gomes, 2006).

Faced with poverty and the limits of labor markets and social security systems to provide social protection for the elderly, families assume an important role in the rearing and welfare of children and in the care of sick people and unemployed, disabled, or older adults.

Since 2006, the program *Oportunidades* created a special component to provide a monetary transfer and to increase health access to all the poor elderly over 70 years old, covering more than one million old people, and the *Seguro Popular de Salud* provides health services to those who have never worked formally.

Families with Disabled People

By 2010, 5.7 million of people in Mexico had a disability, which represents 5.1 % of the total population. The proportion is higher among those aged 60 and older (26.2 %), compared to adults, youths, and children (4.8 %, 1.9 %, and 1.6 %, respectively). Mobility limitation is the most frequent type of disability (58.3 %), followed by sight problems (even wearing glasses) (27.2 %), hearing limitations (even using hearing aid) (12.1 %), speech problems (8.3 %), as well as mental disability (8.5 %). The main causes of disability are diseases (39.4 %), old age (23.1 %), and accidents (16.3 %) (INEGI, 2012).

A 2005 national survey indicated that 94.4 % of disabled people felt that there is discrimination against them and more than a half felt that their rights are not respected, or reported feeling rejected by society. Only 28.6 % of them work, and most of their income comes from "other family member(s)" (43.1 %) (INEGI, 2012). Family is the main basis of support for disabled persons in Mexico, who are likely to be poor and to live in extended households (Gomes, 2003).

In Mexico, the constitution, laws, and regulations include the rights of the disabled people, and a national strategy promotes a cultural change to favor their social inclusion and access to public spaces, health, education, labor and job training, culture, and sports; to justice; and to the exercise of political rights (Mexico, 2012b). Several states have developed good practices to promote the rights of disabled people, particularly regarding the inclusion of children with disabilities at school, raising physical accessibility to public spaces and training.

Housing and Migration

Housing programs started in 1940 and were reinforced with urbanization. Since the agrarian reform in the 1930s, land became an important element in defining the rules of inheritance, marriage, and new residence, particularly in rural areas of Mexico. In *ejidos*, fathers were the main authority and acted in family formation and co-residence. Married children later received their own home and a parcel of land to work and support their new families. Succession, inheritance, marriage, and residence were decisions of the head of the household, who decided which child would legally inherit his authority and control of the *ejido* – in general the youngest male child (the ultimogeniture model). The rest of the sons were landholders, with the right to receive a home and to use the available land, and daughters were not considered in inheritance (Del Rey, 2006; Robichaux, 1997, 2002).

As generations have survived simultaneously since the 1970s, three or four sons of the third generation could not provide for their families as their fathers had, due to land pressures and economic crises after 1982. The privatization and sale of *ejido* lands, the Free Trade Agreement with the United States and Canada (NAFTA), and the subsidies from the US government to its corn-producing sectors created negative impacts on Mexican farmers, who have had to compete with cheap imports from the

United States, without corresponding investment by the Mexican government in infrastructure and credit to increase productivity and employment in local agriculture. This leads to increases in poverty and inequality indexes and leads the families to seek other alternatives. In the 1990s crisis, as a result of the division of peri-urban *ejidos*, the price of land increased in the urban market, and several young families sold urban lots to finance migration to the United States, where their potential earnings were much higher than in national markets (Del Rey, 2006).

Changes in land tenure, as well as transferences and inheritance of land parcels, contributed to and accelerated profound changes in families, as well as in relationships between genders, generations, and migrants. Parent-child relationships and control over marriage, residence, and the succession of generations were relaxed, producing disputes within the family over the appointment of a successor even before the death of the father, who had to register the heir at a very early age. One strategy to postpone this decision was to leave the land to the wife and, due to the absence of migrant sons, daughters could also be included for the first time in the family inheritance system (Del Rey, 2006).

In urban areas, on the other hand, housing policies followed the logic of the formal labor market. From 1970 to 2000, the programs *Infonavit* and *Fovi*, in association with the private sector, encouraged loans from banks and credit unions to benefit around three million families. During the 1990s, poor and working-class housing complexes were built in previous *ejido* lands at periphery urban areas. The ISSSTE financed 500,000 housing units for government workers, and credits from the private sector funded 8.7 million homes in the same period (Peralta, 2010).

Invasions in urban areas were a part of this fragmentation in accessing housing policies. Ortega (2006) studied Latin America's largest single land invasion in Santo Domingo, Mexico City, occupied by thousands of migrant families from rural areas of the poorest states in the 1970s. Families continue building their homes until today, through self-help housing and the like, in an irregular process of building without land tenure, infrastructure, or construction standards, but these expansions allow to accommodate new family members and groups, three or even four generations in the same construction. Traditionally, men bring their wives to their parents' home, but now wives are also bringing their husbands into their homes, as well as children from previous marriages and children through legal or nonlegal adoption. These self-help homes have a special value and are part of the family process. Births, marriages, deaths, disagreements and reconciliations, achievements, and migrations become a part of their biographies. Projects in self-help housing, which also promote house sharing and integrate settlements, connect families in networks of friends, *paisanos* (people from the same place of origin), and *compadrazgo* (*compadres* – close friends who are considered members of the family) (Ortega, 2006).

These arrangements were originally formed by families who migrated from rural areas three or four decades ago, and enable the continuity of communal social practices, and hybrid forms of the continuation of *ejido* family solidarity and control, and generate conflicts among generations in families facing the current globalization process.

In the communities originated by international migrants, remittances sent by immigrants assume an important role for local and family development. Remittances in Mexico have increased from US \$698 million in 1980 to around 6 billion 1999, 10 billion in 2002, and more than 6 million in the first 6 months of 2003, reaching many families (Goldring, 2001). In 2000, over a million households received remittances and applied these resources mainly to improve their housing conditions and the education and health of family members (Tuiran et al, 2001).

Family Policies Targeting Marriage: Marriage and Divorce Codes

In 1859, the religious character of marriage changed to a civil and indissoluble contract, established in the Civil Marriage Act and in the Civil Registration Act. Until today, the "Distrito Federal" Code includes the concept of marriage as "a social institution by which a man and a woman establish a union legally, to live and stay together to reproduce, to feed and educate their children and to support

each other." Marriage is based on equality of rights and obligations of both spouses, and cannot be authorized in specific cases (Garcés Arámburo, 2004; Mexico, 2012a).

After the Revolution, in 1914, a presidential decree admitted temporary separation by mutual consent of the spouses or for serious reasons, to be determined by the legislature. After a dissolved marriage, spouses may contract a new legitimate union. In 1928, the Civil Code for Federal Republic bestowed the same characteristics on divorce. Despite the secularization of marriage during the twentieth century, divorces in Mexico increased recently.

Family Code

In the constitution, Article 4 establishes that in Mexico men and women are equal and that the law should protect family organization and development. Everyone has the right to make free, responsible, and informed decisions regarding the number and interval between having children, health protection, and housing, and to have access to drinking water. Children have the right to nutrition, to health, to education, to a healthy environment for development and welfare, to waste sanitation, and to drinking water. These rights should guide policy design and the implementation, monitoring, and evaluation of policies. Ancestors, guardians, and custodians have an obligation to preserve and enforce these rights and principles for dependents, and the state shall grant facilities to individuals to help comply with children's rights (Carbonell, 2005; Mexico, 2012a). Article 4 of the constitution did not create parental authority, but recognizes the duty of the ascending to preserve children's rights. Therefore, small children have a dual system of protection and integral development: the local (which is visible through the parental authority) and the constitutional (manifested through the duty imposed on parents and relatives to preserve the rights of children) (Camacho, 2005, p. 6–8).

In Mexico there is a historical dispute concerning the laws and rights of families. Conservative groups try to limit family recognition and rights to the traditional nuclear family, while liberal groups seek the recognition of a diversity of family forms. Federalism and political fragmentation lead local governments and congresses to approve diverse and contradictory laws on family recognition and regulation. In 2007, in Nuevo Leon, the majority of conservative deputies approved a family law riddled with Catholic concepts, creating the State Institute of the Family as the body responsible for setting public policy to strengthen a single type of family, just the "natural families" and flying progeny (nuclear family, with father, mother, daughters, and sons). In 2009, the formal union of homosexual couples was approved by the majority of liberal deputies in the capital (Federal District).

Vulnerable families have been focused by law and protective policies at national and local levels. As single mothers and their children suffer the consequences of the lack of financial support and protection, laws and policies to support their families have been implemented, such as policies oriented to support poor women heading households and to guarantee the biological father's responsibility towards their children, which have deserved attention from governments and legislators. Judges are developing tools to criminalize certain irresponsible family behavior (INEGI, 2011).

Domestic Violence

Regarding children, various surveys on health and policy records between 2000 and 2003 indicated that a third of the children in Mexico reported suffering some form of physical or verbal violence in the family: physical abuse, omission of care, and/or emotional abuse. One of three children reported suffering violence by their family, and one out of four in school; 28 % of them are beaten at home and 16 % at school; and 3.5 % said they had suffered sexual abuse at both home and at school.

In some states, suicide rates of children under 14 years have tripled, exceeding the homicide rate (Azaola, 2006).

In 2006, 67 % of current or previously married women declared they have suffered some form of violence, more than 40 % were abused by their partner through insults, threats, humiliation, and other emotional offenses, followed by economic violence (such as control or blackmail) and physical and sexual assaults. The last two forms of violence did not occur as isolated cases, but as multiple attacks of all kinds by their current or past partner, reaching higher proportions among the separated, divorced, or widowed (INEGI, 2011).

In general, physical violence suffered by women is designated as serious or very serious, and 77 % of victims reported multiple acts of severe violence. Among all women who are or were married or cohabiting and who suffered physical violence by their husband, 23 % said that these attacks were limited to pushing and shoving, while 18 % have suffered serious physical assaults, including beatings and other attacks, and more than half have suffered life-threatening assaults, such as attacks with weapons, firearm, or sharps (58.6 %). Suicides count for a high percentage within the violent deaths of women (33.9 %) compared with those of the male population (19.1 %), while the proportion is reversed in the case of homicides, which in 2009 represented 80.9 % of the violent deaths among men and 66.1 % among women (INEGI, 2011)

The General Law on Women's Access to a Life Free of Violence was approved in 2007 and aims to prevent, punish, and eradicate violence against women, through establishing procedures to ensure women access to a life free of violence and favoring their development and welfare as principles of equality and nondiscrimination. The law established the creation of a national program to prevent violence against women, as well as services to support the victims and sanctions upon the aggressors.

Family Policy Implementation and Assessment: Good Practices

In the last decade, Mexico has expanded and developed policies to eliminate family poverty, particularly among poor women with children.

Several studies show that women's work is an important factor in poverty reduction in families (Canada, 2010; Gomes, 2006). Childcare creates significant return rates through increased taxes, reduced spending on social benefits, and improved child development, but returns are taken into account only in companies where employees are not easily replaced (Canada, 2010). In sectors where poor women work and manpower is abundant, such returns are not as visible, and the cost of investment in children lies solely with the family, leaving poor families at a disadvantage.

- (a) Seguro Popular de Saúde (SPSS) provides health services to 20 million of families and 52 million people without a formal labor contract, and only 2 % of the total beneficiaries make monthly payments to the program (CNPSS, 2009). Evaluations carried out in 2006 demonstrate that the SPSS increased the number of accredited health units by 30 % (134 hospitals and 1,144 clinics), particularly in rural areas. It had also included the poorest families and decreased spatial inequalities in access and quality in health services in marginal communities, and it also decreased catastrophic healthcare expenses among families, particularly on hospital care and medicines. In turn, the expenditures of the Health Secretariat increased from 4 % of the total budget in 2000 to 9 % in 2006 (SPSS, 2006).
- (b) The child day-care program for poor children and mothers supports working and student mothers, single parents, and caretakers, and provides childcare and food for 300,000 children aged between 1 and 4, or up to 6 years of age for children with disabilities. The program supports parents to have available time for work or study, and at the same time, it promotes sustainable small businesses in childcare managed by low-income women and families. Currently, 9,039 establishments are recognized, financed, and monitored by the government and participate in the program,

97 % of them run by women. They are owned by individuals and corporations and receive government support and training to provide these services. Of the total, 673 day-care services are located in highly marginalized municipalities, and the program has generated 42 000 sources of income between managers and workers, almost all women (SEDESOL, 2012).

- (c) Oportunidades is an economic transfer cash program which benefits six million families in 20,000 villages, increasing access to education, health, and nutrition for children and their families, with responsibility and confidence in women. In the recent school year, 1.35 million children received scholarships, which have delivered a higher number for girls, compared to boys, currently ensuring gender equality in middle and high school and empowering mothers, who received a total of 250 million dollars (SEDESOL, 2012).
- (d) People with disabilities in Mexico report that they are discriminated against in the workplace. Strategies such as Abriendo Espacios and the National Labor Linkage Network promote the creation and operation of specialized job boards, identifying their skills and capabilities, linking bidders and jobseekers, and promoting collaborative action between public and private organizations to creation networks of services for the disabled. As a result, from 2008 to 2010, Abriendo Espacios has supported 74,508 persons with disabilities and placed 21,051of them into employment. The National Labor Linkage Network has supported 15,723 disabled people between 2009 and 2010 (Mexico, 2012b).
- (e) In 2008, the Sonora State Congress approved a law to protect single mothers and a protection act to protect women who are heads of family, recognizing that single mothers and their children have the right to free medical and psychological care, basic education, scholarships and educational programs, social assistance, access to job opportunities, and training to develop work abilities.
- (f) The program Care Instances supports women suffering violence and applies resources to building shelters, transit homes, healthcare facilities, and mobile units to provide medical, psychological, and legal support to women who are victims of domestic and social violence (SEDESOL, 2012).
- (g) Oportunidades and Seguro Popular de Salud have been permanently evaluated in several aspects and goals. By law, in Mexico, all social policies should be evaluated. The National Council of Policy Evaluation was created to coordinate policy evaluation in all the sectors, guiding and supporting government to adopt evaluation methodologies and approaches in order to reorient policies and to achieve better results.

Discussion and Recommendations for Family Policy Development, Implementation, and Assessment for Policymakers

In Mexico the multiplicity of institutions and programs continues the fragmentation in society; formal workers and families in formal institutions based in contributions and contracts, and informal workers and families depend on social assistance from a great diversity of institutions and programs, with generally overlapping goals and responsibilities.

Although poverty reduction strategies, mainly *Oportunidades* and *Seguro Popular de Salud*, have effectively contributed to achieve the main objectives, such as increasing the level of income, nutrition, education, and health access for poor families, other overlapping institutions and programs continue operating in all these areas, making it difficult to access specific effects and results and to relate the results achieved exclusively to one program.

On the other hand, poverty strategies have not been able to establish mechanisms for the labor inclusion of the youth and poor women involved in the program, as well as mechanisms to increase the level of education and the inclusion of poor mothers in the labor market, which would realize the results of strategies for poverty reduction. These goals do not depend mainly on the kind of social

policies adopted, as employment generation, formalization, and inclusion depend mainly upon economic policies. Moreover, the limits of poverty reduction strategies and social policies are also dependent on extensive actions to strengthen the economy, planning, and governance, to overcome social and economic fragmentation among families and to increase rights, along with the inclusion of vulnerable families in the process of development, thus achieving sustainable results with equality.

Regarding family code and policies, the regulation of marriage, divorces, and parent authority on descendants is also fragmented among the states, leading to different legal arrangements and possibilities for families to assume their options and to negotiate their interests. Minority groups, particularly women and single mothers, are more vulnerable in states where deputies try to recognize a unique ideal family and try to establish this homogenization by law. The persistence of conservative laws in some states contributes to continue discrimination and violence against women, children, and minority groups.

Negotiations, agreements, contracts, and consortiums, with incentives for cooperation between sectors and among local and national levels at legislative, judiciary, and executive systems, are needed to define and adopt universal guidelines and principles of human rights, as well as national goals to be achieved by everyone and to be preserved at all the levels of legislation, family codes, and policies, thus helping to overcome the political and social fragmentation that make it difficult to guarantee the rights of families, particularly those of women and children.

Family violence is the main issue that should be better approached from the point of view of intersector agreements and government levels. Each national and local plan and program establishes intersector and multilevel collaboration. However, problems arise from the challenge of establishing agreements and real commitments. On one hand, the interests of preserving institutions and bureaucracies and, on the other, the lack of incentives for cooperation hinder the realization of the ideal established formally in programs.

In the case of violence against children, the national program foresees the design of a comprehensive policy to address the problem, articulating the health and educational sectors, child protection, the justice, and the civil society organizations. However, the health sector alone involves several institutions and programs which need to be coordinated and to agree to a strategy to collaborate in a policy to prevent and reduce domestic violence in general, including violence against children. The legislative powers play a very important role in recognizing this institutional and policy fragmentation, and promoting dialogue and agreements, and approving not only general recommendations but the real mechanisms to encourage collaboration within and among sectors and civil society, in order to achieve concrete results in reducing domestic violence.

For example, in rural areas, children report higher rates of domestic violence; the national plan establishes that it is necessary to have consensus and provide coordination mechanisms between health, child protection, education, and justice, as well as to develop specific assessment tasks for each one to achieve goals and evaluation mechanisms focusing in rural areas. This is a goal to be realized.

The integration of information databases from health systems, education systems, and police systems regarding occurrences of domestic violence, and registration of violent deaths is a key tool to access the real prevalence of the problem and act accordingly. Even in this case, particular interests and conflicts among each sector contribute to postpone the decision and implementation of this important tool for monitoring and evaluating policies to reduce domestic violence.

Health services to care for children and women victims of domestic violence could be integrated to promote and monitor the strict compliance of national laws and international agreements. For example, the National Guidance and Pipeline Telephone for women and children suffering domestic violence provides emotional support, intervention in crisis, counseling, and medical and legal support 24 h, 365 days a year. However, this service and other strategies adopted at local and national level should be articulated with other programs of reference and counter-reference, in order to achieve multidimensional results, reorienting values and practices that justify and reproduce domestic violence in the society and in families.

Conclusions

In Mexico there is a multiplicity of family laws, institutions, and programs; however, the diversity of programs oriented exclusively to formal workers or to most vulnerable families continues to produce social fragmentation and inequalities, as well as overlapping goals and responsibilities among sectors and levels of government.

Although most of the family policies have contributed effectively to achieve its main objectives, multiple institutions and programs continue operating in the same areas and for the same groups, making it difficult to be sure that the effects and results found are related exclusively to the program analyzed.

The wide provision of regulations and policies faces obstacles in its implementation, coverage, quality, and results. Negotiations and agreements among sectors, both at local and national levels, and among legislative, judiciary, and executive systems are needed to define and adopt universal guidelines and principles, as well as to achieve national goals in a more efficient and sustainable way in order to support families.

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Chapter 26

The Commonwealth Caribbean: Family Policy in the Caribbean Community (CARICOM)

Allison Y. Gibbons

Abstract The CARICOM region comprises 19 mostly English-speaking Caribbean countries, with a combined population of 16 million. A secretariat provides the umbrella for policy-making; decisions rely on consensus among heads of government. Common interests invite unity, but challenges arise from nationalistic goals and agendas shaped by foreign aid agencies. Issues of poverty, health, education, gender inequities, and employment are addressed in social policy frameworks based on traditions and inherited legislation from Great Britain and Europe, influenced by local ethnic norms. Strides have been made regarding domestic violence, education, equal employment opportunities, and maternal and child health. Gaps exist in services to indigenous peoples and men as a group. Low-income families and workers in the informal sector are underserved; tensions about work and family balance affect women generally. Family policy is mainly implicit, with some explicit inroads evident through the CARICOM Charter of Civil Society and agreements to establish family law and family court systems. Jamaica leads the way with a National Parenting Policy. Progress is hampered by uncoordinated programs and unclear objectives. More explicit family policies will sharpen focus on family development goals. International aid agencies need to work within CARICOM's systems rather than undermine harmonization.

Keywords CARICOM • Commonwealth Caribbean • Economic policy • Domestic violence • Family life • Family policy • Foreign aid • Gender inequities • Legislative reform • Marriage and relationships • Poverty and human development • Social policy • UN conventions • Women and children • Work and family balance

Abbreviations

CARICOM Caribbean Community Secretariat

CIDA Canadian International Development Agency
CRC Convention on the Rights of the Child
DAC Development Assistance Committee

ECLAC Economic Commission for Latin America and the Caribbean

FAO Food and Agriculture Organization IADB Inter-American Development Bank

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ILO International Labour Organization
 IMF International Monetary Fund
 NGO Non-government Organization
 OAS Organization of American States

OECD Organization for Economic Cooperation and Development

OECS Organization of Eastern Caribbean States PAHO Pan American Health Organization

SIDA Swedish International Development Agency

UN United Nations

UNDAF United Nations Development Assistance Framework

UNDP United Nations Development Program
UNEP United Nations Environmental Program

UNESCO United Nations Educational Scientific and Cultural Organization

UNIFPA United Nations Population Fund UNICEF United Nations Children's Fund

USAID United States Agency for International Development

UWI University of the West Indies WHO World Health Organization

The area of the world known as the Caribbean encircles more than the islands in the Caribbean Sea. It contextually includes neighboring islands in the Atlantic Ocean, as well as some countries on the coasts of South and Central America that self-identify, politically and culturally, as Caribbean. The region reveals a mix of joint and separate histories with English, Dutch, French, and Spanish colonial control. At the close of the twentieth century, efforts to harmonize and stabilize the region saw the emergence of the strongest unifying force among the English-speaking nations known as the Commonwealth Caribbean, embracing countries that share a past allegiance to Great Britain, most gaining independence within the past 50 years. The official language is English. The group is also referred to as the CARICOM region, based on the political umbrella under which the islands are united in purpose (CARICOM, 2011a, b), and includes Antigua and Barbuda, Barbados, British Virgin Islands, Dominica, Grenada, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, and Trinidad and Tobago. Members situated in the Atlantic include Bahamas, Bermuda, and Turks and Caicos. On the mainland are Belize in Central America and Guyana in South America. There are two exceptions to the English-speaking history of CARICOM membership - Suriname, located on the coast of South America next to Guyana, of Dutch heritage, and Haiti with French still its official language though having wrested its freedom from France since 1804. Historically, policy-making in the region has been eclectic and sporadic, matching the political allegiances.

The CARICOM Secretariat was initially formed to focus on common economic and foreign policy. The connection between economic policy and social development was recognized through social events between the formation of the union in 1973 and its revised treaty in 2001. CARICOM policy-making since 2001 has been weighted heavily with human development objectives (CARICOM, 2011a, b; Lashley, 2008; UNDP, 2010). Social policies made at the level of CARICOM affect the lives of 16 million people and their families.

Family and Relationships

There are some identifiable practices and traditions that unify the Caribbean as a single geographic entity, but this picture of unity belies the social complexities. Family life exists within a milieu of cultural, religious, racial, and ethnic differences which cut across the geographical proximities and

shape the household and family structures (CARICOM 2007, 2011c). These differences are further compounded by the wide range of variations in economic and human resources and pace of human development efforts. St. Bernard (2003) identified additional contributors to family life differences as migratory movements, educational opportunities and attainment, rural vs. urban traditions, size of the country's population, and the makeup of the population. Ease of policy formation and implementation in any one country may be influenced by whether it is ethnically insular, disparate, or a true pluralistic society. Issues in both Guyana and Trinidad, for example, are dealt with differently than in other member states because of identifiable differences between the two dominant races, Indo-Caribbean vs. Afro-Caribbean (Brereton, 2007; Roopnarine et al., 1997; St Bernard, 1997, 2003).

Marriage statistics in Trinidad and Guyana show that marriage is more prevalent among nationals of East Indian descent than among those of African descent. In both these countries, among the families with ancestry from India, Hinduism and Islam are major religions with doctrines that have profound implications for family life (St. Bernard, 2003). On one side of this scenario is the stubborn high incidence of father absence in one sector of the population (CARICOM, 2007; Dreher & Hudgins, 2010; Evans & Davies, 1997). On the other side of the scenario is a concern about early marriages where young girls may be deprived of opportunities for self-determination. The special Hindu Marriage Act (Laws of Trinidad & Tobago, 2009) allows fathers the decision-making power to marry off their daughters at age 14, not prejudiced by the legal cutoff age for girls in the general population which is 16; all boys have to be 18. Caribbean researchers, among them Barrow (1996) Samms-Vaughn (2008) and St. Bernard (2003), substantiated the family patterns existing in a high percentage of Afro-Caribbean families of low marriage rates and the marginal involvement of fathers in children's lives. Marriage is statistically more prevalent for all other ethnic groups (Caucasian, Chinese, Portuguese, Syrian Lebanese, and people of mixed ancestry). All economic indices show a direct link between marriage and women's economic well-being (CARICOM, 2011c; UNICEF, 2007). Prior to the 1980s, 33 % of all women were in non-marital unions (higher in Haiti, e.g., at 75 %); the numbers were associated with the lower socioeconomic groups. More recent statistics reveal similar patterns emerging among women of middle and higher socioeconomic groups.

Compared to many countries, the economic activity rate for women in the English-speaking Caribbean remains high (UNDP, 2011; UNDP et al., 2011; UNICEF, 2007). Nevertheless, women are caught in the double bind of having household responsibilities and child care along with their employment outside the home. Women of lower status are more affected because of lack of access to expensive child care alternatives and there is minimal subsidized care (UNICEF, 2007; World Bank, 2012a). Balancing work and family continues to be a challenge for large numbers of women. Chioda (2011) corroborates findings that a multidimensional bundle of characteristics affect labor force participation and benefits for women. Among these variables are fertility patterns, levels of education, socioeconomic status, family formation, individual and collective views on gender roles, and whether the woman is employed in the formal or informal sector. Countries in the Caribbean rank high on global charts comparing maternal leave policies (ILO, 2010) showing that 75 % of Caribbean countries provide 12-14 weeks of maternity leave with only 7 % providing less. There is compulsory maternal leave 1 month before giving birth. These are traditions inherited from colonial Great Britain and European countries where maternal leave has been a historical norm (Ray, Gornick, & Schmitt, 2008). Contradicting the access to maternity leave is the reality that benefits are available only in the formal sector, while women are overrepresented in the informal sector, enter and exit the workplace more frequently than their male counterparts, and work more part-time jobs where benefits are not available (Chioda, 2011; ILO-UNDP, 2009). Other types of family leave may be available through some employers in the formal sector and may be unpaid. As the watchdog of labor policies, ILO points out that so far, "the idea of workers with family responsibilities does not appear in legislation" (ILO-UNDP, p. 76).

There has been obvious progress in the fields of education, career paths, and legal policies to combat gender inequities, but constraints are present. Gaps in women's developmental, relational, and occupational opportunities have been identified (CARICOM, 2007, 2011c; ILO/UNDP, 2009; OAS, 2012b; St. Bernard, 2003; UNICEF, 2007). More governmental and nongovernmental resources are

being applied to combating gender-based violence, improving women's reproductive health, creating upward movement in women's employment, and bettering the lives of children affected by poverty, family shortcomings, and gaps in services. CARICOM's regional priorities from 2000 onward have been identified as Children's Rights, Domestic Violence Laws, Women's Employment Protections, Reproductive Health, and Migration issues.

Subgroup Exclusions

Subgroups omitted from CARICOM policy objectives have been the indigenous, first people of the Caribbean, formerly referred to as "Indians," not to be confused with the subpopulations of East Indians whose ancestors came from India. The failure of the Trinidad and Tobago's government to categorize indigenous peoples in the 2010 census did not go unnoticed, neither is the struggle for equal treatment and reparation by the indigenous people of Dominica being ignored (Forte, 2011, 2012). Similar efforts to champion the rights of first people have been documented in Saint Vincent and Belize (McIntoshlan, 1999). Anecdotal reports make note of higher levels of illiteracy, poverty, and early child bearing among the indigenous populations. The UN continues to press CARICOM to include indigenous populations in social policy objectives (United Nations, 2009). The UN has also pursued development objectives about the role of Caribbean men, a group previously omitted from the discourse on family life policies (United Nations, 2011). In the Caribbean, gender affairs have long been considered as women's affairs. Policies on women and domestic violence led to the establishment of ministries for women's affairs. Attempts to be gender inclusive has led to title changes replacing the word "women" with "gender" so that the "Bureau of Women's Affairs" would be the "Bureau of Gender Affairs" or "Office of Gender Equality" (Bureau of Gender Affairs, Kingston Jamaica, 2010). The name change alone will not remove the reality that these offices have traditionally served women. Gradually, with growing unemployment levels among men in the Caribbean and reports on girls surpassing boys in school achievement (CARICOM, 2007; 2011c; UNESCO, 2001; UWI et al., 2007), the gender bureaus may begin to give equal time to policies affecting men and boys.

Political Decision-Making and the Policy-Making Context

The history of CARICOM membership underpins the challenges to policy-making. The objective of regional harmonization must always be tempered with respect for local autonomy and pride in self-government that countries had separately fought to earn. The fact that all member states were independent sovereign countries at the time they formed or joined CARICOM forewarned of difficulties with policy agreements. Anguilla, Bermuda, British Virgin Islands Montserrat, and Turks and Caicos which are associate members to date are still overseas territories of Great Britain and do not have a vote on policy. All major policy matters are processed through the CARICOM decision-making system, where decisions by heads of government are made by consensus. CARICOM is a community of sovereign independent states (CARICOM 2011b). As noted by Grenade (2006) in her analysis of the CARICOM Emerging Model, there was no supranational entity to make binding decisions for member states and the most influence was wielded by the more developed countries – the traditional CARICOM power-houses: Barbados, Jamaica, Trinidad and Tobago, and, to some extent, Guyana.

The 2001 revised Treaty of Chaguaramas (CARICOM, 2007) added the feature of portfolio distribution among the heads of government. One of the four Councils of Ministers is the Council for Human and Social Development. Considering the span of content covered by the term "social development,"

the approach used in the portfolio distribution was to distribute the various elements of social development. The portfolio of community development, including gender and youth, is handled by Suriname; health, by the twin state of Saint Kitts/Nevis; labor, by Dominica; justice, by Saint Lucia; and sustainable development and disaster management, by Belize. The additional conference layers increase the perception that CARICOM has an unwieldy system of operations, but it may also be idealized that the many layers for discourse facilitate the process of consensus.

Social Policy as Precedent for Family Policy

CARICOM cemented its social policy intentions in 1997 with adoption of the "Charter of Civil Society for the Caribbean Community" (CARICOM, 2011a). The document addresses human, civil, political, religious, and cultural rights; the rights of indigenous peoples; of women, children, and workers; of the family; and of people with disabilities. It further guarantees rights to health, education, and basic necessities and the role of social partners. The charter explicitly lists "family" as one of its concerns. Zimmerman (2001) placed family policy within the realm of social policy and posited two distinct perspectives: family policy as a product of modernity built upon the assumptions of progress, universality, and regularity/predictability and family policy reflective of postmodernism, emphasizing difference, particularity, irregularity, and diversity. Zimmerman (2001) connected family policy to English "Poor Law" of the Elizabethan era, a link relevant to the Caribbean. If any region of the world outside of England inherited English Poor Law, that would be the Commonwealth nations, and within that group, the Commonwealth Caribbean. As a differentiated field from social policy, it would be agreed that family policy should address issues attendant on the life cycle from birth to death, covering health, education, social services, housing, employment, income, maintenance, family law, and taxation. These are all issues addressed in the social policies of the Caribbean and documented in the "Charter of Civil Society for the Caribbean Community" (CARICOM, 2011a), presented with a mix of Zimmerman's modernist and postmodernist elements.

Women, Children, and Families

The impetus for the formulation of special policies on family life in the Caribbean can be traced to international and local advocacy in the wake of the United Nations Conventions (United Nations Documentations, 2012), particularly the Convention on the Rights of the Child (CRC) (1989), the Convention on the Elimination of All Forms of Discrimination against Women (1979), Declaration on the Rights of Disabled Persons (1975) followed by Convention on the Rights of Persons with Disabilities (2006), International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (1990), Proclamation on Ageing (1992), the United Nations Millennium Declaration (2000), and the Declaration of Commitment on HIV/AIDS (2001); the agencies of the United Nations jointly and separately are very active in the Caribbean (PAHO, 2010a; UNDP, 2010; UNDP et al., 2011). CARICOM states have made a policy commitment to the articles of the CRC and have pledged through the process of ratification to undertake all appropriate legislative, administrative, and other measures for the implementation of the children's rights. CRC influenced the push to create policies affecting children such as child protection, age of consent, child maintenance, compulsory schooling, child development programs, inheritance and property rights, age of marriage, and parental responsibilities.

410 A.Y. Gibbons

Responses to Violence Against Women

The gains which have been made as regards domestic violence awareness could be gauged from the high level of official responses by Caribbean governments and NGOs to international statements on violence against women. Clarke (1998) pointed out that within the Caribbean, domestic violence has been the most central terrain on which women's organizations have fought the battle to eliminate gender discrimination. The governmental response in the Caribbean concentrated on legal reform, following the extended guidelines from the international instruments. CARICOM independent member states are also members of the Organization of American States (OAS) along with their Latin American neighbors, the USA and Canada. The OAS multilateral Treaty on the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women called upon State parties to include in their domestic legislation penal, civil, administrative, and any other type of provisions that may be needed to prevent, punish, and eradicate violence against women and to adopt appropriate administrative measures where necessary and to establish fair and effective legal procedures for women who have been subjected to violence (OAS, 2012b).

Advocacy groups have had a maximized role in keeping the issue of domestic violence in the forefront. At the international, regional, and national levels, broad collaborative efforts on the part of diverse women's organizations resulted in highlighting violence against women as a public and therefore political issue (Clarke, 1998). Women's organizations worked together to demand state action, particularly in the area of legislative reform. In response, CARICOM's Women's Desk developed model legislation which has been used by several governments in the region as the basis for revision of legislation (CARICOM, 1997; 2011d), addressing issues such as sexual offenses, the criminalization of rape within marriage, evidentiary requirements, and reform of court procedures. Amended sexual offense legislation already exists in the Bahamas, Barbados, and Trinidad and Tobago (OAS 2012b). In addition to guidelines on sexual offenses, the entire model legislation document also focuses on citizenship, domestic violence, equal pay, inheritance, sexual harassment, maintenance, and maintenance orders (CARICOM, 2011d).

Poverty and Human Development

In 2000, the UN brought together 189 nations, who jointly made a promise to free their people from extreme poverty. This pledge turned into the eight Millennium Development Goals, which UNDP established for the target year 2015 (UNDP, 2010). The goals focused on social development themes already on the CARICOM agenda, such as child and maternal health and universal primary education, as well as projects in the works to eradicate chronic poverty and also to combat HIV/AIDS. The 2012 MDG Reports for Latin America and the Caribbean (UNDP) also found that it was a forward thinking trend for the Caribbean nations to focus on policies that promote gender equality and empowerment of women as a path towards the reduction of poverty. The reports confirm that women and children are the ones affected most by poverty and that a high proportion of households are headed by women. UNDP supports the efforts of CARICOM, conceding that "gender equality policies in the labour market help to increase employment rates --- and also help to lower the number of working poor" (UNDP, p. 102).

The Family Impact Lens

Family professionals have been challenged to communicate with and encourage decision-makers to apply a family impact lens to policy-making (Bogenschneider et al., 2012). The idea of using a "family impact analysis" was introduced by Bogenschneider (2006) as a formal in-depth methodology

that uses a checklist tool to fully examine the extent to which rules, legislation, laws, programs, agencies, or organizations do or do not support families. Supporters of this approach vouch for its usefulness in improving the effectiveness, efficiency, targeting, design, and implementation of programs and policies. It may be too soon for the Caribbean region to look through the family impact lens when so many subgroups are working towards the attainment of basic recognitions and human rights. The history of social development in the Caribbean reveals that many policies have been formed by demands from advocacy groups, response to emergencies, and top-down demands from funding agencies and international bodies with an interest in the Caribbean region that may or may not be aligned with the interest of families (Kharas, 2007). The call for sustainable development happens alongside the chaos of economic crises, natural disasters, and appeals for instant redress by groups of the disenfranchised, distressed, and dispossessed.

Bogenschneider et al. (2012) accede that "families are only one part of a vast, multifaceted, political landscape" (p. 528) and that family approaches may not always be the most effective. These researchers acknowledge that focusing too exclusively on families could be used as a rationale for interfering with hard-fought individual freedoms, such as women's career opportunities, equal wages, and reproductive rights, and further warn about the spectrum of unintended consequences when focusing narrowly on a pro-family agenda. Economic agendas are always the focus of policies in the developing world. These may not be labeled as family policy. Nevertheless, no one can argue against the expectation of positive outcomes for families resulting from policies that promote employment for both men and women or that a policy to improve housing will also improve family life. In a study on maternal conjugal multiplicity in Jamaica (Dreher & Hudgins, 2010), findings matched previous arguments by other researchers that policies promoting fair employment compensation for working women in Jamaica would be more useful for the time being than policies which seek to promote legal marriage as a vehicle for improving the standard of living for women and their children.

Bogenschneider et al. (2012) distinguished between evaluation of policies and programs and applying the family impact analysis checklist. Evaluation, they argue, focuses on whether stated goals are met, whereas family impact analysis examines whether these goals or efforts to achieve them have intended or unintended consequences for families. The authors admit that operationalizing the family impact lens can be complex and must be supported by expert attention from evaluators and practitioners. Bogenschneider and Corbett (2010) conclude that family policy should become a field of inquiry in itself as a subfield of social policy. With so much of social policy focused on issues that affect family life, it will eventually be time for CARICOM policy-makers to call on professionals with expertise in family matters to ensure that policies have the intended outcomes for families.

Towards Evidence-Based Policy-Making

In 2008, CARICOM added to its mission an objective to develop a sustainable statistical infrastructure within the CARICOM Secretariat. Outcomes were projected as providing accurate, timely, and reliable statistical information of a high quality and broad scope; facilitating analysis and dissemination of these data; promoting their use in effective and efficient decision-making; and, simultaneously, fostering a similar enabling environment for statistical development among member states of the Caribbean Community (CARICOM 2008, 2011b). The main objective was to institutionalize the production of Social/Gender and Environment Statistics in the national statistical systems in order to inform policy formulation. Bogenschneider (2006) and Bogenschneider et al. (2012) emphasize the importance of evidence-based policy-making. This particular CARICOM project which was implemented during the period July 2000 to December 2001 sought to fulfill the need for evidence-based indicators. The compilation of Statistics Acts of member states was perceived as a starting point to see what changes or modernizations were required in the national statistical systems to meet these challenges (CARICOM, 2011b, c). To date, eight member states have formulated policies on data collec-

412 A.Y. Gibbons

tion and have each separately passed a "Statistics Act" – Antigua and Barbuda, Bahamas, Barbados, Belize, Guyana, Jamaica, Saint Kitts and Nevis, and Trinidad and Tobago. One associated state, Anguilla, has done the same.

Statistics make up one side of the equation as regards evidence-based policy-making. Qualitative input is important as well to inform the analysis of statistics. The involvement of social partners is written into CARICOM's Charter on Civil Society (2011a). Myriads of research activities have been taking place in the Caribbean for more than seven decades, based in the University of the West Indies three campuses (St. Augustine, Trinidad; Mona, Jamaica; Cave Hill, Barbados) as well as the University of Guyana – strong social science environments with motivated faculty and students (UWI, 2012). The region attracts a fair share of attention from scholars operating within regional NGOs (NCDF, 2012) and internationally based scholars and program evaluators from funding agencies. Bibliographies (Barrow & Ince, 2008; ECLAC, 2009; UNESCO, 2001) attest in part to the wealth of research information findings and analyses on social development and policy needs in the Caribbean as regards family issues: children, women, marital and family unions, adolescents, employment, gender conflicts, health, and education. The first-ever comprehensive bibliography of existing research on gender and education in the Commonwealth Caribbean was published by the Institute of Education and the Centre for Gender and Development Studies, University of the West Indies, Mona, in cooperation with UNESCO (UNESCO, 2007).

Multiple Agency Influences and Inputs on Policy-Making

CARICOM member states are all recipients of foreign aid, jointly or together, to a greater or lesser extent, depending on the agencies' parameters and the development category in which the individual member falls. Aid agencies operate with multilateral and bilateral agreements within the region, and all contracts include technical assistance and specific agendas. Agencies working in the Caribbean on a consistent basis and with impact on social and family policy include but are not limited to USAID, United Nations agencies working separately (UN/AIDS, UN Women, PAHO/WHO, UNDAF, UNDP, UNICEF, UNEP, UNESCO, FAO, ILO), Canadian International Development Agency (CIDA), Inter-American Development Bank (IADB), International Monetary Fund (IMF), and the World Bank. Bilateral agreements also exist between individual member states and foreign aid countries donor countries such as the USA, Canada, France, Germany, Great Britain, China, Germany, Taiwan, European Union, Australia, The Netherlands, and Poland. The 2011 report from the Development assistance Committee (DAC) of the OECD (OECD, 2011) acknowledged that multilateral aid agencies develop and use their own decision-making models and want value for their money. Kharas (2007) found that while aid agencies add to human and financial resources, they increase the complexity of the development process; not all aid that is allocated ends up being programmable aid in the recipient countries. The largest multilateral agencies with vertical funds were found to be the least likely to collaborate with government programs in the field, or to respond flexibly to new development demands, because they are focused on their own centrally designed and controlled programs. Active involvement of aid agencies in the Caribbean can lead to opposing outcomes. Financial and technical assistance push the development agenda and implementation of policies in the region. At the same time, on-the-ground participation of aid agencies seeking swift results can undermine CARICOM's efforts at evidence-based policy building and policy harmonization.

The purpose of the World Bank, for example, is to finance and support projects at the requests of governments (The World Bank, 2012b). The agency sets its own priorities as evidenced in its Country Assistance Strategies (CAS) in which priority areas for assistance are identified based on its own indicators. For the Caribbean, the World Bank identified early childhood care and development as the primary challenge for the region (World Bank). The World Bank focuses on "small children" at the

top of its priority list, committing major funds for the 2010–2013 program outlined in the plan "Early Childhood Initiative: An Investment for Life" (World Bank, 2012a). In its public relations efforts, a unilateral decision by the World Bank documents the partnership agreement between the World Bank and Latin American renowned entertainer Shakira (Caribbean Net News, 2010; World Bank, 2010). The initiative is aimed at expanding development programs for children through age 6 to provide them adequate nutrition, health care, and other positive supports and is expected to provide 300 million dollars over a 2-year period in loans, grants, and trust fund resources, as well as technical support, towards the design and implementation of child development policies. Gender equity and work and family balance are also on the agenda. While CARICOM works on a priority list of policies for and with its member states, multilateral agencies such as the World Bank have independent ideas on how to move forward.

Another regional organization with policy-making influence is the Organization of American States, heralded as the world's oldest regional organization, dating back to 1889 (OAS, 2012a). Its 35 members are the countries of the Americas, including the USA, Canada, Central and South America, and the 14 Caribbean sovereign countries. OAS lists several areas of focus for carrying out its mission, among which are early childhood; economic, social, and cultural rights; education; labor and employment; older persons; persons with disabilities; social development; and social protection (OAS). The strongest inroad of the OAS into the area of family policy within the 2000 decade is the field of family law (OAS, 2012b). The Network of Hemispheric Legal Cooperation in the Area of Family and Child Law (the "Network") was established during the Seventh Meeting of Ministers of Justice or Other Ministers or Attorneys General of the Americas (REMJA-VIII). The member states instructed the General Secretariat (Secretariat for Legal Affairs) to create an inter-American project on legal cooperation and mutual assistance in the area of Family and Child law. The rights of minors were given special emphasis within the objectives. Member states of the OAS include the CARICOM region, resulting in possibilities for policy cooperation among the stakeholders, or policy incongruence in an atmosphere of independent agendas.

Family Law and Family Court

The word "family" is assumed to be implicit in social policy-making so far in the Caribbean context. It is explicit however in the area of "Family Law" and "Family Court." The OAS has established a special division within its secretariat to work on family law (OAS, 2012b, c). Another Caribbeanbased agency, the Organization of Eastern Caribbean States (OECS) has taken similar action. The OECS was formed in 1981, when seven Eastern Caribbean countries signed a treaty agreeing to cooperate with each other and promote unity and solidarity among the members. The Treaty became known as the Treaty of Basseterre, so named in honor of the capital city of Saint Kitts and Nevis where it was signed. The OECS is now a nine-member grouping comprising Antigua and Barbuda, Dominica, Grenada, Montserrat, Saint Kitts and Nevis, Saint Lucia, and Saint Vincent and the Grenadines. Anguilla and the British Virgin Islands are associate members of the OECS. These island nations are members of CARICOM as well, another overlapping policy arena. The OECS Legal Unit was structured to provide legal support members, including law reform and harmonization. The Family Law and Domestic Law Reform Project came into being in 2000 as an OECS project for its subregion covering its member territories. The main objectives were "harmonized and reformed legislation on children, family law and domestic violence; harmonized and restructured social services; and public support for recommended changes" (OECS, 2012, p. 1). Phase 1, which was targeted as research into domestic violence and legislation, was completed in 2001. Phase 2 was targeted as Drafting of new legislation by 2002, while Phase 3 would focus on Monitoring and Evaluation to be completed by 2003. The follow-up to this legal reform initiative took a backseat to other projects. The idea was not

414 A.Y. Gibbons

abandoned. CARICOM, which includes the OECS countries, tackled the gap of regional statistics and data collection as the best strategy to inform policy formation (CARICOM, 2011c). The Chief Justice of the Eastern Caribbean, head of the OECS Law Reform project, highlighted the need for greater harmony within family laws throughout the Eastern Caribbean as regards divorce, child support and maintenance, equitable distribution of property, laws for unmarried partners, gender equity, and the establishment of Family Courts (UNICEF, 2002, pp. 3–6).

In an examination of child law in the Caribbean, McDowell (2000) discovered that some countries still based their family laws on old UK legislation but saw changes in Barbados, Trinidad and Tobago, Guyana, and Jamaica, some ideas being borrowed from Australia and New Zealand models. The call for law reform as regards children and families is being heard, but difficulties plague the efforts. Dina (2010) provides the legal backdrop that underpins the difficulties, reminding that the legal system of the Commonwealth Caribbean is mixed because the basis for laws derives from the former colonial administrations. The countries of the Commonwealth Caribbean rely on the form, structure, substance, and content of the laws of England, but even then there are exceptions. Dina describes the legal system in Guyana and Saint Lucia as hybrid, citing the fact that Guyana has the influence of the Roman-Dutch tradition, while Saint Lucia has a strong influence of the French civil law. In addition, Caribbean countries like Guyana and Trinidad and Tobago where there are large Indo-Caribbean populations, there is the influence of other legal systems, such as Hindu, Muslim, and Indian law. The associate members of CARICOM (Anguilla, Bermuda, British Virgin Islands) are still territories of Great Britain and therefore have legal systems framed by British law. The CARICOM region continues to work towards influencing its members to establish family courts. So far, family court legislation has been established in Antigua and Barbuda, Belize, Jamaica, Saint Lucia, Saint Vincent and the Grenadines, and Trinidad and Tobago. Guyana is on stream, to date, to establish a family court system before the close of 2012. Current laws across the Caribbean reflect the similarities and differences in their cultural, social, political, and economic paths.

Health and Education

A plethora of regional developmental agencies serve the Caribbean region as regards health, education, and social reform affecting families. Some agencies are affiliates of parent organizations in the USA, Canada, Great Britain, or Europe; others are indigenous with regional and local presence; all seek to influence policy-making. NGO Caribbean Development Foundation (NCDF, 2012) maintains a list confirming the presence of scores of NGOs. NCDF is a powerful umbrella NGO in itself, promoting large-scale advocacy campaigns on human rights, justice, women's rights, domestic violence, and the specific integration of Haitian displaced families within other Caribbean countries. In small countries, influence peddling (known as "lobbying" in the developed world) is up close and personal. Policies can either spend an inordinate time in the pipeline because of the vast number of players or be quick and sporadic in response to the demands of an aid agency, a donor country, or a powerful local political campaign donor. Instant policy-making is usually chaotic in implementation.

The UNESCO affiliate located in Jamaica administers a cluster office that serves, in bilateral arrangements, CARICOM member states, with the exception of Haiti, Bermuda, and Anguilla. UNESCO's mission in brief is to promote educational opportunities for all populations. Its strategy includes policy-making, and influencing policy-making, expressly stated in part as to anticipate and respond to emerging trends and needs in education and develop education policy recommendations based on research evidence (UNESCO, 2012). Education is seen as the gateway out of poverty for children of poor families. UNESCO keeps the education agenda uppermost in the minds of Caribbean policy-makers by providing guidelines on policies and influencing their passage and implementation.

The Pan American Health Organization (PAHO) is firmly entrenched in the Caribbean as the official arm of the World Health Organization, whose mission is to shape the health research agenda, set norms and standards, articulate evidence-based policy options, provide technical support to countries, and monitor health trends (WHO, 2012). There are offices in Jamaica (PAHO, 2010b), Trinidad and Tobago (PAHO, 2010a), and Haiti (PAHO, 2011). The PAHO affiliate in Barbados serves all the remaining islands. PAHO's mission is to lead strategic collaborative efforts among member states, provide technical expertise and financial support, define national health priorities, and clarify needs. This mission was hijacked in Haiti with the 2010 earthquake and ensuing hurricanes. Amidst the instability and continuing vulnerabilities, PAHO's objectives in Haiti focus on humanitarian assistance, post-disaster rehabilitation, stemming malnutrition among children and lactating mothers, managing vaccination programs, reproductive health issues, and HIV/AIDS (PAHO). The agency works closely with the CARICOM Secretariat, concealing any real assessment of which side finally determines policies. PAHO's personnel maintain a presence in board rooms, in the field, and in the interface where negotiations occur between policy-makers and advocates for health reform.

PAHO/Jamaica Country Cooperation Strategy (PAHO 2010b) has been hailed as the first of its kind, including objectives that seem to stray somewhat from the WHO mission, but which are lined with human development efforts as a whole. The strategy framework is expected to be an example to other countries of the Caribbean. Thematic areas underlying the objectives are Health, Environment and Poverty, Justice, Peace and Security, Education, and HIV/AIDS (p. 39). One of the program outcomes embraces the gender equity focus – a theme common to other agencies – but expressly addresses policy-making through the creation of a supportive and enabling legislative and policy framework with a gender-differentiated focus. The problem of lack of coordination between aid agencies has been cited in many reports (Kharas, 2007; St. Bernard, 2003). The PAHO strategy for Jamaica emphasizes technical cooperation with bilateral country partners, multilateral bodies, private philanthropists, global funders, all governmental agencies, and all NGOs. CARICOM is identified as a working partner. The intention is to promote country cooperation, with the potential to replicate across the region where health outcomes will be merged with other social development, child, and family outcomes.

Parenting Policy

Jamaica has moved forward with another first of its kind in the region, by tabling a national policy on parenting. The country established the Jamaica National Parenting Support Commission (NPSC, 2012) and drafted its National Parenting Policy. The NPSC is charged to carry out activities that assist parents in fulfilling their roles and responsibilities as outlined in the National Parenting Policy (NPP). The key components of the commission are outlined as developing a public education strategy and campaign, establishing information centers, identifying and training parent facilitators, performing national curricula reviews, implementing program standards, and endorsing parenting programs. The policy clearly defines the roles and responsibilities of parents, including those related to survival, development, protection, and participation in their children's schooling and their children's lives in general. It is anticipated that other member states of CARICOM will take note. Discourse within the Caribbean region in the wake of the UN Convention on the Rights of the Child suggests that member states already share the sentiments expressed in the national vision for parenting in Jamaica that "every parent --- by birth, adoption or guardianship recognizes and accepts his/her duty to ensure that the rights of the child are always upheld, the best interest of the child is always promoted and the child is always loved and provided with opportunities and resources, within a safe, caring and nurturing environment, to achieve his/her full potential and ultimate fulfillment" (NPSC).

A.Y. Gibbons

Complexities

The process of policy-making in the CARICOM region is overwhelming and the complexities are unparalleled. Considering the knotty network of channels and crosswinds, the CARICOM Secretariat has managed to maintain a strong profile. CARICOM is the unifying force for governments of its member states despite the overwhelming presence of aid agencies and other umbrella organizations that compete for power, influence, and independent credit for human development achievements. CARICOM's population is 16 million, close to the population of the Netherlands or Chile, for example. But population is only a number. Neither the Netherlands nor Chile is faced with forming policies for a group of sovereign countries trying to work under an umbrella government structure that is without supra-government powers – countries that also keep an eye on their own national political interests. The structural framework for policy-making within CARICOM is challenging at best and impossible at worst.

Writing about the formation of family policy in the United States, Zimmerman (2001) expressed that attitudes towards government, family, and the economy are central to family policy and its constructions. The author examined the impact of political cultures on formation of family policy using Elazar's typology of political cultures as moralistic, individualistic, or traditionalistic. Countries in the Caribbean region show elements of influence from all three dimensions. Moral tones, influenced by religious beliefs, are present. Pregnant girls are not allowed to attend any public school or return to school in any Caribbean country, although Jamaica is more forgiving in establishing special high school programs to cater to pregnant teenagers and teenage mothers. The islands took a long time to reverse laws on bastardy which previously disallowed children deemed illegitimate from claiming or receiving inheritance. Abortion is a sensitive topic and against the law in all countries of the Caribbean. Same sex marriage has reached the discourse stage, yielding to international impositions as well as pressure from the Caribbean-based group, the Coalition Advocating for Inclusion of Sexual Orientation, CAISO (International Resource Network, 2010), which welcomed the public statement in 2012 by US sitting president Barack Obama that the gay and lesbian community should be allowed to marry like everyone else (Gonzales & Neaves, 2012). Same sex marriage has been legal in the Netherlands since 2001, but previously Dutch-colonized Suriname has aligned its stance with its CARICOM partners. Trinidad and Tobago may lead the new wave by succumbing to the demands of CAISO which is most active in that country.

Given the eclectic history and traditions, "family" in the Caribbean may seem fractious to outsiders, with the uneven marriage norms, relatively high rates of non-married births, and persistence of female-headed households. Zimmerman (2001) noted that most family policies in the USA have been implicit and not explicit but that over time, the word "family" will appear more and more in legislative summaries. Caribbean social policies have followed the implicit path. Family Court and Family Law are the subsets in which the word "family" is explicit. As those areas develop and demand delineations, other family policy themes will have to be explored. Defining family is a difficult task. Family scientists insist that the question of defining family may have to be answered even if "family" was a term that was taken for granted. Bogenschneider (2006) clarifies that definitions often determine who benefits from a program and who does not and also convey society's beliefs about what is normative vs. what is deviant. As the Caribbean enters the realm of defining "family," the proposal by Moen and Schorr (1987) is well intended that perhaps policies can accommodate different definitions depending on the intent of the policy. In their US study of how social scientists communicate family research to lawmakers, Friese and Bogenschneider (2009) declare the conundrum that policy-makers and researchers usually operate in two different cultures. Researchers have a tradition of writing lengthy papers and policy reports; lawmakers make decisions without reference to such reports. This dilemma is evident in the impasse between CARICOM and the social partners regarding the objective of harmonization that is written into the NSDS - National Strategies for the Development of Statistics (CARICOM 2011a). The involvement of social partners in policy-making is written into the Charter of Civil Society. Outside of the rhetoric, the stated objective has not been met so far (Babb, 2011; Girvan 2006, 2011).

Nationhood in the Caribbean came with certain priority family issues, such as poverty, gender inequities, and high rates of adolescent pregnancy. The HIV/AIDS pandemic, which arrived later, necessitated immediate government intervention, considering that the Caribbean region has the second highest rate of HIV/AIDS in the world behind sub-Saharan Africa (UNAIDS, 2010). Extremely high rates in Haiti skew the statistics (UNDP, 2010, 2011), but the problem is still a modern plague to the region. UNICEF (2007) found that countries implemented an array of social protection programs to address the various risks and vulnerabilities faced by children and their families but that the programs do not reach the most vulnerable within the populations. Reasons cited were design and implementation constraints, lack of clear objectives, and multiple, overlapping, and uncoordinated programs. More critical are the conclusions regarding "poorly documented policies and procedures" (p. 73). This is a problem that reaches back to the overlapping of an excessive number of international and regional bodies working in the region on similar but separate missions. Dye (2013) reminded that governments are constrained by many powerful social forces that are not easily managed nor controlled by governments and that policy analysis cannot offer solutions to problems when there is no general agreement on what the problems are. CARICOM heads of governments may need to backtrack before going forward, in order to find a design for policy-making that can clarify objectives and really harmonize policies. In their cooperative venture with PAHO, CARICOM may consider approaching the exercise as one of "scenario planning" as against the traditional strategic planning. Scenario planning will force policy-makers to break out of the standard view, reveal the blind spots, and understand their source of disagreements and their failure to implement even the policies on which they have agreed (NetMBA, 2010; Schwartz, 1996). To avoid the overlapping and uncoordinated programs, CARICOM can use its collective strength and borrow from the proposal by Kharas (2007) to call for new codes of conduct for aid agencies so that they work within the system in the recipient countries and not at odds with the system.

Conclusion

CARICOM has persisted because its member states bought into the dream. Reports and analyses over the decades have reinforced that there are problems and hopes common to the peoples of the CARICOM region because of and perhaps in spite of the cultural and historical milieu. Grenade (2006) emphasized that "the philosophy which underpins Caribbean integration goes beyond economics --- it is based on solidarity, identity, the need to develop a Caribbean civilization despite odds" (p. 4). Zimmerman (2001) deduced that "problems come into discourse in family policy largely because they reinforce ideologies about their causes and the role of government in addressing them" (p. 357). There have been formal and informal agreements on the problems of family in the Caribbean. Clark (1998) construed that the issue of violence against women brought Caribbean women together in a way that no other issue has done. The activism has continued at national and regional levels. The demand still is that the region's governments must respond with an integrated and comprehensive strategy to eliminate gender discrimination and violence against women. The UN Report on Men in Families (UNDP, 2011) has provided a list of relevant issues affecting families and the role of men in addressing them. There is a need to look at men's reproductive health, labor market involvement, rearing of children, and men's availability to their families. In congruence with support for the continued emphasis on the development of women and the well-being of children, there is a growing awareness of men's development issues and gaps in services to men. Recommendations are to heed the UN push for law reform in areas of paternal leave, migrant labor, minimum wage, and social services for men and also to begin addressing the more recent public issue of same sex relationships which have had a more significant negative impact on men.

418 A.Y. Gibbons

Women have won access to more, but not necessarily better jobs (ILO-UNDP, 2009) Social-class differences divide women so that those at the top tier have access to benefits won by the women's movement while others struggle. Economically advantaged women can free themselves of domestic duties and child care and hand over such labor to poorer women, who have access only to the informal sector where they are minimally paid and are denied labor rights or leave benefits. Conflict between family responsibilities and work still exists for all women but affects different subgroups of women in different ways. Tensions arising out of such discordance have been linked to domestic violence, regardless of social class, as well as lapses in child care and elder care, and for career-minded women, restraint in accepting advancement in the workplace. ILO warned that strategies are needed to address these tensions even as countries work on domestic violence prevention, equal employment for women, the plight of children, and the elderly who in increasing numbers will need care while the traditional caregivers - women - are fully involved in the marketplace. Whether or not countries sign ILO conventions, it is critical for CARICOM to formalize the tenets of the conventions and include within social and economic policies the goal of enabling men and women to earn a living without experiencing severe conflict between their employment and their family responsibilities. There should be nationally mandated standards of provision for quality alternate child care, elder care, pre- and postnatal maternity and paternity leave, leave for family illness or family emergencies, flexible working hours, vacation leave, and retirement benefits. The recounted events that triggered the discourse on social policy in the Caribbean have already led to the word "family" being introduced into CARICOM's Charter of Civil Society. There is agreement that families benefit even when family policy is just implicit in social policy. It will not be such a leap for Caribbean policy-makers to additionally frame an explicit category for family policy within the doctrines of social policy, to provide a measure of sureness about intentions, definitions, and expected outcomes for families of the Caribbean region.

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420 A.Y. Gibbons

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Part VII Family Policies in South America

Chapter 27

Family Policies in Colombia: A Focus on Policies for Vulnerable Families

Sonia Carrillo and Karen Ripoll-Núñez

Abstract Family policy in Colombia has primarily targeted families living under vulnerable conditions. Such policy initiatives are part of the government strategies to fight two social issues that affect a large percentage of the population: poverty and forced displacement. In this chapter, we analyze the social and historical context that framed the current conceptualization of family and family laws and policies in Colombia. Next, we describe two existing programs for families living in poverty and forced displacement and discuss the current challenges for family policy development, implementation, and evaluation that emerged from an analysis of these policies. The chapter concludes with a discussion on specific recommendations to overcome existing challenges and foster the development of explicit family policies in Colombia.

Keywords Colombian families • Family policy • Poverty • Forced displacement • Vulnerable conditions

Introduction

Like other Latin American countries, Colombia has undergone significant social, economic, and political changes during the last 50 years. These changes have had a significant impact on individuals' living conditions and families' well-being. Economic crises during the last decades have led to an increase in unemployment and poverty rates in Colombia. Also, the internal armed conflict has forced families in rural areas to migrate to safer territories – a phenomenon known as forced displacement. Governments in developing countries such as Colombia have to prioritize social issues such as poverty and forced displacement in the formulation of laws, programs, and policies targeting families. The present chapter focuses on policies for families living under vulnerable conditions in Colombia. More specifically, we analyze policy initiatives oriented toward families living in poverty as well as families displaced due to the internal armed conflict. The chapter is divided into three main sections: Firstly, we present an analysis of changes in the social context that have influenced the conceptualization of family underlying current laws and policies in Colombia. Secondly, a description of the development of family policies is followed by a brief review of government initiatives with regard to marriage and family—work balance. Thirdly, we focus on existing policies for families living

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in vulnerable conditions (i.e., poverty and forced displacement) and discuss some of the major challenges and limitations to such family policies. Lastly, we present recommendations to the development, implementation, and evaluation of policies for families living in vulnerable conditions that respond to the challenges discussed throughout the chapter. We focus on three specific questions to guide our analysis: (1) What is the impact of social and economic changes experienced in the last decades on the conceptualization of the family in Colombia? (2) Do laws and family policies oriented toward families and, in particular, those focusing on vulnerable families hold an explicit approach to family issues? (3) What changes in the development and evaluation of policies would help overcome the challenges and limitations of existing family policies in Colombia? In the following section, we discuss the current conceptualization of the family in Colombian social policies. We also describe the evolution of laws and policies around family issues and the challenges that these policies currently face in our country.

Social and Historical Context of Colombian Families

In this section we focus on our first question, regarding the impact of social transformations experienced in the last decades on the conceptualization of the family in Colombia. The family is identified in many societies as the basic social unit and the foundation of individuals' development and socialization. However, there is a considerable disagreement regarding its definition, characteristics, and functions. The family has been defined in diverse ways that vary depending on the social and cultural contexts and the historical period in which it develops.

The United Nations Development Programme (cited by Arriagada, 2001, p.7) defined a family as "a dynamic scenario in which the basic dimensions of human security are defined: [specifically] the processes of material reproduction and social integration of individuals." In the Colombian Political Constitution (Article 42), the family is defined as "the fundamental nucleus of society which is formed by legal or natural bonds, by the free decision of a man and a woman to constitute a marriage, or by their responsible will to form it." As it is stipulated in the same article, it is a function of the state and society to ensure the integral protection of the family (Colombian Political Constitution, 1991).

Societies have faced numerous transformations in the last decades as a result of economic, social, and cultural changes that have caused an important impact on the family. For instance, (a) economic crises have resulted in an increase in poverty rates in different countries, (b) changes in social and political conditions have forced migrations from rural to urban contexts, and (c) changes in access to education and improved social conditions for men and women have produced variations in family characteristics and stability (Kaluf & Maurás, 1998). These transformations have led to new ways of understanding individuals' development within the family, and, consequently, they have given origin to new programs and policies for children, adolescents, and families in different Latin American countries (Robledo, 2011).

During the twentieth century, the Colombian society experienced significant changes that resulted in new conceptualizations of the family. Improved access to medical services contributed to reduce the population's mortality and increased life expectancy. Birth control campaigns made a significant impact on the size of families: The number of children per family dropped from an average of 6 in 1960 to 3.9 in 2005 (DANE, 2005). The patriarchal family model, in which men were the head and authority of the family, began to change (Pachón, 2007). An increase in women's level of education and participation in the workforce, the influence of the women's rights movement, new laws about civil marriage and separation, a rise in divorce rates, an increase in the number of two-income families, and a reduction in family size were some of the changes that led to important transformations in families' structure and organization in Colombia (Jelin, 2005; Kaluf & Maurás, 1998; Maurás, 2005).

Table 27.1 Demographic characteristics in Colombia

Demographic characteristics	
Population	44 million
Poverty rate ^a	37.2 %
Population with unsatisfied basic needs	27.8 %
Extreme poverty	12.3 %
Average number of persons per home	4.3
Employment statistics	
Men	73.5 %
Women	46.1 %
Unemployment	10.4 %
Minimum wage	\$560.409 (287USD)
Types of family structures	
Nuclear (both parents)	62.4 %
Men head of the family	97.1 %
Women head of the family	2.9 %
Single-parent	2.4 %
Single father	11.0 ^b
Single mother	88.3°
Extended families (includes grandparents-relatives)	25.8 %
Average number of children per family	3.9

Note. Percentages are based on the country's total population
Adapted from Carrillo et al. (2012). Data sources: CEPAL (2010), (DANE 2005), National Planning Department (2005, 2010), Profamilia (2010)

Note: Percentages are based on the country's total population

Diverse family structures emerged in Colombia during the second half of the century and the dynamics of family functioning became more complex. Although the biological nuclear family remains the predominant family structure in Colombia (62.4 % of families), the number of families with diverse structures (e.g., single-parent families, extended and adoptive families) has increased in different regions of the country (CEPAL, 2010; DANE, 2005; National Planning Department, 2005). An important change in family structures in Colombia is reflected in the increase in families headed by women. Data from the National Demographic Survey indicate that the proportion of families headed by women between 2000 and 2010 increased from 28 to 34 % in Colombia (Profamilia, 2010). Different social factors have contributed to this change: (a) the rise in separation and divorce led to an increase in the number of single-parent families and (b) in rural areas a high number of men have been recruited or killed by illegal armed groups during the last decades, which has resulted in an increase of women-headed households (e.g., mothers and grandmothers). In addition to this, some authors have pointed out that the lack of men's economic and social support has led to a social phenomenon named the "feminization of poverty" (Aguilar, 2011; Damián, 2003) (for more information about general sociodemographic characteristics in Colombia, see Table 27.1).

The departure from the traditional family model – i.e., a patriarchal family structure that dominated during most of the twentieth century – brought about three main changes in family functioning and relations. First, gender roles within families changed and, as a result of such changes, a greater emphasis on equality permeated family relationships (Pachón, 2005). Second, although the family continued to be regarded as a core social system that fosters the development of individuals, it was also conceived of as a context for conflict and crisis that moves toward changes in societal traditional values and behaviors. Contemporary perspectives propose that families not only are in charge of satisfying individuals' basic needs but also play an essential role in the upbringing of socially and psychologically

^aNational Planning Department (2010)

^bPercentage of single-parent families headed by fathers

^cPercentage of single-parent families headed by mothers

healthy individuals with the ability to adapt to diverse contexts (Ramírez, 1998; Cadena Ruíz, 2004). Third, families were initially conceived of as mere recipients of benefits provided by government laws and social programs. However, a new conceptualization of the family has emerged in social policy, which assigns families a more active and participatory role. Families are regarded as transformative agents and as contexts that foster new forms of social functioning. Thus, families began to be seen as mediators between government's plans and individual's development and well-being (Cadena Ruíz).

Regarding the question about the impact of social and economic changes on the conceptualization of the family in Colombia, we conclude that, despite the numerous social changes, there are some state organizations and policymakers that maintain conservative views of the family that do not coincide with the changes experienced by families across the country. Such conservative views, which some have named "familism" (Sunkel, 2007), place most family responsibilities on mothers and keep fathers alienated from essential parenting tasks. As women's participation in the workforce continues to increase, designing programs that support mothers and fathers in balancing family and work demands becomes a necessity. The emergence of more complex family structures also demands social actions that focus on the dynamics of relations between adults and children in single-parent, divorced, and stepfamilies (Carrillo, Ripoll-Núñez, & Schvaneveldt, 2012).

History of Family Policies in Colombia

Major advances in the development of family policy in Colombia occurred during the second half of the twentieth century as a result of numerous social and cultural changes. According to Cadena Ruíz (2004), during the first decades of the twentieth century, social programs mainly focused on individual family members, rather than on the family as a unit. Laws and policies that emerged during those decades were oriented toward mothers, fathers, or children individually. The first government initiatives that reflected an approach to the family as a social group appeared in the 1960s. Three major developments are examples of such a change (Cadena Ruíz). The first was the creation of Family Compensation Organizations, as part of the Social Security System, in 1962. These organizations were responsible for creating and implementing programs to enhance families' well-being and operated with a monetary contribution from companies that affiliated their employees to these organizations (Cortés, 2011). Second, in 1968 under the administration of President Carlos Lleras Restrepo, the Colombian Family Welfare Institute (CFWI) (in Spanish, Instituto Colombiano de Bienestar Familiar) was founded. The CFWI's mission was defined as follows: "to work for the development and integral protection of early infancy, childhood, and adolescence and for the well-being of Colombian families" (Colombian Family Welfare Institute 2008, 2011). The majority of the programs developed by the CFWI have focused on three main topics: children's nutrition, physical health and learning, and reestablishment of family bonds (Carrillo et al., 2012; Colombian Family Welfare Institute, 2008). However, CFWI's programs have paid less attention to the needs and development of the family as a group. Lastly, in the 1980s, new laws led to the creation of Family Commissaries, which had the mission to ensure the protection of families, preserve the rights of family members, and take legal actions in cases of domestic violence and disputes over child custody and care (Colombian Family Welfare Institute, n.d.).

Other decrees and laws regarding maternity and paternity leave, civil marriage and divorce, family violence prevention, and child protection were passed in the last decades of the twentieth century and the first decade of the twenty-first century. In 2009, the Congress issued the Law for Integral Protection of the Family which seeks "to strengthen and ensure the integral development of the family as the fundamental core of society, as well as to make provisions for the development of public policy for the family" (Colombian National Congress, 2009, p. 1). This is one of the more recent laws specifically oriented toward families. However, since this law was approved, social plans and actions that reflect

Table 27.2 Colombian laws, decrees and policies on family issues

Family issues	Laws, decrees and policies	Purpose
Marriage and divorce	Law 25, 1992	Definition of legal procedures on religious marriage (causes of divorce)
	Law 962, 2005 - article 34	Expedite divorce
	Civil Code – article 154	Causes of divorce
	Law 54, 1990	Definition of factual marital unions and patrimonial regimen between permanent partners
Family	Colombian Political Constitution, 1991- article 42	Definition of family (characteristics, members, duties)
	Law 1361 of 2009	Family comprehensive Protection Law
	Law 1098, 2006	Code of infancy and adolescence
Protection of children	Colombian Political Constitution, 1991- article 44	Fundamental children's rights
_	Law 12 of 1991	Colombia signed the United Nations Children's Rights Convention
	Decree 2737, 1989	Creation of family jurisdiction (judicial offices, family commissaries)
Domestic	Law 294, 1996	Norms to prevent repair and punish domestic violence
violence	Law 1257, 2008	Norms to prevent and punish violence and discrimination against women
Work and	Articles 236- 237	Substantive Labor Code
family Law 1468, 2011 Law 755, 2002 Law 1432, 2011	Maternity leave (time: 84 days)	
	Law 755, 2002	Paternity Leave – Mary's Law (time: 8 days)
	Law 1432, 2011	Housing subsidy
Displacement	Law 387, 1997	Mechanisms to prevent displacement, measures to protect and provide economic stabilization to displaced people
	Law 1448, 2011	Assistance and intervention measures for victims of internal armed conflict
	Public Policy for Displaced Families, 2009	Mechanisms to guarantee families' return to their regions

Note. Information sources: Colombian Institute for Agrarian Reform (1995), Colombian Ministry of Justice (1999), Colombian National Congress (1992, 1996, 1997, 2005, 2006, 2009), Colombian Political Constitution (1991), National Council for Social and Economic Policy (CONPES) (2005, 2006), National Planning Department (2000, 2010a, 2012), Presidency of the Republic of Colombia (1950, 1998, 2012), Substantive Labor Code (2002)

the spirit of this law and are specifically aimed at the development and protection of the family as a unit are scarce. Table 27.2 presents detailed information related to the different laws and policies in Colombia regarding family issues such as marriage, protection of family members, work–family balance, and laws for families in vulnerable conditions (i.e., forced displacement of families).

Different government organizations are responsible for the design and monitoring of public policies in Colombia. First, the National Planning Department (NPD) (in Spanish, Departamento Nacional de Planeación – DNP) is a state entity whose main objective is to provide advice to the national government in the formulation of government plans as well as in the design and evaluation of policies and programs. The NPD and the National Council for Social and Economic Policy (in Spanish, Consejo Nacional de Política Económica y Social – CONPES) were created in 1968, as a result of a reorganization in two government agencies in charge of orienting Colombian economic policy. Since then, the NPD has had a more decisive role in developing strategies and policies to orient the economic and social development of the country. Figure 27.1 shows the different government agencies involved in designing, implementing, and evaluating social policies and programs in Colombia.

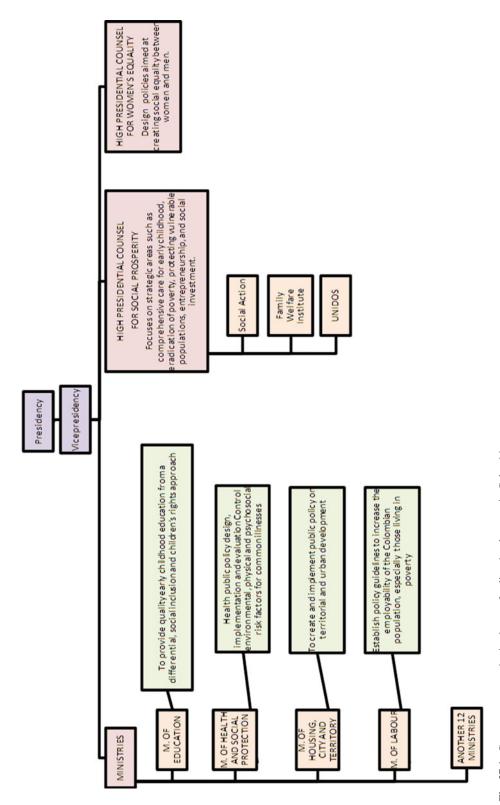


Fig. 27.1 Government agencies in charge of policy development in Colombia

Policies Targeting Marriage and Family-Work Balance

We will now briefly describe some of the major policy efforts that have targeted marriage and family—work balance during the last decades. This section ends with a discussion of these policies and some of their limitations.

Marriage, Cohabitation, and Divorce

As shown in Table 27.2, policy efforts with regard to marriage and divorce during the last decades in Colombia have led to changes in legislation. However, there have not been policy efforts directed toward the development of programs to strengthen marital relationships, prevent marital dissolution, or provide services for divorced couples. We will briefly comment on some of the laws that have appeared during the last decades with regard to marriage and divorce.

Social and historical changes in Colombia during the second half of the twentieth century – including a greater secularization of society and the recognition of diverse religious groups different from the Roman Catholic Church – led to a reorganization in the relations between the Catholic Church and the state. In 1992, the new Political Constitution paved the way to further changes in legislation about marriage and divorce. More specifically, Law 25 of 1992 established that religious marriages, including those conducted by the Catholic Church, ceased to have civil effects, and, as a consequence, couples who married through a religious rite had to also register their union at a notary's office in order to be legally married. Similarly, couples who get their religious marriage annulled also have to make a declaration of such annulment in front of a judge. Also, the civil effects of any religious marriage cease to exist when the couple gets legally divorced (i.e., a judge or a notary dissolves their civil union) (Colombian National Congress, 1992). In sum, this law differentiated civil and religious unions and regulated the ways in which couples may constitute and dissolve marital unions.

Other recent legislation efforts have directly impacted practices regarding divorce in Colombia. In particular, Law 962 of 2005 sought to establish an expedite process to obtain a divorce that saved couples' money and time (Colombian National Congress, 2005). Before this law was approved, couples who wanted to get a divorce had to undergo a long and expensive process in court, even in cases when both individuals had agreed on their decision to terminate their marriage. Since 2005, couples who have mutually consented to get a divorce only have to write a divorce declaration and register it at a notary's office. The procedure may require that the couple gets legal advice from a lawyer, but it is finalized within a few days. In this case, policy efforts seek to better meet the needs of married partners who, in the past, would not get a legal divorce due to its high costs. By making legal procedures more affordable and time efficient, this law makes it more likely that divorcing partners try to work out an agreement that benefits both individuals and their children.

Domestic Violence

The issue of domestic violence has been on the international political agenda for several decades. Initially, discussions about violence within the family context were linked to the women's rights movement in the mid-twentieth century. International events such as the Convention on the Political Rights of Women held by United Nations High Commissioner for Refugees in 1952, the UNO's Convention on the Elimination of All Forms of Discrimination against Women, and the UNO's General Assembly held in 1972 in which women's living conditions were one of the main issues under discussion are some examples of the importance of this issue worldwide in the last decades (Cadena Ruíz,

2004). Domestic violence has been defined as any form of violent acts directed toward two main victims within the family context: women and children (Calveiro, 1999 cited by Ramírez, 2006). In Colombia, violence against women is "any action or omission that causes death, or physical, psychological, sexual, financial or patrimonial damage for her condition as woman, as well as any threat of such acts" (Colombian National Congress, 2008).

One of the first official acts by the Colombian state in the matter of family violence was the signing of the Convention of Belém do Pará, as part of the American Convention on Human Rights, held in Brazil in 1994. This Convention focused on the prevention, sanction, and eradication of violence against women. By signing this Convention, the Colombian government committed to (a) gathering information and statistics about violence against women on a regular basis, (b) evaluating measures to eradicate different forms of violence against women, and (c) formulating strategies to prevent this issue. These commitments are further explained in Law 298 issued in 1995 (Ramírez, 2006).

As shown in Table 27.2, the Colombian National Congress issued two laws in the late 1990s in relation to the prevention of family violence: first, Law 294 of 1996, by which it establishes norms to prevent, repair, and punish domestic violence. Some of the main articles in this law seek to protect the "primary of rights of the family, the opportune and effective protection of family members who may become victims of any violent act, and the preservation of unity and harmony among family members." The Family Commissaries are special agencies affiliated to the Colombian Family Welfare Institute (CFWI) whose main objective is to take preventive and protective measures in situations involving violence or conflict within the family. Law 575 of 2000 makes Family Commissaries legally responsible for establishing protective measures for domestic violence victims. The second law presented in Table 27.2 (Law 1257 of 2008) establishes standards for awareness, prevention, and punishment of all forms of violence and discrimination against women. This law is based on the fundamental rights of women and is guided by principles of equality, co-responsibility between the state and the family, and comprehensive care for women victims of violence and discrimination, among others.

The National Council on Economic and Social Policy (in Spanish, Consejo Nacional de Política Económica y Social - CONPES) published in 2000 a document entitled National Policy for the Construction of Peace and Family Coexistence - Make Peace (in Spanish, Haz Paz) (National Council for Social and Economic Policy - CONPES, 2000). The main aim of this policy was to foster the development of healthy and democratic families based on the protection of the rights of its members, more specifically: respect, tolerance, and dignity. This policy seeks to prevent violent relations within the family and focuses on fostering of attitudes toward harmony and well treatment among family members. This policy was originated within the National Development Plan of President Andrés Pastrana Arango (1998-2002). In 2003, the CFWI was designated to coordinate the tasks involved in this policy. The following presidencies maintained this policy within their specific government plans, and in 2005, a Decennial Plan for the Construction of Peace and Family Coexistence was developed. The Make Peace policy includes the following objectives: (1) to prevent factors that lead to the use of violence in the family and to implement strategies oriented toward fostering family bonds and constructive ways of solving conflicts; (2) to eliminate physical, psychological, and sexual forms of violence against women and children and to protect and reestablish their rights; and (3) to create and implement a comprehensive strategy to provide attention to victims of domestic violence and to perpetrators, among others (National Planning Department, 2000). The current government of President Juan Manuel Santos has maintained this policy within his National Plan. It has also created the High Council for Women's Equality whose main purpose is "to assist the president and the national government on the design of policies oriented toward the promotion of equality among women and men, include a gender's perspective on government's plans, policies and social programs, and foster laws, regulations, and social actions directed to improve the quality of life of women, especially those living under poverty and vulnerable conditions," among others (Presidency of the Republic of Colombia, 2010).

Family and Work

Family policies regarding the connection between work and family contexts in Colombia are mainly concentrated in the Labor Code. This code was created in 1950 by Decree 2663 of the Presidency (Presidency of the Republic of Colombia, 1950). Chapter 5 (First Part-Title VIII, section "Common Benefits for Employees") is dedicated to the protection of maternity and minors. This chapter includes Articles 236 and 237 which focus on maternity leave and breastfeeding. According to these articles, an employed pregnant woman has a right to 14 weeks of maternity leave in the time surrounding the birth of her child. Employers are also obligated to give new mothers two recesses during the day for breastfeeding (without any discount from their salaries) during the first 6 months after birth. Women cannot be laid off from their jobs for reasons associated to maternity. Employers who fail to comply with maternity laws are obligated to pay a compensation of twice the payment corresponding to the right being violated. Article 236 in the Labor Code includes a paragraph indicating that women's husbands or permanent partners could take up to 8 working days off after their child's birth, which are to be subtracted from the 14 weeks of leave given to the mother. In 2002, the paternity leave was turned into law (called Mary's Law), and in 2011 Law 1468 modified former Article 296 and approved an 8-day leave for fathers independent from the 14 weeks granted to mothers.

The importance of policies for the protection of maternity is also reflected in the Law for the Protection of the Family issued in 2009. This Law includes a paragraph within Article 11 which emphasizes the need to maintain national policies to strengthen families that provide assistance in the transition to maternity and paternity (Colombian National Congress 2009).

Although men and women who hold independent and informal jobs (e.g., those who work as housekeepers, sell merchandise on the streets) are not able to benefit from a paid maternity leave, there are other policies in place that indirectly support them in balancing family and work demands. In 1986, the National Council for Social and Economic Policy started a program to provide nutritional and educational services to children between 6 months and 6 years of age living in poverty. One of the main strategies of this program was to create and support childcare centers within economically deprived communities. The Colombian Family Welfare Institute (CFWI) is in charge of coordinating and implementing the program. After several program evaluations, the CFWI revised and expanded the program's goals to include the following: (a) to provide nutritional care to children under 6 years of age; (b) provide infant and preschool education to children that fosters their physical, cognitive, social, and emotional development; and (c) educate parents about basic healthcare and preventive measures, child development, and child-rearing practices (Colombian Family Welfare Institute, 2006). Although this policy was originally conceived as part of the government's strategies to protect children's rights (especially those living in poverty), it indirectly benefits working mothers and fathers who, due to their low income and lack of job benefits, cannot afford childcare services.

Criticisms to Family Laws and Policies

Some limitations were evident from the analysis of laws and social policies developed for vulnerable families in Colombia in the last decades. The first limitation has to do with the conceptualization of family on which they are based. Colombian legislation adopts a human rights approach that views the family as the fundamental unit of society, co-responsible with the state in providing care and protection to the younger generation (Colombian Political Constitution, 1991). This mainly translates into policies that conceive of families as playing an instrumental role in the development of young individuals (i.e., children), rather than taking an integrated perspective on the family as an organized unit.

Another related criticism to these policy initiatives is the lack of an integral perspective on the family as a complex system that develops over time and impacts individuals' development (Carrillo et al., 2012). First, the family is mostly conceived of as a background to youths' development and adult family members are only being considered as means to fulfill children's basic needs. Second, policy efforts neglect important family tasks such as creating and maintaining nurturing relationships within different subsystems, communication, problem-solving, and coping with stressors. For instance, in the present time, there are not any family programs that teach couples skills to deal more effectively with conflicts in their marriage and to cope with both normative and nonnormative changes in family life. Social programs oriented toward strengthening couples at specific moments in the family life cycle – transition to marriage, childbirth, and launching children – could help prevent outcomes such as separation and divorce. Similarly, policy efforts need to focus on creating programs for divorced couples that help them deal more effectively with conflicts around co-parenting issues. Lastly, programs do not focus on key aspects of family functioning such as quality of family interactions, power dynamics related to gender and age differences, and the interaction between family and community.

As previously stated, there has been a diversification in family structures in Colombia during the last decades (Therborn, 2007). Family policies need to address the needs of adults and children in single-parent, divorced, and stepfamilies. Also, as women's participation in the workforce continues to increase, policymakers face the challenge of designing programs that support mothers and fathers in balancing family and work demands.

Lastly, there are also limitations in the ways government agencies work to develop and implement family policies. We will further discuss these limitations in the next section where we focus on other challenges for programs that target vulnerable families.

Policies for Vulnerable Families: Poverty and Displacement

This section will focus on describing and analyzing current public policies for families living in vulnerable conditions in Colombia. Our goal in this section is to answer the question: Do laws and family policies oriented toward vulnerable families hold an explicit approach to family issues? In order to do this, we have taken two examples of programs that target families living in poverty and displaced families. After a brief description of the programs, we present an analysis of the major challenges that we identify in policies for vulnerable families in Colombia.

Families, Poverty, and Displacement

Social, economic, and political conditions observed in the last decades have resulted in a significant increase in poverty in different countries around the world. According to Rodríguez (2008), poverty is a multidimensional construct that involves different indicators. There are four major approaches to define poverty: (a) unsatisfied basic needs, (b) insufficient income, (c) failure in the development of capacities, and (d) exclusion from realization of fundamental rights. In Colombia, approximately 45.7 % of the population lives in poverty and the indigence rate is 16.5 % (DANE, 2005).

Since the 1960s, Colombia has faced several periods of political violence in which left-wing guerrillas and, more recently, right-wing paramilitary forces have attempted to gain political and economic control. Between 1985 and 2008, more than four million people across the nation left their hometowns as a result of suffering direct or indirect violent acts (intimidation, threats, and massacres) at the hands

of guerrilla and paramilitary groups (Mendoza & González, 2010). Families who are forced to leave their hometowns become vulnerable because they lose their properties and jobs as well as their social support network in their communities (Mendoza & González). In addition to these losses, displaced families are more likely to live in poverty and social isolation in the cities to which they migrate. Most family members are trained to do agricultural activities and they lack the required skills and knowledge to perform well in technical jobs (Mendoza & González). Also, the majority of these families are composed of children, youths, and women who are economically dependent and have a low educational level (Helo, 2011). Seventy-two percent of displaced people in Colombia are women, children under 15 years of age, and elderly people. Also, the average size of displaced families (5 people) is larger than the average household size in the nation (3.9 people) according to the 2005 census (Helo; Mendoza & González, 2010).

Laws and Public Policies: General Context

The eradication of poverty by the year 2015 became one of the essential objectives of the Declaration of the Millennium signed in the year 2000 at the United Nations' Millennium Summit (Barrientos, Hanlon, & Holme, 2010; Navarro, 2005). Researchers as well as policymakers in Latin America have made the war against poverty a priority in their agendas. In Colombia, the government ratified its commitment with the objectives presented in the Declaration of the Millennium regarding the eradication of poverty (National Council for Social and Economic Policy, 2005) and created a policy – "Social Support Network against extreme poverty" (National Council for Social and Economic Policy, 2006) – to achieve such a goal. There are three objectives to this social policy: (a) to incorporate families living in poverty to the state social networks, (b) to ensure their access to resources and interventions that enable them to meet minimum conditions of quality of life, and (c) to create a co-responsibility framework so families are committed to overcoming poverty (National Council for Social and Economic Policy). It encompasses three main social programs: Families in Action, Employment in Action, and Youth in Action.

In order to respond to the needs of displaced families, the government created laws (Colombian National Congress, 1997) and developed plans to assist displaced populations (Colombian Institute for Agrarian Reform, 1995; Colombian Ministry of Justice, 1999). In 1997, the government created the National Council for Assistance to Displaced People, which is in charge of developing social policies, and also organized local committees in municipalities directly affected by the internal armed conflict to identify communities at risk and prevent forced displacement. The public policy for displaced families has three main objectives: (a) to prevent the displacement of families who live in high-risk areas and municipalities, (b) to provide humanitarian assistance to families who have to leave their hometowns, and (c) to provide families with occupational training and financial support to become economically self-sufficient and to encourage them to return to their hometowns once security conditions improve (Colombian National Congress, 1997).

In the next pages, we describe in greater detail two programs that are part of the government's policies for families living in poverty and forced displacement conditions. The first program, namely, *Families in Action*, provides assistance to both families living in poverty and displaced families. The Care Program for Displaced People targets displaced families exclusively.

Families in Action

It is an initiative of the national government to deliver nutrition or education subsidies for underage children who belong to one of the following groups: (a) families from the lowest socioeconomic groups, (b) families who have been displaced from their lands due to the internal armed conflict (i.e., victims of sociopolitical violence), or (c) indigenous families (Social Action, 2010). The program contributes to increasing families' income in order to improve the living conditions of children who live in extreme poverty. In 2004, the program's target group was expanded to include displaced families. The program receives funds from the Inter-American Development Bank, the World Bank, and "Plan Colombia".

The main program objective is to supplement the income of families with children under 18 years and, by doing so, to encourage the formation of human capital through (a) the consumption of food, the development of nutritional and healthcare habits, and the nutritional monitoring of children and (b) school attendance and retention at basic education levels (i.e., elementary, intermediate, and high school education). *Families in Action* provides cash subsidies to families with children under 7 years of age. In exchange, parents have to comply with a set of responsibilities that include (a) monitoring their children's development, (b) attending regular appointments with professionals to monitor children's health and development, and (c) guaranteeing children's school attendance. The program is currently being implemented in all 32 states and approximately 1093 municipalities, which represents coverage of 99.5 % of the target population (Social Action, 2010).

Care Program for Displaced People

The Care Program for Displaced People (CPDP) started in 2005 and provides families with humanitarian assistance as well as educational and financial support to become economically self-sufficient (National Planning Department, 2007). The humanitarian assistance to displaced families involves taking care of basic needs (food, shelter, healthcare) and providing psychosocial support. Psychosocial support encompasses a variety of strategies (individual and group counseling, psycho-education, therapy) to help families develop a new life plan and become economically self-sufficient. Both international (e.g., International Committee of the Red Cross) and national (i.e., government and NGO) organizations are involved in providing humanitarian assistance to displaced families.

There are three strategies involved in helping families become economically self-sufficient: (a) access to employment and job training, (b) economic incentives (e.g., access to low-interest credits to start businesses), and (c) direct economic assistance (e.g., money subsidies). Adults need to meet certain criteria to be eligible for job training programs: (a) previous experience in similar business activities (e.g., owning a bakery or a craft shop in their hometown), (b) being household financial head (i.e., children in the family depend economically from the adult's income), and (c) being 18–25 years old (Helo, 2011). Financial support and job training programs are funded by USAID.

Challenges to Policies for Vulnerable Families

An analysis of these programs' goals and strategies leads us to draw four conclusions. Firstly, policy initiatives for families in vulnerable conditions constitute implicit rather than explicit family policies (Bogenschneider, 2006). Based on the descriptions presented in previous pages, policies focus primarily on increasing family's income and improving their living conditions rather than on impacting

¹The term Plan Colombia is most often used to refer to US legislation aimed at curbing drug smuggling and combating left-wing insurgency by supporting different military and nonmilitary programs in Colombia. Among the nonmilitary programs, there are those focused on alternative development and internally displaced persons.

family processes and dynamics (Bogenschneider). Also, policy efforts neglect other important family tasks such as creating nurturing relationships, communication, problem-solving, and coping with stressors. All of these tasks and aspects of family functioning seem especially relevant in supporting families dealing with poverty and forced displacement. In the discussion, we will further elaborate on how a family-centered approach to policy design and implementation could be more effective in helping families living in vulnerable conditions.

Secondly, most policies seem to be based on conservative views about the family that are not sensitive to the changes experienced by families as they face poverty and forced displacement. Such views – which some have named "familism" (Sunkel, 2007) – place most family responsibilities on mothers and keep fathers (or other male figures) alienated from essential parenting tasks. Similarly, policies lack flexibility in adapting strategies to the needs of adults and children in single-parent, two-parent, and extended families (i.e., those in which other adult family members such as grandparents are the primary caretakers).

Thirdly, government agencies in charge of policy development privilege a macroeconomic perspective on social issues such as poverty and forced displacement. For instance, social policies' goals emphasize on individuals' financial (e.g., adults' employment) and physical well-being (e.g., children's health and nutrition) and leave out other important areas that are usually compromised in individuals living in poverty (i.e., family members' psychological and social adjustment). This reflects a rather limited conceptualization of poverty (i.e., a condition of unsatisfied basic needs due to the absence of income) and its effects on families. As other authors point out, poverty also encompasses limited access to resources and opportunities that hinders individual development and the realization of individual rights (Mendoza & González, 2010). Poverty should be conceived of within a framework of social inequality that is maintained by the institutions that control and distribute resources (Arriagada, 2007). Therefore, an important challenge for family policies targeting poverty and forced displacement in the near future should be to incorporate a broader social perspective on these issues that transcends a macroeconomic perspective.

Lastly, the formulation of laws, programs, and policies is the responsibility of numerous organizations at different levels of the government. This difficulty results in a multiplication of efforts and overlapping of objectives and processes that often creates disorganization and ineffectiveness in the development of family policy. A significant challenge in the development of social policies comes from the fact that there are many government agencies in charge of designing and implementing social policies for families in Colombia. Despite the fact that the Colombian Family Welfare Institute was created to develop and coordinate family policy efforts (Colombian Family Welfare Institute, 2011), major policy efforts for vulnerable families – such as Families in Action and CPDP – are not under its control. Other government agencies such as Social Action have taken the leadership in designing policies for families living in poverty and forced displacement. Without a strong coordinating agency that oversees the development of family policies, it is very likely that the conceptual perspectives of different agencies working on policies for vulnerable families are not integrated (Arriagada, 2007). Moreover, this lack of coordination in efforts among policymaking agencies will make it more difficult to adopt an integral perspective on families that could lead to creating explicit family policies in the near future. In addition, there are difficulties in the coordination between agencies in charge of policy development and those responsible for their implementation in the local communities (Bogenschneider & Corbett, 2010; Rico de Alonso, 2007).

Evaluation of Policies for Vulnerable Families

In this section we will discuss the results from different studies that have been conducted to evaluate the impact of Families in Action and CPDP programs as well as the recommendations that such studies have made to future development of public policies for families in vulnerable conditions. We have

selected studies that were conducted by government organizations (e.g., National Planning Department) as well as researchers affiliated with universities (e.g., CEDE-Universidad de los Andes).

Families in Action: Program Impact

In Colombia, the National Planning Department (NPD) is the government agency in charge of crafting, orienting, and evaluating public policy² (National Planning Department, 2010b). The program's impact has been evaluated with regard to five criteria: (a) poverty reduction and human capital formation, (b) program's effects on its beneficiaries, (c) program's efficiency in identifying and serving its target population, (d) program's cost—benefit analysis, and (e) program's management and operation (National Planning Department, 2004). The most important results regarding the program's impact on poverty reduction and human capital formation (i.e., education, nutrition, health, and child labor) are the following: (a) positive changes in the acquisition of breastfeeding practices, children's intake of food rich in protein, and children's height and weight; (b) mothers were significantly more likely to attend to medical and nutrition checkups for their children and showed an increased knowledge on health practices and disease prevention; and (c) a significant increase in youths' high school enrollment and attendance and a decrease in child labor rates of female children (ages 10 through 17 years) in both rural and urban areas (for a complete report, see National Planning Department, 2008).

These studies make three main recommendations. Firstly, program operation needs to improve so that families who have economic limitations (e.g., money for transportation) and accessibility barriers (e.g., live in isolated areas) may be able to attend health education workshops and meetings with community leaders. Secondly, it is essential to adjust strategies used in the selection of beneficiaries so that future efforts in delivering program services reach municipalities and communities with higher poverty levels. Thirdly, it is necessary to create more programs that deal with other needs of families living in poverty (e.g., housing, employment) (National Planning Department, 2008).

Care Program for Displaced People: Impact Evaluation

Evaluation studies have focused on two components: financial support and humanitarian assistance. The National Planning Department study shows that financial support strategies (e.g., access to employment, financial incentives, and financial support) have been effective in helping families overcome poverty. Approximately 62 % of families who participated in the study showed higher levels of well-being than the ones established by the Human Development Program (in Spanish, Programa de Desarrollo Humano)³ (National Planning Department, 2007).

In contrast with these results, university-affiliated researchers have shown that the financial support provided by the Care Program for Displaced People does not alleviate the economic losses that families experience during forced displacement. Helo (2011) found that the increase in family income that

²The National Planning Department (DNP) is an administrative department that belongs to the Executive Branch of the government and is directly answerable to the office of the President of the Republic.

³The Human Development Program (Programa de Desarrollo Humano) is a Colombian government's initiative designed to achieve the goals established at the United Nations' Millennium Summit in 2000 with regard to eliminating poverty around the globe. The Human Development Program proposes that families' well-being be measured based on an index that takes into account different criteria such as family's access to utilities, household head's and children's educational level, and family's living conditions (e.g., quality of the home they live in).

results from participating in the program does not compensate for the reduction in family's financial self-sufficiency. Similarly, another study shows that the long-term impact of strategies such as occupational training on overcoming poverty is minimal (Mendoza & González, 2010), with 98 % of displaced families who participated in the Care Program still living under the poverty line.

Based on its impact evaluation study, the NPD makes the following recommendations. Firstly, government agencies in charge of administering the program must guarantee that there are no time gaps in contracting NGOs and other organizations to implement programs. Such time gaps leave families without access to program services and financial assistance. Secondly, it is necessary to establish liaisons with both the public and private sectors to create employment opportunities for displaced individuals who are enrolled in occupational training through the Care Program. Lastly, it is important to develop a database with information on the financial and occupational situation of families before forced displacement that could be used as a baseline in future evaluation studies (National Planning Department, 2007).

With regard to the humanitarian assistance component, studies show that families benefit from contact with social organizations in the communities after displacement (Mendoza & González, 2010). However, other studies indicate that families do not use counseling and other support services to deal with the traumatic effects of forced displacement, because families (a) feel fear or shame and (b) they lack knowledge about what these services can do for them (Red Cross International Committee, 2007). An important recommendation in this regard is to educate families about the benefits of counseling services to overcome the psychological effects of forced displacement and other war-related traumatic experiences (Red Cross International Committee). Also, these studies recommend that agencies working with displaced families in the communities coordinate their efforts and strategies to better serve the needs of these families.

In sum, there are significant efforts from both government agencies and universities to conduct policy evaluation research. Most NPD's evaluation studies are methodologically rigorous: (a) involve treatment and control groups, (b) include probability samples, and (c) incorporate longitudinal designs and combine quantitative and qualitative methodologies. This demonstrates a positive change in policy development in Colombia during the last decade, as most social programs in the 1980s and 1990s did not incorporate an evaluation component (Carrillo et al., 2012). In developing countries with limited financial resources, like Colombia, investment decisions in social policies should be based on careful evaluations of programs' effectiveness and sustainability. However, a major challenge for family policy development and evaluation in the near future will be to define other social outcomes and program impact indicators that go beyond the economic indicators most studies currently use.

Discussion

The purpose of this chapter was to analyze the broader social context for the development of family policies in Colombia and to analyze specific family policies oriented toward families living in vulnerable conditions. In the previous sections, we provided answers to two specific questions that guided our analysis: What is the impact of social and economic changes experienced in the last decades on the conceptualization of the family in Colombia? Do laws and family policies oriented toward families and, in particular, those focusing on vulnerable families hold an explicit approach to family issues? In this last section, we will focus on our third question: What changes in the development and evaluation of policies would help overcome the challenges and limitations of existing family policies in Colombia?

We would like to present a few recommendations for family policy initiatives in Colombia based on the challenges that we have discussed in this chapter. First, we believe it is important that goals in existing family policies be revised so that programs focus specifically on supporting family functioning and well-being rather than on children's and women's needs exclusively (Carrillo et al., 2012).

This would require that policymakers adopt an evidence-based, integral perspective on family functioning and human development which allows for a broader scope in family policies. This recommendation is particularly relevant to policy efforts for families living in poverty as well as displaced families. Research has shown that it is the number of risks to which children are exposed to as a result of living in poverty that affects their development (Clarke-Stewart, 2006). Also, living in poverty may have detrimental effects on important areas of family functioning such as communication and problem-solving (Orthner, Jones-Sanpei, & Williamson, 2004). However, empirical studies have also shown that parents' roles and behaviors may moderate the effects of external risks children are exposed to in poor communities (Masten & Shaffer, 2006). Therefore, in the future, family-centered policies for those living in vulnerable conditions should (a) focus on periods of particular need in the family life cycle, such as the transition to parenthood; (b) strengthen family processes that are potential sources of resiliency (e.g., family sense of togetherness, communication, and problem-solving; Orthner et al., 2004); and (c) attend to relationship subsystems that are at higher risk of being dissolved during times of stress (i.e., couple and father—child relationships) (Carrillo et al., 2012).

In developing an integral perspective on the family, it is essential to adopt a gender perspective that is sensitive to the differential needs of both men and women. This is key in order to overcome underlying conservative perspectives to existing family policies that reproduce and reinforce inequalities in the distribution of resources and tasks between men and women (Arriagada, 2007). With regard to this, we recommend that the development of program goals and specific strategies take into consideration the variability in structure (e.g., single-parent or two-parent family), employment status (e.g., unemployed, single, or dual income), and contexts (e.g., families in rural or urban contexts) of families living in vulnerable conditions. Secondly, as mentioned before, existing programs rely heavily on mothers to support their children's development and well-being and exempt fathers from such responsibilities. Such strategies in policy implementation reproduce inequalities in role distribution within two-parent families and discourage change in father's participation in child-rearing. Research shows that strong father-child and couple relationships offer protective factors against psychological and social risks for children living in poverty (Cowan, Cowan, & Knox, 2010). Also, empirical evidence has documented successful experiences of training programs to increase the father's involvement in families from low socioeconomic groups (Bauman & Wasserman, 2010). These findings offer a rationale for revising existing program goals and strategies so that family policies foster changes in gender relations both within families and in society as a whole.

Our second recommendation has to do with the coordination and operation of family policies. It is fundamental to strengthen the Colombian Family Welfare Institute (CFWI) as the family policycoordinating government agency, so that it fulfills its mission of overseeing policy development and implementation. One of the major challenges for the CFWI will be to integrate and coordinate the development of social programs for families currently led by other government agencies. As different government departments (i.e., health, education, labor) deal with issues relevant to family's wellbeing and have developed or implemented programs for families, coordinating the efforts of such agencies requires that they work from a network approach (Arriagada, 2007). Building relationships between institutions and agencies to work as a network that designs and implements programs conjointly requires significant changes within such institutions. Therefore, the first task would be to train professionals and staff within such agencies to work collaboratively (Arriagada). Simultaneously, the CFWI should revise the different conceptualizations of family that underlie existing programs being implemented by such agencies and propose a unified and explicit (Bogenschneider, 2006) approach to family policies. Also, the CFWI should work in coordination with local government agencies in order to decentralize the administration, implementation, and evaluation of social programs (Arriagada, 2007). This involves strengthening local government agencies to work autonomously as well as establishing an efficient follow-up and evaluation system that provides continuous feedback on the effectiveness of policy administration and operation processes.

With regard to program operation, the CFWI needs to evaluate administrative processes involved in programs' implementation in the local communities. Because program implementation usually requires that central government agencies subcontract the services of local government and nongovernment organizations, the CFWI should specifically evaluate the extent to which such organizations (a) understand the goals of the programs they will implement as well as those of the general policy in which such programs are nested, (b) are committed to hire and train qualified professionals to deliver the services required in the program, and (c) follow central agencies' guidelines to program evaluation (Bogenschneider, 2006). If, as suggested above, the CFWI works with local government agencies so they become more autonomous in administering and evaluating programs, such agencies should establish an evaluation system to assess programs' operation and make necessary adjustments according to the specific needs of the communities. Those evaluation processes must involve the agencies that are subcontracted to implement programs in local communities. In sum, evaluation must become a central process in policy development, management, and implementation, which requires coordinated efforts from central and local coordinating agencies, as well as organizations that operate programs within the communities.

In addition to implementing a program operation evaluation system, government agencies should continue to incorporate an evaluation component into family policies that helps making informed decisions about future policy development and continuation of existing policy initiatives. We have at least three recommendations with regard to policy impact evaluation. Firstly, government agencies should invest in the development of longitudinal evaluation studies to identify demographic and social characteristics of families at risk of becoming poor or being displaced. Such diagnostic studies would provide policymakers with updated information on the needs that family policies should target (Arriagada, 2007) and, also, serve as a baseline measure to evaluate programs' impact. Secondly, government agencies should strive for developing program impact indicators that are congruent with the social goals and objectives of family policies and incorporate such indicators in their assessment measures. As family policies in Colombia become more explicit (Bogenschneider, 2006), program impact indicators should focus more on the family processes and dynamics that such programs intend to strengthen than on the fulfillment of financial, health, and education needs. Lastly, program evaluation should be strengthened by the close collaboration between policymakers and researchers (Gruendel & Aber, 2007). During the last decade, several university-affiliated research centers in Colombia have taken an interest in public policy evaluation (e.g., National University of Colombia Infancy Observatory; Alberto Lleras Government School and Center for Economic Development Studies at Universidad de los Andes) and publish continuously empirically based research on the subject.

Lastly, contemporary views on family policy emphasize the need to establish links between social science knowledge and public policy development – an approach known as evidenced-based policies (Bogenschneider & Corbett, 2010). This involves developing a set of actions to foster close relations and more effective pathways of communication between family researchers and policymakers. The development of better mechanisms to disseminate the findings of research, the familiarization with the policymaking context and processes, and the creation of scenarios for discussions on family issues are some of the strategies suggested by these authors to increase the dialogue between researchers and policymakers. Although in Colombia there is evidence of collaborative initiatives between the members of academic institutions and the public sector, there is a need to develop explicit strategies from both parties to strengthen such initiatives.

In conclusion, existing social policies for families living in vulnerable conditions in Colombia represent important efforts in providing relief to the effects of economic and social disadvantage. However, family policy initiatives need to take on a broader and more explicit approach to family functioning that works toward strengthening the entire family system. In the future, coordinated efforts among government agencies to create and implement policies are also necessary to ensure a unified perspective in the development of social programs for families. This requires that an agency takes primary responsibility for overseeing the development of family policies and works within a network approach with central government agencies and organizations in the local communities.

Also, program evaluation must be enforced as a central component of policy initiatives, and it ought to include both outcome and process evaluation components. In general, these recommendations require that researchers and policymakers establish stronger relationships that provide a context for developing more evidence-based family policies.

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Chapter 28

Family Policy Initiatives in Ecuador: A Call for Explicit Family Policies

Paul L. Schvaneveldt

Abstract Family policy initiatives in Ecuador have targeted primarily families living in poverty. This chapter discusses some of the major policy initiatives oriented to improve the living conditions of economically disadvantaged families in Ecuador. Even though governments recognize the importance of family policies, existing policies and programs for families living in poverty do not directly focus on family issues. They represent more implicit than explicit family policies. This chapter analyzes some of the issues that may hinder the development, implementation, and evaluation of family policies in Ecuador. Such issues stem from political and economic instability, legislation, changing family demographics, as well as coordination among agencies that develop, implement, and evaluate policies. Challenges are discussed as related to family policies and recommendations to improve existing policy initiatives.

Keywords Family policy • Poverty • Ecuador

Introduction

Ecuador is a country experiencing many transitions and challenges which ultimately impact children and families. Many macrolevel and exolevel changes include major fluctuations in the economy, government instability, migration, and revision of family policies. As the economy of Ecuador becomes more developed and diverse, the challenges and opportunities to create policies that support and strengthen families become more necessary and complex. A major policy change occurred in 2008 with the reorganization of the Ministry of Social and Economic Inclusion (Ministerio de InclusiónEconómica y Social or MIES), which also contains a national institute of children and families (InstitutoNacional de Niñez y la Familia or INFA). The goal of the newly formed government agency is to promote the well-being of children and their families in Ecuador (INFA, 2008). While these goals are worthy of commendation, bringing to fruition the stated objectives will be met with many challenges and obstacles given economic and political conditions present in Ecuador.

Politically, Ecuador has been a country of instability, having 12 different heads of state since 1979 (Andrade & North, 2011). Military coups have been common. Subsequently, continuity in effective family policy has been difficult given the instability in government leadership. Currently, Ecuador is enjoying a period of relative stability with the administration of President Rafael Correa beginning in 2007 an recently reelected for a third term in 2013. President Correa has a background in economics, having

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earned a Ph.D. in Economics from the University of Illinois Urbana-Champaign, and one of his major political objectives was to improve the situation of children and families living in poverty. Ecuador has created political alliances with other left-leaning countries in Latin America, including Bolivia, Venezuela, and Cuba. Current political policies are often described as left leaning with the goal of promoting greater equality for those in poverty. "His government has attempted to chart an independent nationalistic path in terms of international relations while it has taken important steps domestically to reduce poverty and inequality and to make elites accountable" (Andrade & North, p. 427).

Another challenge for Ecuadorian family policy is a stable and predictable economy to support policy initiatives. In the late 1990s and early 2000s, Ecuador faced a major economic crisis that led to the abandonment of the national currency (the Sucre) in favor of the US dollar. The result has been a stabilization of inflation and the economy, but an increase in the cost of goods and services without a corresponding increase in wages. Thus, many lower-income families in Ecuador find themselves being stretched economically in trying to meet the needs of their family with prices for goods and services in line with the US dollar and wages more in line of the pre-dollarization Sucre economy.

A consequence of the economic crisis of 1999 was a dramatic increase in emigration. There are an estimated 2.4 million Ecuadorians who live and work outside the country, with most going to the United States or Spain. Ecuador has a total population of 13 million people. Most emigrants leave family members behind in Ecuador and many children are left to be cared for by neighbors, extended family, or coop groups. These children of emigrants often face neglect and lack of adequate supervision and care (Equipo SAM, 2008; Herrera, Genta, & Araujo, 2008). Given the economic, political, and social changes occurring in Ecuador, developing and sustaining effective and consistent policies that support children and families is a major challenge.

Ecuador's economic performance has been strong since adopting the US dollar as its national currency in 2000. Economic growth has averaged 4.6 % annually for the past 8 years, and inflation rates have dropped from 96 % in 2000 to its current rate of 2 %. Despite these positive indicators, Ecuador remains one of the poorest countries in Latin America, primarily due to the inequality in the country's distribution of income. The wealthiest 20 % of the population earns half the income, while the poorest 20 % of Ecuadorians earn just 5 % (Worldvision, 2009). In addition, nearly half the population lives below the poverty line, and 41 % of people live on less than 2 US dollars a day. There are an estimated 2.55 million children ages 0–18 in Ecuador, and they make up 19.6 % of the 13 million population (UNICEF, 2011).

The family policies in Ecuador have been developed primarily as part of the war against poverty and governmental efforts to foster economic development (Maurás, 2005). While this approach is appropriate, particularly in countries with limited economic resources, these policy initiatives lack an explicit view of the family and fail to consider the entire family system in policy efforts (Bogenschneider, 2006). Second, policy initiatives face significant challenges that stem from the social context (economic, political, and legal factors) as well as the conception, implementation, and evaluation of such initiatives.

Analyses of the current development of family policy initiatives in the United States (Bogenschneider, 2006) and Latin America (Maurás, 2005) have raised several issues that are relevant to policy initiatives against poverty. A major concern for family policies in Ecuador includes a focus of the government on implicit family policies in place of explicit family policies. It is possible that there is a major focus on public policies against poverty in lieu of explicit family policies. A second issue is the ability to fully execute and implement policies because of political instability and economic crises that have historically impacted Ecuadorian government and society.

Historical Changes in the Family in Ecuador

The family has been defined as a basic social group characterized by affective relationships, reciprocity, solidarity, and conflict. Among its main tasks are to provide support and protection to all its members

and to serve as a learning context for numerous social skills (Puyana, 2008). A major influence on family relationships in Ecuador was the colonization of Latin America by Spain and Portugal, which brought significant changes to the established forms of social functioning among indigenous groups in Latin America. Ecuador experienced cultural and religious colonization by Spain prior to becoming an independent republic in the 1820s. As a result, Ecuador shares a common language, belief system, and social structure with Spain (Lockhart, & Schwartz, 1983).

Native indigenous groups that inhabited Latin American territories before the colonization had different kinship systems - matrilineal - and some of them practiced polygamy. Premarital sexual relationships were allowed and marital unions could be dissolved. In contrast, Spanish and Portuguese conquistadors considered marriage as a sacred and permanent bond. Spaniards colonizers regarded premarital sex as immoral. The paternal family dominated their kinship system. The Spanish crown commissioned conquistadors and members of the Catholic Church to dismantle native cultural beliefs and force conversion to Catholicism (Dueñas, 1996). Thus, the introduction of Catholicism influenced not only the social notion of marriage and family, but also other aspects of the legal system associated with family functioning. Individuals inherited the European patriarchal notion of the family that was based on differential and unequal rights and obligations for men and women. Latin American colonies only recognized one form of family, namely, the nuclear family formed through Catholic marriage. Men were regarded as the head of the family, were granted all rights, and were expected to perform the role of providers for the family. Men's authority over their wives and children dominated family life. Women were subordinated to men's authority; they had obligations to their husbands, children, and relatives; and they played the roles of caretakers and protective figures (Jelin, 2005; Maurás, 2005; Therborn, 2007).

During the second half of the twentieth century, important changes in family life took place as a result of women's right movements and the adoption of liberal ideologies (Jelin, 2005). Some of the social changes that led to transformations in the family were (a) the introduction of civil marriage as a legal form of marital union, (b) new laws related to separation and divorce and to legal rights of mothers and fathers over their children, (c) movements for equal rights for men and women, and (d) advances in birth control methods. Maurás (2005) suggested that other factors also influenced family functioning such as urbanization, women's increased level of education and participation in the labor force, the impact of mass media on individuals' lives, and the initiation of sexual behavior at earlier ages and the subsequent increase in adolescent pregnancy.

Due to these social changes, the evolution in the concept of family in Ecuador has become more diverse with varying forms and structures. These variations include a diversification of family structures, parental figures, number of children, and the roles and relations among family members.

Demographic Characteristics of Contemporary Ecuadorian Families

There are some demographic characteristics that represent important challenges to government leaders and policymakers in Ecuador in their efforts to develop policy initiatives against poverty. As shown in Table 28.1, Ecuador has high levels of poverty and indigence (CEPAL, 2010). Furthermore, over 60 % of the population belongs to lower-middle and low socioeconomic classes. Such high rates give policy initiatives against poverty a high priority in governments' social programs.

Ecuador currently experiences a higher level of high school attendance and adult literacy rates (INEC, 2009) compared to many developing nations; however, there are some segments of the population that lack literacy skills for advanced education and employment. The adult illiteracy rate is as high as 28 % among individuals from less privileged backgrounds and indigenous groups. A low percentage of the population has access to higher education. Even though some of the policy initiatives discussed later include improving school attendance and educational attainment as one of their goals, they mainly focus on elementary and secondary school-aged children.

Table 28.1 Demographic characteristics in Ecuador

Poverty rate	42.2
Indigence rate	18.1
Unemployment	8.5
School attendance	
7–12 years	97.9
13–19 years	79.6
20–24 years	37.8
Adult literacy (15 years of age or older)	92.5
Social class distribution	
Wealthy upper class	2.68
Middle upper class	8.44
Middle class	18.95
Lower middle class	27.45
Lower class	42.46
Employment statistics	
Men	76.0
Women	47.0
Types of families	
Nuclear (both parents)	64.1
Single parent	2.3
Single father	13.7a
Single mother	86.3 ^b
Extended families (grandparents)	27.3

Data sources: CEPAL (2011); Ecuadorian Census Bureau (INEC, 2009); SENPLADES (2009)

Numbers are presented in percentages based on the country's total of 13 million people

Historically, Ecuadorian families were mostly traditional in structure, however, recently there has been a diversification in family structures (Therborn, 2007). As it is shown in Table 28.1, the nuclear family (i.e., a couple and their biological children) is still the predominant family structure; however, there are other family organizations such as single-parent and extended families that are becoming more prevalent. In fact, the percentage of extended families indicates that an extended family structure is the second most common after the nuclear family. Within such families, adult figures such as uncles, aunts, and grandparents help parents in caring for their children. It is important to note that current family policies almost exclusively involve mothers in the implementation of programs and exclude other adult caregivers. Other social changes in family structure observed in the last decades – including the increase in divorce rates – should also draw the attention of policymakers (INEC, 2011).

Work and Family Issues. Ecuador has written policies for those who work in the formal labor sector (ECLAC, 2011). These employees qualify for family policies which include 12 weeks of paid maternity leave. Fathers qualify for 12 weeks of maternity leave in the event of the death of the mother. The new parent is entitled to receive 100 % of their salary and 75 % of the costs is covered by the government sponsored social security system and 25 % contributed by the employer. Mothers are allowed 2 hours a day away from work for breastfeeding up to the child's first birthday. Fathers are allowed 10 days of paid leave for the birth of a child and 15 days for the adoption of a child. This leave can be extended by 5 days in the event of a caesarian section birth, 8 days for a premature birth, and 25 days in the event of a child born with a degenerative disease or severe disability. Despite these policies, there are few state mechanisms to enforce private-sector compliance with legal obligations (ECLAC). Many parents, especially mothers, find it difficult to take advantage of policies. They work in the

^aPercentage of the total single-parent families headed by fathers

^bPercentage of the total single-parent families headed by mothers

informal labor sector where policies are not applicable and are not enforced. For example, those who work in domestic service are not covered by formal workplace policies. A major challenge, therefore, is to extend these benefits to all in the paid labor force. ECLAC recommends that benefits be extended to all in the labor force regardless of their wage status and employer status.

Domestic Violence. Currently, it is estimated that 46 % of women in Ecuador report being a victim of domestic violence. Historically, the country's criminal code did not specifically define domestic violence as a crime, which to some extent implied that it is not really regarded as a violation of rights (US Department of State, 2007). There were no effective mechanisms for preventing or prosecuting domestic violence as it was viewed as a private matter. Anti-domestic violence legislation, specifically the Law against Violence toward Women and the Family, was drafted in 1995, along with the rewriting of the Constitution specifying equal rights for men and women in numerous areas. A committee of several agencies and organizations developed laws that were enacted to prevent and prosecute domestic violence. Currently, laws impose monetary penalties and imprisonment for abusers. Courts have the authority to remove an abuser from the home if there is a risk to the victim. Restraining orders are also available in the workplace and other settings (UNHCR, 2007).

Since women failed to report cases of abuse because of fear or embarrassment, Ecuador moved to establish female-operated police stations known as *Comisarías de la Mujer y la Familia* in 1981. These are located in every major city, and the stations are used to put women at ease when reporting their abuse. The police stations for women and families issue "help certificates" (boletas de auxilio), which enable victims to obtain the necessary protection provided by the police authorities (UNHCR, 2007). The stations are also staffed with female doctors who perform medical examinations of the women when needed. The government's National Commission on Women (CONAMU) accepts complaints of abuse and refers cases to prosecutors for action. CONAMU also offers legal and psychological services to victims of violence in most provinces. In some police stations, social workers employed by governmental or nongovernmental organizations offer assistance to domestic violence victims (Knarr, 2011).

Poverty and Policies in Ecuador

An important discussion in the family policy literature focuses on the rationale for having a family policy agenda in governmental plans. The main question some specialists ask is if family matters to policymakers and researchers when they design and implement family policy initiatives (Bogenscheider, 2006; Stormshak, Dishion, Light, & Yasui, 2005). This is a key question when considering policy initiatives against poverty in Ecuador: Are these policies focused on family issues? The aim of this section is to provide answers to these questions.

First, family policy efforts are characterized as holding an implicit family perspective (Bogenschneider, 2006) rather than representing explicit family policies. Although some programs indirectly impact families by providing economic support, health care, and educational opportunities (Ooms, 1990). 1990 cited in Bogenschneider, 2006), the central focus of current policies is to reduce the effects of poverty on children less than 6 years of age by enhancing their physical health and educational opportunities. In other words, they do not represent explicit family policies because they are not aimed specifically at impacting family processes and dynamics (Bogenschneider).

Second, policy initiatives aimed at families living in poverty are based on narrow perspectives of human development and its relation to family functioning. That is, the family is conceived of more as a background to the individual's development than as a system that develops over time and interacts in complex ways with the development of its members (Anderson & Sabatelli, 2007). Furthermore, current policy initiatives in Ecuador impact only specific aspects of family functioning – such as meeting the basic needs of children (e.g., health care, nutrition, school attendance) – and neglect other

family tasks (e.g., creating nurturing environments, establishing healthy family systems, communication, problem solving). Family policies in Ecuador should take a more systemic/comprehensive approach to family functioning and promote programs that help families carry out diverse tasks effectively. As will be discussed later, such a family-centered approach would be especially relevant in supporting families living in poverty, as programs help them enhance their abilities to cope with risk factors associated with poverty and to respond more appropriately to the developmental needs of children.

In the next section, a review of the policy initiatives that the Ecuadorian government has developed as part of their goal of fighting against poverty is presented.

Implicit Family Policies

Experts in economics, social sciences, and public policy in Latin America have discussed in international forums and seminars the problem of poverty in this region of the world (Arriagada, 2007; Navarro, 2005). According to Navarro, governments have implemented two main strategies in order to decrease poverty rates in Latin America. One of them focuses on economic growth, whose main objective consists of working on the distribution of income and the search for economic equilibrium. The second strategy concentrates on social investment and involves two main lines of action: (1) improvements in infrastructure (e.g., roads, communications systems) and (2) investment in human capital (e.g., education, skills). Considering the significant implications of poverty in the survival rates, health, and quality of life of individuals, investments in programs that directly help vulnerable people have become a priority. Thus, this strategy includes health programs, policy initiatives toward education, and different types of subsidies for the people in need.

In Ecuador, government efforts in family policy led to the creation of specific governmental institutions that are in charge of designing and implementing programs for families living in poverty. In Ecuador, the Ministry of Social and Economic Inclusion reorganized the National Institute of Children and Families (in Spanish, Instituto de la Niñez y la Familia – INFA) in 2008. This reorganized agency was given the charge to rectify and reform 60 years of failed government policies and inefficient use of government funds and to reduce inefficient bureaucracies with effective policies that strengthen the well-being of children and their families (INFA, 2008).

This new agency focuses mostly on promoting the healthy development of children ages 0–5 years and on the restitution of the rights of children as victims of violence. More specifically, INFA (2008) has stated six major policy objectives: (1) No child under 28 days of age will die of preventable causes. (2) No children or adolescent will suffer from hunger or malnutrition. (3) No child or adolescent will be uneducated. (4) No child or adolescent will be maltreated. (5) No child or adolescent will be subject to dangerous or prohibited labor. (6) It is essential to develop citizen participation in social development.

According to their mission statement, the main objective of INFA is to strengthen the well-being of children and their families (INFA, 2008). To fulfill this objective, a series of programs directed mainly to young children have been developed in Ecuador. Table 28.2 summarizes the objectives, target population, and activities/services provided by these programs in the last decades (INFA).

As noted in the table, two features are common to the target populations of these programs: the age of the children and their living conditions. All programs are directed to early childhood and their general objective is to improve the development of children between 0 and 6 years of age who live under socially and economically deprived conditions. Specific objectives focus on providing food, care, protection, and preschool education. Programs' activities mainly revolve around children's care in daycare centers or at home. A few programs also include parenting education and mothers' participation in children's care.

As previously stated, family policy initiatives against poverty in Ecuador reflect a rather limited conceptualization of health and human development and about the influence of families on individuals'

Country Program Target group Goals Activities/services Ecuador National Program Activities that favor preschool Children from 4 to 6 years To contribute to the for Preschool of age who live in development of at skills and competences Education risk children vulnerable sectors of (i.e., oral, written, and music expression, free play, the country logic/mathematic tasks) Child Children between 0 and 6 To provide care, Health promotion and prevention Development years of age who live preschool Food assistance Program under poverty education, and Activities related to preschool conditions food education Early Childhood Children from 6 months to To provide food, Development 5 years of age whose health care, and Centers parents live in poverty educational and the mother works experiences outside of the home Growing With Children from 0 to 5 years To provide in-home In-home education to parents who Our Children have children newborn to 2 of age family and parenting years of age. Community education to group education for families support healthy with children ages 2-5 child development

Table 28.2 Summary of policy initi atives against poverty developed in Ecuador

Information was found in the Iberoamerican States Organization for Education (2005). INFA (2008)

development. For instance, programs summarized in Table 28.2 do not establish any goals with regard to children's social and mental well-being, which are two important components of the World Health Organization's definition of health (WHO, 1998). Also, program goals are based on a definition of human development as human capital (Coleman, 1988), and, consequently, they emphasize on covering basic needs (e.g., nutrition, reducing morbidity rates, and improving school attendance). However, such program goals neglect other important aspects of children's development (e.g., socio-emotional, moral development). Such limitations in conceptualization, formulation of program objectives, and definition of impact indicators seem to originate from a lack of theoretical foundation regarding human development and family relations. Some of the newer initiatives by INFA in Ecuador that provide for in-home family life education and early childhood education may be addressing some of these concerns.

In order to illustrate the ways in which programs are implemented in the communities, I describe one initiative, the Child Development Program (Programa de Desarrollo Infantil, Ecuador).

Child Development Program

The main goal of this program is to provide children between 0 and 6 years of age who live under poverty conditions with care, preschool education, and food. The implementation of the Child Development Program (CDP) in Ecuador encourages parents to participate in the formation of committees and to become leaders in the development of action plans. Parents engaged as community leaders do not receive monetary compensation for their participation. Committees are involved in evaluating the developmental needs of children in the community. Also, parents participate in the development of action plans and community development projects in coordination with NGOs and government agencies (Iberoamerican States Organization for Education, 2005 – in Spanish, Organización de Estados Iberoamericanos para la Educación – OEI).

While many services are provided through programs such as CDP and their objectives are noteworthy, there is no known published evaluation of the effectiveness of these programs. Thus, one is left to speculate if the stated objectives of these initiatives are being met and, more importantly, which program components are more effective.

In sum, there are some similarities in the main objectives and orientations of family policy initiatives in Ecuador. Programs are designed to meet the basic needs of children living in poverty with regard to health, nutrition, and education. Parents – more specifically, mothers – play instrumental/supportive roles to help fulfill programs' goals. This emphasis on children's rather than on families' needs leads us to postulate that there is an implicit approach to family policies.

Challenges in the Implementation and Evaluation of Explicit Family Policies

The social context of policymaking is especially relevant to understand the limitations in the development of policy initiatives. Therefore, the next section focuses on economic, political, and legal issues, as well as demographic changes that affect the development of family policies.

Despite governments' interest in family issues, there are other social issues that often take precedence in the development of public policies. Such issues derive from historical, economic, and political conditions that are particular to each country and, consequently, are part of the context in which family policy initiatives develop. From 2007 to 2009, approximately US\$4.5 billion was spent on education in Ecuador out of a budget of more than \$30 billion. While this is an increase over previous administrations (i.e., \$2.8 billion 2004–2006), this amount represents a smaller portion of the government budget than what is invested in public services (\$12.6 billion) and in paying the national debt (\$6.2 billion) (Center for Research and Analysis of Public Policy, 2009). Given the economic, political, and social changes occurring in Ecuador, developing and sustaining effective and consistent policies that support children and families is a major challenge.

These social issues related to political and economic crises in Ecuador become priorities in government public spending. These competing social needs represent a challenge to the development of explicit family policies in at least two ways. First, governmental policies continue to invest a significant amount of economic resources in improving security and preserving democracy to attract international investment. Second, resources available for programs against poverty are limited and require policymakers to focus on the most vulnerable members of society (e.g., women and children). Therefore, programs have prioritized basic nutritional needs, physical health, and education. As a result, government plans are not taking into account explicit family policy issues related to family functioning (Bogenschneider, 2006), such as premarital and marriage education (marriage, cohabitation), parenting education (socialization of the new generation), and family caregiving (provide assistance to elderly, disabled, or ill family members) in the development of policies for families living in poverty.

Legal Definitions of Family

Some of the challenges in the development and implementation of family policies in any nation stem from the way in which the family is defined in the country's legislation (Bogenschneider, 2006). In Ecuador, legislation recognizes and protects the family as the fundamental unit of society and the natural space for the development of children (Ecuadorian National Congress, 2003). Both legislations adopt a human rights approach to conceive the role of the family in society. This translates into policies that view families as the context in which the new generation (i.e., children and adolescents)

receives care and protection. Therefore, it could be argued that, within this way of conceiving the family, it is the individual – and more specifically his/her rights – that is central to the family's existence.

It is important to conceptualize the family as the basis to preserve the rights of individuals and as a social institution co-responsible with the state in protecting the new generation placing the family primarily in an instrumental role. Adopting such a conceptualization of the family creates challenges in the development and implementation of policies. First, it limits the possibility to develop explicit family policies that are concerned with issues pertaining to the family as a whole and its multiple functions (e.g., family creation, caregiving, economic support; Bogenschneider, 2006). Secondly, it leads policymakers to focus program goals on the needs of individuals – namely, children and adolescents – while family needs remain in the background (Rico de Alonso, 2007).

Changing Structure and Roles of Families

As previously stated, Ecuador has experienced a diversification in family structures during the last decades (Therborn, 2007). As the number of children who grow up in single-parent households or who experience their parents' divorce increases, family policymakers in Ecuador need to develop initiatives to address the needs of adults and children in such families.

Other issues that represent challenges for policymakers and program developers have to do with changing roles of mothers and fathers who traditionally participated in programs geared toward children. On one hand, despite women's increased participation in the work force during the last decades, existing policies seem to hold on to conservative views about men's and women's roles. Most policy initiatives developed in Ecuador rely on mothers' cooperation to ensure that children and adolescents receive both health and educational services and do not involve fathers in such tasks. Some policy analysts identify such conservative views with the term "familism" (Sunkel, 2007). The alienation of fathers from important family tasks such as childrearing and caregiving has its roots in cultural ideologies about motherhood (Braverman, 1988), which most policies and programs for families seem to reproduce.

On the other hand, although in existing programs mothers perform tasks such as attending health education classes and taking children to appointments, there are no policies that take into consideration the economic, psychological, and social needs of mothers. In addition, mothers are typically involved in many other duties that contribute to the well-being of youth and adults in families and that are not compensated (e.g., taking care of ill or disabled family members, doing most of the housework) (Aguirre, 2007). These issues deserve the attention of both legislators and policymakers in Ecuador.

Implementation and Evaluation

One of the central challenges to the effective implementation of family policies is related to the coordination between agencies in charge of program development and those responsible for their implementation (Rico de Alonso, 2007). In Ecuador, the governmental agencies in charge of program development (i.e., INFA) often subcontract the services of governmental and nongovernmental organizations in order to implement programs in the local communities. As a result, organizations that are hired to implement programs may not always have enough knowledge about programs' goals and their relation to government policies.

It is vital that governmental agencies in charge of program development and implementation into local communities coordinate efforts in order to ensure that (a) organizations understand not only the programs' goals but also those of the general policy in which such programs are nested, (b) such

organizations are committed to hire and train qualified professionals and staff to deliver the services required in the program, and (c) organizations follow governmental agencies' guidelines to program evaluation (Bogenschneider, 2006).

An evaluation component is not always included in the description of social programs in Ecuador or it is roughly mentioned without a detailed explanation of the evaluation procedures and program outcomes. Government plans in developing economies like Ecuador unfortunately tend to prioritize macroeconomic policies over social policies (Rico de Alonso, 2007). Such economic policies emphasize efficiency in the administration of resources and public spending. Consequently, governments should invest in programs that demonstrate to be effective and sustainable over time. Academic institutions and other experts on policy and evaluation should advise policymakers to make evaluation a mandatory component of social programs. In particular, evaluation reports should be widely disseminated (Bogenschneider, Olson, Linney, & Mills 2000).

Discussion

The objective of this paper was to reflect on the development of family policy initiatives in Ecuador. More specifically, it focused on policy initiatives and programs for families living in poverty. Policymakers in Ecuador are indeed interested in family issues because legislation considers the family a fundamental institution in society and claims that it is the state's responsibility to protect family rights. Furthermore, government agencies administer programs fostering the development of children within families by providing economic and educational support with the aim of improving the living conditions and development of children and adolescents. The goals of these programs focus primarily on the needs of children in specific age groups (e.g., under 6) and lack a focus on the entire family system, thus reflecting an implicit approach to family policy (Bogenschneider, 2006). In addition, the roles assigned to family members are limited to specific tasks (e.g., taking children to medical appointments, ensuring school attendance). There is less emphasis on educating all family members in order to perform important family tasks such as childrearing, healthy communication, and fostering loving relationships within the family.

Our second question addressed in this chapter focuses on the challenges and limitations of family policy initiatives in Ecuador. First, the challenges of developing, implementing, and maintaining family initiatives may originate from issues of political and economic instability. Also, social issues that are often prioritized in governments' economic plans (e.g., internal security, victims of the internal conflict) affect the availability of financial resources that are key to programs' sustainability. Another challenge to the development of policies has to do with the emphasis on individual rights over family rights. Family policies in Ecuador need to respond to changes in family composition. Last, but not least, family policy initiatives in Ecuador face important challenges in their implementation and evaluation.

Future Policy Recommendations

Due to space limitations, only three recommendations for family policy initiatives in Ecuador are presented. The first two recommendations are oriented toward revising current policies against poverty to include a more explicit view of family policy initiatives (Bogenschneider, 2006; Sunkel, 2007). The third recommendation addresses the need for policymakers and researchers to collaborate in developing and implementing family policies.

First, core policy goals should focus specifically on alleviating the detrimental effects of poverty on family relationships and on making families stronger. This requires broadening the scope of family policies so that they impact not only children but also the entire family system. In other words, family well-being must become the central concern in policymaking (Bogenschneider et al., 2000). A relevant question with regard to this proposal is would family-centered policies be more effective than child-centered policies in countries with limited resources and high poverty rates, like Ecuador?

Providing families with services and economic resources to meet the basic needs of their most vulnerable members (i.e., children) is very important. However, research has shown that, more than poverty per se, it is the number of risks to which children are exposed to as a result of living in poverty that affects their development (Clarke-Stewart, 2006). Living in poverty has multiple negative effects on individuals' physical, social, emotional, and intellectual development (Seccombe, 2000). Such negative effects go beyond health risks, malnourishment, and low school attendance. In fact, research has shown that living in poverty may have detrimental effects on important areas of family functioning such as communication and problem solving (Orthner, Jones-Sanpei, & Williamson, 2004). Also, empirical studies highlight the role of parents as moderators and mediators of external risks children may experience as a result of living in poor communities (Masten & Schaffer, 2006). In sum, research findings strongly suggest that poverty affects children directly, as well as indirectly through the negative effects it has on other family members and on family relationships.

When resources are limited, family-centered policies should prioritize programs that target families at greater risk (Clarke-Stewart, 2006) and focus on periods of particular need in the family life cycle, such as the transition to parenthood. Policies should strengthen those aspects of family functioning that are potential sources of resiliency (e.g., family's sense of togetherness and cohesion, communication, and problem-solving skills (Orthner et al., 2004)).

Secondly, in response to changes in family composition and social trends such as women's increased participation in the labor force, future policy initiatives in Ecuador ought to be based on a broader and more inclusive view of diverse family structures and roles. Data from national statistics between 2000 and 2009 indicate that the proportion of employed women has increased from 43.0 to 47.0 % in Ecuador (CEPAL, 2010). A broader view must also recognize the multiple ways in which individuals establish a family (e.g., cohabitation, legal marriage) and become parents (adoption, surrogacy, stepfamilies). Furthermore, fostering new arrangements in the traditional roles of men and women perform with regard to childrearing and paid work and housework needs to be addressed. Policy initiatives must also be mindful of the increasing rate of dissolved marital unions and the subsequent reorganizations of family life. Such changes in family definition are likely to make policy goals and programs more family friendly (Sunkel, 2007), as they would rely more equally on both mothers and fathers to perform parental tasks and to support each individuals' development in the family.

In order to efficiently use limited resources for social programs, family policies should specifically attend to relationships within the family system that could become sources of risk or, alternatively, make families more resilient. According to research findings, two family dyads (the couple and father-child relationships) deserve special attention in family intervention. These relationships are at a higher risk of being dissolved during times of vulnerability and stress. Strong couple relationships and close father-child relationships offer important protective factors against social and psychological risks that children may face when living in poverty (Cowan, Cowan, & Knox, 2010). Research findings suggest that fathers' involvement has direct as well as indirect effects on children's development. For instance, adolescents with highly involved fathers have shown low frequency of behavior problems (Day & Padilla-Walker, 2009). Therefore, couple and father-child relationships should become specific targets in future programs for families living in poverty in Ecuador.

Despite common beliefs about fathers' lack of interest in children's issues, there have been successful experiences in family interventions to strengthen fathers' involvement in economically disadvantaged communities. More specifically, parenting programs have shown that fathers from socially deprived family environments are able to understand the importance of education. Also, with proper training, fathers can develop skills to become more involved in their children's educational activities (Ortiz, 2004). Similarly, fathers from low socioeconomic groups participating in

intervention programs increased their level of participation in their children's literacy, learned strategies to promote learning, and developed a stronger support networks that enhance confidence in their role within their family (Bauman & Wasserman, 2010). Based on these findings, future family programs in Ecuador need to incorporate strategies to involve fathers in activities that benefit their children and adolescents. Current programs in Ecuador fail to adequately address enhancing father involvement.

Third, the changes in the scope and focus of family policies suggested above require a more direct and systematic collaboration between policymakers and researchers. As different authors (Golden, 2007; Gruendel & Aber, 2007; Huston, 2005) have emphasized, there is a need to establish direct links between family research and policy design and implementation. Universities and governmental organizations in charge of policy development and evaluation need to develop interdisciplinary programs of research that focus on variables that mediate or moderate outcomes in individuals and families (Pratt, 1995). Teams of experts from disciplines that traditionally influence policy – economics, law, and political science – and also from disciplines whose interest centers around family and human development issues (e.g., psychology and social work) should be in charge of conducting such research studies (Bogenschneider et al., 2000).

Unfortunately, there are only a few initiatives from academics in Latin American universities linking their research findings to policy decisions. In the short term, academics should be mindful of differences between them and the community of policymakers. As documented in the literature (Bogenschneider et al., 2000), policymakers may be more interested in research in pragmatic means to problem solving and likely have different perspectives and values of social scientists. Researchers need to bridge the communication gap that results from such differences. Experts have suggested a number of strategies that emphasize the recognition of policymakers' knowledge, the timely delivery of brief and clear research-based reports, and the use of varied mechanisms to deliver information that matches diverse learning styles (Bogenschneider & Corbett, 2010; Bogenschneider et al., 2000). In the long term, undergraduate and graduate programs in various disciplines interested in policy development – law, economics, political science, and psychology – must incorporate in their curricula courses on policy analysis, applied research, and program evaluation that could motivate professionals to become "policy-minded researchers" (Bogenschneider & Corbett, 2010).

The implementation of these ideas could be done by governmental, independent organizations, and university scholars working on policy analysis and evaluation. Therefore, a closer collaboration between researchers and policymakers could be implemented. In Ecuador, a centralized governmental agency develops policy initiatives and other governmental and nongovernmental agencies are in charge of implementing programs. Consequently, in order to introduce changes so that child-centered policies give way to family-centered policies, it would be necessary to work first with policymakers within governmental agencies that develop policies. Similarly, in order to enhance the coordination between policy developers and agencies that implement programs, interventions should focus on the interaction between these agencies.

In conclusion, economic, legal, and political constraints have impacted policy initiatives against poverty in Ecuador and have limited their ability to take more comprehensive and explicit approaches to families. While the preventative efforts being implemented (e.g., fostering healthy child development) are noteworthy and positive, family policy initiatives need to take on a broader and more comprehensive approach to families and work toward strengthening the entire family system. Future family policy initiatives ought to take into consideration existing research findings, so that programs target specific family processes that mediate and moderate the effects of poverty on individuals' development. Decisions about future family policies in Ecuador also need to be grounded on program evaluation research in order to maximize the use of resources and invest in effective strategies. Overall, these and other measures to further develop family policies in Ecuador require that policy analysts and researchers become more policy-minded and establish stronger relationships with policymakers.

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Chapter 29 Family Policies in Brazil

Bila Sorj and Andréa Gama

Abstract This chapter analyzes the emergence and development of Brazilian family policies, concomitant with the evolutionary process of the social protection system. It is supported by research data resulting from studies of different family policies. Moreover, it reflects on the potentialities and obstacles in promoting better living conditions for the family. On the one hand, it concludes that there have been advances, namely, a new legal definition of the family, affording it a more egalitarian, plural perspective; criminalization of violence against women; and a decrease in extreme poverty through assistance programs targeting families. On the other, the precariousness of child care services, the strong maternalist bias in the policies to combat poverty, and the few initiatives focused on supporting the balance between work, and family demands reproduce the social inequalities found among Brazilian families.

Keywords Family structure • Marriage • Domestic violence • Crèches and preschool • Monetary transfer program • Civil code • Poverty • Work, Family

The Social, Political, and Economic Context of Family Policies

In the 1990s, after 20 years under an authoritarian regime, a set of political reforms were introduced in Brazil with the aim of constructing a democracy, the grounds for which were set in the 1988 Constitution. Known as the "Constituição Cidadã" (Citizen Constitution), it received this name by virtue of its inclusion of a series of social rights as fundamental rights regarding health, education, and social assistance, among others, which placed it in harmony with the demands of the social movements and public aspirations.

This was also a period of great inflection of the capitalist development model prevailing in the country. The nation-state model, which advocated industrialization to substitute imports, under the administration of the State, was being reformed under the impact of the restructuring of the world order and the neoliberal agenda. New priorities, such as economic stabilization, diminution of the presence of the State, orientation to the market, and foreign trade liberalization, were put into practice by the various governments.

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460 B. Sorj and A. Gama

Such economic changes were not capable of altering the historical problems of social exclusion and inequality, which were actually aggravated in the 1980s recession. Due to this, at the end of the 1990s, questioning of the minimalist perspective of the State grew and there was a resumption of social policies, notably ones to combat poverty.

When compared to the democratic periods prior to the military dictatorship, the current Constitution drastically changed the dynamic of the production of public policies in at least four important aspects.

First, the new institutional policy configuration conferred broad legislative powers on the President of the Republic, such that the great majority of the laws passed favored the government agenda. This practice, which many considered was being used in an exaggerated manner, certainly expedited the decision-making processes regarding social policies, albeit resulting in the hypertrophy of the Executive.

Second, the nature of the relations among the federal entities was altered profoundly. The political authority of the governor and the mayor, now derived from popular vote, was expanded. Endowed with political and fiscal autonomy, these began to assume functions of public policy administration, either on their own initiative or by adhesion to some program proposed by another more comprehensive level of government or even by express constitutional imposition. The recuperation of the federal bases of the Brazilian State promoted a decentralization process of the social policies (Arretche, 1999).

Third, it fostered and consolidated new forms of public participation in the formulation and control of public policies. The strengthening of civil society, arising from the struggles for re-democratization in the country, was translated, at a later moment, from democratic consolidation into greater public participation in government decisions. Such participation assumed two forms: through national conferences and councils that, initially concentrated on the health and education areas, were rapidly disseminated to other areas of public policy. The councils were obligatory institutional arrangements at federal, state, and municipal level, linked to social policies (health, social assistance, children and adolescents, etc.) and had a deliberative character, given that the attributions were not restricted to the formulation of demands or suggestions, but covered, above all, public policy decisions. These councils had a parity composition between the government representatives and civil society. However, restrictions of a political, economic, and cultural order challenged the prescribed functioning of these councils, notably at local level, where the traditional political culture was marked by clientelistic, patrimonialist, and authoritarian behavior (Gohn, 2000; Tatagiba, 2002).

In this new profile assumed by the social policies, whose principles were inscribed in the new Constitution, an outstanding new political actor emerged, the so-called third sector, formed of non-governmental organizations, which became important partners in the formulation and implementation of social policies, notably at grassroots level. Considered as intermediaries between governments and individuals, but connected to local realities and more effective in channeling efforts towards development than the State administrative body, the NGOs were integrated as central political actors in the development process. Inspired by notions of participative democracy, which valued decentralization and strengthening of community ties, the NGOs began to establish partnerships with the State in the provision of services to the needy.¹

If these changes were fundamental in defining the new institutional profile of public policies, it was economic processes that would have greater impact on families.

The 1980s and 1990s were characterized by unprecedented economic instability, extremely high inflation rates, low GDP growth, and increased poverty. Policies aimed at economic stabilization, reforms oriented towards the market, and opening up to foreign trade, in the middle of international crises, led to precarious labor relations and working conditions. The social scenario was further

¹The growth of the tertiary sector in Brazil was especially accelerated as of the 1990s, when the annual average number of civil associations created leaped from 6,439 in the 1980s to 14,026, representing an increase of 118 % (IPEA, 2010).

aggravated by the retraction of investment in social policies. It was only as of 2000, with a combination of continued monetary stability, greater economic expansion, and reinforced political policies, such as a real increase in the value of the minimum salary, expansion of consumer credit, reformulation, and extension of income transfer programs to the lower earning strata, among other actions, that a decrease in poverty and social inequality was observed (IPEA, 2010).

Despite these advances, Brazil continues to present high levels of poverty and enormous inequality in income distribution. In 2010, 60.7 % (34.7 million) of Brazilian families had a per capita income below the minimum salary, and 16.3 million people lived in abject poverty, and the poorest 10 % earned 40 times less than the richest 10 %.

All these changes configure the main sources of tensions found in Brazilian society, featuring one of the highest levels of inequality and most alarming poverty figures in the world, and a legal democratic order that enshrines in the Constitution itself broad social rights but which, for diverse reasons, are only partially implemented.

Family Characteristics in the Country

In the last few decades, considerable changes have been verified in the profile of the Brazilian population and family structure. The population trends that are most outstanding and have profoundly altered the family structures are the following: (a) The decline in fertility rate: Prior to 1970, this was over six, but, by 2010, it had fallen to less than two, which meant it had reached a level below population replacement. (b) The fall in the infant mortality rate has declined from 29.7 per 100,000 births in 2000 to 15.6 in 2010. According to the IBGE (Brazilian Institute of Geography and Statistics) (2010), the main factors responsible for this fall have been the policies of preventive and curative medicine; basic sanitation; maternal and child health programs; the cited fertility rate decline, besides the higher minimum salary; and the income transfer programs.² (c) With the transition from a young age structure to an adult one, a growing trend is envisaged towards an aging population in the near future.

These factors have influenced the changing composition of families, which has been very profound in the last few decades. The traditional nucleus, formed of a couple with children, has been declining, although it still is the main format. On the other hand, there has been significant growth in the number of families headed by women with children and without the presence of a spouse, i.e., female monoparental families. This type is already the second most common. Other less significant transformations have also been noted: an increase in the portion of people who live alone and a growth in the percentage of childless couples (Sorj, Fontes, & Machado, 2007).

As happens in other western countries, the family structures in ascension are the smaller ones, monoparental, with or without the presence of relatives. On average, there are 3.3 persons per household, which reflects the process of declining fertility. With improved methods and easier access to contraception and increased participation of women in the labor market, in the nuclear family, having children is being postponed by young couples, as they prefer to attain financial stability first. Heavy expense on child education may also influence this strategy for family formation. Viewed from the angle of social inequalities, the differences are marked. In households earning up to 1/8 of the minimum salary, the average number of residents was 4.9, whereas in those with 10 or more minimum salaries, this figure was 2.1.

Besides the rapid growth in the number of monoparental families, the level of monetary poverty they suffer is noteworthy. In 2005, the highest percentage of poor in the country comprised families

² But, the rate still remains high compared with those of other countries, such as Cuba, where the rate is 5 deaths per 100,000 live births, South Korea with 3.8, and Singapore with 1.9.

B. Sorj and A. Gama

constituted of women with children and without the presence of husbands. More than half of the people in families of this type in Brazil are poor.³ Although their incomes are lower than those of traditional families, when we consider other welfare indicators, such as household conditions, schooling, and child labor, surprisingly, they present better results than the family arrangements with the presence of both spouses (Sorj & Fontes, 2008).

Characterization of the changes in family structure is not in itself sufficient for us to understand the family living conditions. One of the most important determinants concerns interaction with the labor market. In this sense, the massive persistent entry of women into employment over the last few decades has altered many aspects of the family dynamic. Female productive engagement rose from 47.3 % in 1992 to 52.4 % in 2007. By all accounts, the phenomenon of female entry into the workplace is irreversible. Regardless of the recessive or expansive conjunctures, the female employment figure grows. This shows that only the economic difficulties of the families do not explain the persistent increase in female productive engagement. The increase in women's educational performance to levels superior to those of men and cultural changes related to the role of gender - placing value on the independence and autonomy of women – are crucial for our understanding of the changes in the gender composition of the labor market (Bruschini & Lombardi, 2003). However, gender inequalities are still prevalent. Women continue to earn less than men. Although, on average, the remuneration difference has decreased, it still corresponds to approximately 70 % of that of their male counterparts. Women still occupy more precarious job positions. Remunerated domestic service, which, in 2009, employed 7.2 million, of whom 6.7 million were female, constituted the main employer of women. This service corresponds, in relative terms, to 7.8 % of the total occupied population, or 17 % of the occupied women and 0.95 % of the occupied men. In 2009, the index of regular or registered employment in this occupation was only 26.3 %, that is, of the 6.7 million women engaged, only 1.7 million were regular (IPEA, 2011). This figure is even more distant from that of regular employment in other sectors, which, in the same year, was 69.9 %.

The young, on the other hand, are markedly reducing their participation in the labor market, a phenomenon that may be associated to the increase in time dedicated to education. Thus, instead of children working to complement family income, especially in the face of a critical family economic situation, for example, when the family head becomes unemployed, what is occurring is an increase in the importance of both spouses being employed to support the family.

Consequently, more and more, families formed of couples will have to deal with family responsibilities with reference to the engagement of both in the world of work. However, the gender division of non-remunerated work is very unequal and unfavorable to women, the latter being much more involved in these activities than men. In 2009, the level of female participation in domestic tasks was 90 % against 50 % for males. However, it is important to observe that the income level affects the gender division of this non-remunerated work among family members. On average, women dedicate 4.5 times more hours to domestic tasks than men, and this difference decreases with income. Among the fifth poorest, the time women spend on household duties is almost 6 times greater than that of men, whereas, among the fifth richest, the difference falls to 3.6 times. The presence of domestic services represents an important mechanism in the maintenance of these differentials. The position in the family does not alter this situation. Whether as heads of the family (reference person considered responsible for the family) or as spouses (person who lives in a conjugal union with the reference person, regardless of matrimonial link), it is the women, rather than the men, who undertake the bulk of the domestic work (Sorj & Fontes, 2012).

³ Family poverty was defined as a per capita income below the poverty line, which is double that of abject poverty, defined as the cost of the basic food basket that contemplates the minimum calorie consumption need of an individual. The poverty line was estimated in September 2005 at 163 reais (US\$ 62).

Social Protection: A Dual System

In terms of social protection, Brazil reached politico-institutional maturity in the 1988 Constitution. This established new principles for restructuring the system of social policies, according to then hegemonic value orientations: the *social right* as fundamental to the policy; the commitment of the State to the system of social protection, projecting an accentuated degree of public State provision and the complementary role of the private sector; the conception of *social security* (not insurance) as a more comprehensive form of protection, and, on the organizational plane, *decentralization* and *social participation* as guidelines for institutional reordination of the system.

However, if, on the one hand, the constitutional advances indicate recognition that the family holds rights and bring to the public sphere the question of poverty and social inequality, on the other, the Brazilian State's engagement in the contradictory dynamic of neoliberal economic policies, as of the 1990s, has put into operation disarticulating processes, retraction of rights, and investment in the social field. Furthermore, the economic policy developed in the period led the country to high unemployment rates, underemployment, and irregular employment. With this, the possibilities of finance for social policies and programs were reduced, at the same time as the potential demand for them was growing.

The decrease in social investments that occurred in the 1990s and early 2000s produced dismantlement or, at least, a curtailment of social protection. Prisoners of the dilemma between the *new economic policy* and the policy of *social protection*, these governments opted for one side of the balance – that of fiscal adjustment and pro-market commercial and patrimonial reforms. In doing so, they had taken significant steps towards the privatization of public social services, significant cuts in social expenditure, and important reductions in the degree of social protection offered previously, as observed in social security, health, and education (Draibe, 2003; Lavinas & Garson, 2004).

As of 2003, during the President Luiz Inácio da Silva government, the tensions that had marked the previous period were allayed. The international financial crisis mitigated the hegemony of neoliberal thought, and the "Minimal State" agenda lost force. Economic growth returned to a key position on the government agenda. Improvement in the world of work and in public accounts opened up space for expansion of social expenditure. This led to the construction of a new strategy of social protection based on economic development with stability, income redistribution, and convergence among universal focused actions. However, despite the positive shifts, the specter of recession still remains alive, albeit of lower intensity.

The consolidation of this effort still faces a long road ahead. In the case of universal social and classic enabling policies (health, education, social security, assistance, and unemployment benefit), two challenges are particularly critical and have to be confronted: first, to construct mechanisms for control and regulation of the private sector in the administration of social policies, notably, the transfer of public resources to provide for the private sector, and second, to reestablish sustainable financial bases established in the 1988 Constitution, which requires measures such as reform to a progressive tax regime; full investment of the funds allocated to social security in the budget, which, even today, is still diverted to the maintenance of the fiscal surplus; ensure sustained financial bases for the Sistema Único de Saúde (unified health system), not regulated until today; and expand public expenditure on education, which is below that in other countries less developed than Brazil. The chronic deficiencies in urban infrastructure are far from being tackled. In the last 20 years, there has been notable precariousness in the national housing policies, sanitation, and public transport, which, despite small advances, do not reach the poorest families (Fagnani, 2011).

Brazil is characterized by presenting a dual system of social protection arising from the fact that social policies are directed to the poor, whereas the formal salary earners and middle-class strata are stimulated to obtain social security in the market. Such a situation in terms of social protection continues to reproduce social inequality among families.

464 B. Sorj and A. Gama

The greater differentiation of family arrangements and the transformations in the Brazilian labor market have created "new" risks and, therefore, needs strongly related to the role of the State. Among these needs, we have the conflicts between work, family responsibilities, the children's education, attention to the aged – especially from the perspective of greater longevity and smaller size families – and care for the sick. In the Brazilian case, these expectations revolve around the expansion of public services, as much in the sense of the unburdening of the "traditional" functions of care in families, to the extent that they already present scarce resources to cope with all these demands, as in the possibility of decreasing social and income inequalities among families.

However, the Brazilian State responds to these demands in a segmented manner due to the duality of social protection, bearing consequences for the effectiveness of the social policies. The action directed towards families is developed in a compartmentalized way, in policies aimed at childhood and adolescence, the aging of the population, and the impoverishment of families. Examples of these processes are found in the fragmentation of family policies that are regulated by different laws, such as the "Estatuto da Criança e do Adolescente" (Child and Adolescent Statute), the "Estatuto do Idoso" (Statute of the Aged), and "Programas de Transferência de Renda" (Income Transfer Programs), whose efficacy depends on universal policies. Thus, the poor population receives income for their own consumption but continues to live in spaces that lack adequate collective infrastructure, such as basic sanitation and transport.

Family Policy, Marriage, and Domestic Violence

From the point of view of family legislation, important innovations were introduced by the 1988 Brazilian Federal Constitution. In alignment with United Nations treaties, conventions, and declarations, the Constitution recognized the equality of men and women in public and private life. This recognition had profound repercussions in all articles referring to the family as regulated by the new *Código Civil* (Civil Code), which came into force in January 2003. The main characteristic of the new definition of the family is the adoption of a more egalitarian and plural perspective. In this direction, three alterations warrant emphasis.

The first refers to the total equality of rights and obligations of spouses. The expression "pátrio poder" (power of the father) that used to mark the superiority of men over women in the previous legal code is replaced by the expression "poder familia" (family power), to be exercised equally by either spouse. In fact, in the old code, the man was viewed as the head of the family, responsible to represent it, administrate the property, and establish the household of the family entity. With the new codification, "the administration of the conjugal partnership shall be exercised in collaboration by both husband and wife, always in the interests of the couple and the children" and "the spouses are obliged to contribute, in proportion to their property and earnings through work, for the support of the family and the education of the children, whatever their assets regime may be." The equality of rights has also been extended to the rural areas. The 1988 Constitution recognized the equality of rights between men and women in the acquisition of deeds or in concession for the use of land, e.g., for the purposes of agrarian reform (Barsted, 2002).

The second concerns the parental relationship. Inspired by the principle of equality and by the recognition of the rights of children and adolescents, many innovations have been incorporated into the *Código Civil*. The former law used to give preference in child custody to the mother, as set forth at the beginning of the last century, when it used to be considered that the woman did not go out to work and dedicated herself exclusively to the children, having, therefore, a stronger bond of affection than the father. In the new *Código Civil*, the child shall be in the custody of the parent who presents better moral, educational, or financial conditions to bring up and educate him/her, thereby prioritizing his/her welfare. In this same spirit, adopted children are provided the same rights as natural children. Moreover, the age of majority was set at 18, instead of 21 under the former *Código*.

Another legal innovation concerning the parental relationship deserves mention. The *Estatuto da Criança e do Adolescente* (Child and Adolescent Statute), 1990, established the right of filiation, to be exercised without any restriction, including, as required, against the parents' wishes. This right obliges the parents to recognize their children and assume responsibilities, for example, payment of alimony. The law also considers that this right surpasses individual interests and must be defended by means of public instruments of social control. Thus, in many Brazilian states, DNA tests to prove paternity are already provided free by public services. The increase in public control in the recognition of paternity and the DNA test facilities for respective proof has reduced the number of children registered with "unknown parents." This new law contributes to ensuring greater commitment in the participation of parents in families, above all, in terms of economic obligations.

The third concerns the broadening of the definition of family. The new *Código* and the 1988 Constitution recognize the "união estável" (stable union) and "entidade monoparental" – single parent entity (constituted of one ascendant, male or female, and his/her descendents) – respectively, as family entities under state protection. The previous Código Civil only conceived of family entity as the matrimonial union (arising from civil marriage). The stable union has become recognized as a family entity for persons of different sexes who are united for at least 5 years and who are not legally prevented from marriage (the union with children shall be deemed "stable" after 3 years).

It is undeniable that the 1988 Constitution, and its recent codification as the *Código Civil*, legitimized a more plural concept of family. Anyway, the legal model is still far from the profile of family relations or living units encountered in Brazil's social reality. As pointed out by Lobo (2002), the new *Código* leaves out other arrangements that are very common in Brazilian society, for example:

- (a) Union of relatives and persons who live together in affective interdependence without a father or mother as head, as in the case of groups of siblings, after the death or abandonment of parents
- (b) Unrelated persons who live together on a permanent basis, with mutual help links, but without sexual or economic ties
- (c) Homosexual unions of an affective and sexual character
- (d) Concubine unions, when there exists impediment to marriage, with or without children
- (e) Affective community formed of unofficially adopted "filhos de criação," without natural filiation or regular adoption

Thus, many family arrangements lie outside the regulations and consequently the protection of the State, with effects on the universe of families that can be attended by the respective public programs designed to focus on them. Besides this, some legal specialists consider that the *Código*, only recently regulated, has come into force already out-of-date, given that it is insufficient to regulate, for example, test-tube procreation, transsexualism, genetic engineering, and human cloning.

Although the Código Civil (Civil Code) guarantees equal rights in the family for both men and women, domestic violence remains at alarming proportions. In 2011, there were 48,152 registered cases of violence against women – one every 12 min. Since the 1970s, the politicization of "violence against women" has been produced, on a global and local scale, in human rights conferences, feminist movements and organizations, women's meetings worldwide, academic feminist and gender production, public discussions, formulation of public policies, as well as in the updating of legislation.

The creation of Delegacias Especializadas de Atendimento à Mulher (DEAMs) (Specialized Police Stations for Women), in 1986, marked a decisive moment in the process of criminalization of this type of violence and consolidated Brazilian feminism as an important social actor. In August 2006, new feminist political mobilizations resulted in the creation of Maria da Penha Law, which defined "domestic and family violence against the woman" as a crime and created specific courts, called Juizados de Violência Doméstica e Familiar Contra a Mulher, to hear these cases. With the new law, crimes involving this type of violence were removed from the list of "less offensive crimes," which means, among other procedural and penal implications, that they could entail imprisonment of the accused. Besides this, the law transcends punitive measures in also providing cautionary protective measures, social and psychological assistance to the woman and her family members, services to attend the

466 B. Sorj and A. Gama

needs of the aggressor, educational programs aimed at promoting gender equality, and creation of an integrated network of institutions dealing with the problem, encouraging a "multidimensional" and "intersectoral" approach to "violence against women." However, despite the legitimacy before the law, the criminalization of this type of violence has proven to be a great challenge: first, because violence against women occurs in intimate social space, where the actors are linked to each other by a broad range of interaction in which conflict relations, affectivity, and dependence coexist, inhibiting denunciation of aggression, and second, as implementation of the Law involves a complex integrated set of actions, such as punishment, protection, assistance, and prevention, that require material and human resources, but have not been made available by the governments (Debert & Gregori, 2008). Anyway, the Maria da Penha Law has been a successful experience that has contributed to the containment of gender violence, being one of the most well-known laws among the public.

Family Policies and Child-Rearing

The main policy regarding children and which has considerable impact on conciliation between work, family is, without doubt, the access to child education. Precisely because it is the mothers who normally "conciliate" remunerated work with child care, recent studies have pointed out the positive effects of access to these services in the improvement of the link between mothers and the labor market. Mothers, whose children frequent crèches and preschool institutions, present a greater level of occupation in the labor market, work in more formalized activities, have increased their number of hours of work, earn higher incomes from work, and dedicate less time to domestic work in their own homes. Such a situation has broadens the possibilities of income generation for families and contributes to their welfare (Gama, 2012; Sorj, 2001; Sorj, Fontes, & Machado, 2007; Sorj & Fontes, 2008).

Nevertheless, although the 1988 Constitution guaranteed the right of children to this educational stage, access to crèches and preschool institutions is far from becoming a reality for a great part of the population. In the last few decades, access to child education has grown only slightly. The attendance rate in crèches for children aged 0–3 years was 8.7 % in 1998, rising to 18.4 % in 2009, and for preschool institutions, in the same period, the rate increased from 57.9 % to 81.3 % (IPEA, 2011). Besides the level of growth of access to child education still being insufficient, it is strongly marked by the families' social class. Families in the upper income strata access these services much more than those in the lower echelons. One can add to this the difference in quality of the institutions accessed by the various social classes. The dual system that characterizes the child care regime as much expresses the social inequalities in the country as reinforces them, as the low quality of the public institutions generates worse results in the subsequent educational stages.

The absence of prioritization of this policy is very clear in the precariousness of its coverage, the insufficiency of its finance, the tendency to privatize the sector, especially in the case of crèches, in the restrictions regarding implementation of a full-time service and free school meals. The lack of free universal child education that is full-time and guarantees free meals has a strong impact, mainly on the living conditions of poorer families, with important consequences for the schooling and welfare of their children, as well as for the mothers' engagement in the labor market. In a country marked with social inequality, child education is transformed into a mechanism – if there were maximum accessibility – of combat of family poverty, as much from the side of investment in children, as from that of potential zing the productive capacity of mothers.

The second family policy aimed at conciliation between work, family responsibilities refers to leave entitlement. This is primarily governed by Labor Law (*Consolidação das Leis do Trabalho – CLT*), which applies only to employees with regular work contracts or those that contribute to the National Institute of Social Security (INSS). Only half of the Brazilian labor force works in regular jobs and is thus entitled to such benefits.

Maternity leave is 120 days, fully paid by the National Institute of Social Security/INSS. It guarantees the job security of the expectant mother from the confirmation of the pregnancy to up to 5 months after the birth, contemplating measures to prevent exposure to health and safety risks during pregnancy as well as granting the right to work interruptions for breastfeeding and making provision for the right to a crèche for working mothers' babies up to 6 months of age.

This policy of leave entitlement presents many deficiencies. In the first place, it tends to be centered on very specific conciliatory demands, related to pregnancy and motherhood, disregarding that family responsibilities refer to both men and women, and pervade the whole of working and family life, not restricted, therefore, to the reproductive phase. In second place, the forms of access to the labor benefits and rights are, in the majority, associated to the employment link and, therefore, restricted to regular workers, which generates exclusion of a large part of the workers in the country. The greater efficacy in the protection of the workers and their families could certainly be achieved by the transformation of the labor rights into universal rights so as to include a significant portion of the workers engaged in irregular work activities. Therefore, it is not just a matter of extending leave to take care of the family and making it more balanced in terms of gender, but also disconnecting the link between family benefits and the type of employment contract, making this policy universal.

Family Policies and Families at Risk

The monetary transfers to low-income families take place through three programs. The first is the "salário-família" (family salary), granted to low-income social security contributors to assist with child support. It is restricted, therefore, to workers occupied in the formal sector of the economy. The regular employed contributors, except domestic employees and the unionized self-employed, are entitled to this benefit for every child up to 14 years old or invalid children of any age. Another limitation is that only those earning a contribution salary less than or equal to R\$ 468,47 (US\$ 231.40) are eligible to receive this benefit. The monthly amount is a derisory R\$ 13,48 (US\$ 6.60) per child, which corresponds to around 5 % of the minimum salary. Each beneficiary has an individual entitlement, and it is conditional upon annual presentation of proof of compulsory vaccination of their children up to the age of 6 and semestral proof of school attendance of those 7 or over. The "family salary" thus has limited coverage and the amount is certainly well below the expenditure incurred by families in fulfilling the conditions required by the Previdência Social.

The second type of support is aimed at persons not covered by social security and is in a situation of extreme social vulnerability and poverty. This benefit, called Benefício de Prestação Continuada, guarantees a minimum monthly salary for the handicapped, without any age limit, and to senior citizens over 67. To be entitled, the beneficiaries must prove they cannot afford to support themselves and that their families do not contribute to their subsistence. Provided in the 1988 Constitution, and regulated by the Lei Orgânica da Assistência Social, this benefit began to be paid in 1996. The criterion to receive it is that the person must prove the deficiency causes incapacity to work and lead an independent life, he/she cannot exercise any remunerated activity, does not receive any other social security benefit, as well as a per capita family income less than ½ of a minimum salary.

This benefit is the object of much controversy. It is argued that, as it is linked to family income, access by the aged and the deficient ceases to be an individual right. This access rule contradicts the legislation that established social assistance as a *direito do cidadão* (citizenship right) and duty of the State that provides the social minimums to guarantee coverage of basic needs. Assessing this

⁴ Workers who render services to companies without an employment link, but with compulsory intermediation of their respective trade union

B. Sorj and A. Gama

policy, Fonseca (2001) concluded that, in these cases, "the right to an income is determined, compulsorily, by other family member's earnings thus, his/her autonomy and dignity is impaired by this dependence" (p. 108).

The third refers to the Programa Bolsa Família (BF) created in 2003 and defined as a monetary transfer program, conditional upon income, aimed at poor families, in a similar manner to many other programs that have proliferated in Latin America since the mid-1990s. It constitutes the greatest assistance program in the world, catering for 13 million families.

The emergence of policies explicitly aimed at combating poverty arose from the observation that economic reforms, such as the reentry of the Brazilian economy into the international market and the monetary stabilization policy, were not sufficient to overcome the effects of the economic crisis that had began in the 1970s, placing Brazil among the countries with the highest levels of poverty and social inequality.

The Program has a double objective: (a) provide immediate relief of poverty by means of direct income transfer to the family and (b) reinforce the exercise of basic social rights in the areas of health and education, by means of fulfilling the respective conditions, such that the families benefited would manage to break the poverty cycle of successive generations. The target public is families that are *moderately* to *extremely poor*, that is, with a monthly per capita income between R\$ 60.00 (US\$ 29) and R\$ 120.00 (US\$ 59). A family with a per capita income up to R\$ 60.00 can be included in the Program regardless of its composition. On the other hand, a family in the range R\$ 60.01 to R\$ 120.00 per person can only enter the Program if there is an expectant mother, nursing mother, or children/adolescents aged 0–15.

Women are the prime beneficiaries of the Program and they must be committed to maintaining their school-age children and adolescents in school and fulfill the following basic health care: the vaccination calendar for children aged 0–6 years and the pre- and postnatal care for the pregnant and mothers in the breastfeeding period.

This Program has been the object of intense controversy regarding its results. There is no doubt that the BF has had positive impacts: reduction of poverty, decreased income inequality, higher school attendance, greater vaccination coverage, and a guarantee that the children will not be submitted to work. However, the lack of complementary programs which promote the development of human capital, through skill training and professionalization courses, hindering the process of family autonomization. And when the beneficiaries are engaged in the labor market, it is observed that there is a greater propensity to be in irregular employment, when compared with other poor workers (Sorj & Fontes, 2009).

The option to prioritize women as the BF beneficiaries is also a theme that generates controversy. It was based on evidence from studies that indicate that women prefer to invest family resources in their children's welfare, whereas men tend to reserve an important portion for their own welfare. The lack of critical reflections on the economic, social, and moral constraints that produced this behavior in women reinforces the social expectations about maternal "altruism," which exalts their mothering capacity and their role as family moralizers and welfare providers for their members.

The BF Program has had ambivalent results from the gender angle. Paes-Sousa and Vaitsman (2007) identified the effects of empowerment in the participation of women in the Program, which is expressed in their increased authority in the domestic space, due to increased purchasing power and consumption. Besides this, it highlights that there have been changes in the perception of the beneficiaries about themselves as citizens, especially as of the moment at which they were obliged to obtain citizenship documents, such as birth certificates and ID cards, in order to register for the Program. Others (Sorj & Fontes, 2009) have drawn attention to the fact that rewarding the families, having as a counterpart the functional specialization of women in control of the counterparts, reinforces the sexual division of work and weakens the link with the labor market. In fact, it is observed that the women benefited have participation rates, working hours, and salaries that are less than those

of women who, at the same poverty level, are not benefited. Thus, it can be supposed that participation in the Program discourages the incorporation of women into the labor market with better conditions.

Probably, the main challenge to be overcome by the public policies in Brazil is to conciliate the combat of poverty with the promotion of women's autonomy, more specifically, substituting the antipoverty campaign with a strong maternalist bias by policies that foster improvement in the level and quality of mothers' participation in the labor market, whenever the autonomy of women is the desired value. Another challenge to be faced concerns a change in the distribution of domestic responsibilities between men and women. Even though this public debate has not been established in Brazil, the changes in the family structure and the gender composition of the labor market have shown their great importance nowadays.

Conclusions and Recommendations

Over the last few decades, interest in the theme of balance between work, family responsibilities has grown significantly in various countries of the world. More and more, it is recognized that the conflicts between working life and family life have negative effects on people's quality of life, notably on the welfare of women and children and on their working conditions, particularly productivity and worker health.

Unlike in many European countries and North America, in Brazil, the recognition that the articulation between the work sphere and family responsibilities constitutes a social problem is still incipient. Brazil is not among the countries that ratified the Workers with Family Responsibilities Convention (C156) adopted by the ILO in 1981. Consequently, there are few initiatives and measures focused on support for the balance between work, family demands. Nevertheless, the last two decades have been strongly marked by changes in the structure of families and the labor market, which have aggravated the problematic relation between the sphere of work and the private sphere. These changes have not been accompanied, in the same measure, by action on the part of the State and companies to minimize the problems families face. So, it would be no exaggeration to say that the regulation between these two spheres still remains a private matter for families. However, the existence of high levels of poverty and social inequality mark important differences in the mechanisms of conciliation between work, family which, in turn, produce and reproduce the social inequalities. The middle and upper classes count on, for example, domestic service and access to crèches and preschool institutions of superior quality, affecting as much the subsequent school performance of the children as their entry into the labor market in better quality occupations. On the other hand, the less favored classes have limited access to this level of education, and when they do, it is in precarious institutions or through informal carers. Thus, the social disadvantages are transmitted from generation to generation.

The changes in family composition have been profound. There has been a strong retraction of the traditional type of family, a couple with children. On the other hand, there has been significant growth in the number of families, composed of female heads with children, without the presence of a spouse, i.e., female monoparental families. Such families are precisely those that present the lowest incomes and face the greatest difficulties in conciliating work, family responsibilities, generally resorting to help from the extended family or older children to free the mother for remunerated work (Sorj & Fontes, 2008). But the massive entry of wives into the labor market shows that, more and more, the traditional family type will have to live with a situation in which both parents are integrated into the labor market. Thus, the tensions between work demands and family responsibilities tend to grow.

The private solutions adopted by families have represented enormous costs for women. In general, the problem is handled by allocating family members to jobs of various types, in which the working day is an important differential. For men, regular employment prevails, i.e., protected by the labor

470 B. Sorj and A. Gama

legislation, with various benefits arising from the contractual link. For women, irregular employment predominates, which implies shorter working days and lower salaries and without the social protection conferred by the labor legislation.

The growing participation of women in the labor market indicates that the female role has been changing rapidly without that of the male being altered. As women are already not so available to care for their dependents, it is necessary for society to redefine how domestic tasks and family care are to be distributed between the parents.

A positive step in this direction was given by the new Civil Code promulgated in 2003, which recognized the total equality of rights and obligations and broadened the concept of family to include monoparental families and "stable unions" (non-matrimonial) as family entities recognized by the State. The egalitarian perspective of family has become an important reference for redefinition of gender roles, and certainly their impact presents a growing trend. In the same sense, the 1990 Estatuto da Criança e do Adolescente (Statute of the Child and the Adolescent) recognized the right of children to have registered parentage, irrespective of the will of their parents. This principle aims to combat the omission of parents in the recognition of paternity, a fact quite common in poor families. This new legal text may have important repercussions on the level of family poverty. Formal recognition of paternity obliges the parents to be involved with the family responsibilities, above all, those of an economic nature. Facilitating the paternity recognition process of "absent parents" may significantly relieve the monetary poverty of female monoparental families.

Another important step in the redefinition of family responsibilities between the private and public spheres is promoted by the extension of access of children aged 0–6 years old to child education institutions. The effectiveness of this mechanism in balancing the demands of work, family is notable. The impact of crèches and preschool institutions on the increase in women's participation in the labor market, on their income, and working hours has been felt among all social classes. But, it is the poorest families that most benefit from this mechanism when compared to those in higher-income groups. For this reason, we consider that, from the point of view of the families, the expansion of public investment in child education must be given priority.

The labor legislation that includes some measures that facilitate the achievement of balance between work, family such as maternity leave, job security for the expectant mother as of the confirmation of pregnancy until up to 5 months after the birth, and the right to a crèche for working mothers with babies up to 6 months old, should furthermore (a) extend leave to care for the family beyond the immediate reproductive period and (b) no longer link access to family benefits to the type of work contract established (formal or informal) and the gender of the employee (whether father or mother) so as to make the right universal.

Rewarding the families having as their counterparts the functional specialization of women in their dedication to the care of their children, as in the case of the income transfer program, reinforces the gender division in work and weakens their link with the labor market. Probably, the main challenge to be overcome by the public policies in Brazil is to conciliate the combat of poverty with promotion of women's autonomy, more specifically, replace poverty combat policies with a strong paternalist bias by policies that foster improvement in the level and quality of mothers' participation in the labor market, whenever women's autonomy is a desired social value.

The fragmentation of the social policies, typical of the Brazilian reality, must be overcome through integration of initiatives that combat social inequality among families in all respects.

Finally, studies that integrate quantitative and qualitative methods should be stimulated more. Historically, the national research by means of household sampling always investigated data regarding families, approaching results of a demographic nature, fundamental for the formulation and assessment of policies in the area. However, quantitative studies are not articulated to these experiences or are very scarce. Such a gap must be filled so that social policies may more and more reflect the choices and solutions that the families themselves offer for their problems.

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\mathbf{A}	population-based/public health approaches, 342
Abortion, Ireland	prevention, family violence (see Family violence,
anti-abortion sentiment, 129	Australia)
legality, 129	policy framework developments, 337-340
McGee judgement and, 128	poverty, social policymaking process, 340
Active aging, Italy, 167–169	work and family (see Work and family, Australia)
Adeyinka, M., 5	, , , , , , , , , , , , , , , , , , ,
Aging	
Japan	В
and elderly care, 327–328	Baker, B., 17, 24
low FTR, social programs, 320	Baran, M.L., 6
medical and social services, 328	Barnett, T., 38
population policy, 312	Barrow, C., 407
society, 306–307	Basic Old-Age Pension, 312
Akinsulure-Smith, A.M., 5, 25	Benning, S., 410, 411
Alimony, 113	Bergnehr, D., 6
Amowitz, L.L., 17	Betancourt, T.S., 25
Antía Pérez-Caramés, 7	Blaxland, M., 341
Apartheid era	Bogenschneider, K., 3, 19, 285, 286, 410, 411, 416
absent fathers, 61–62	Borràs, V., 191
dop-stelsel system, 60	Botswana. See Child-and family-focused policy,
FHHs (see Female-headed households	Botswana
(FHHs))	Botswana Children's Act, 52–53
housing, 62–63	Botswana Vision 2016, 52
migrant labour system, 60–61	Branches of government, USA
poverty, 62	executive, 381
'separate development' policy, 60	judiciary, 381–382
Asian Financial Crisis, 306, 307, 315	legislative, 381
Ataca, B, 241	Brazil
Australia	family characteristics, 461–462
Australian Family Law, 344–345	social protection, 463–464
characteristics	Breadwinner, 7, 68, 88, 102, 131, 138, 141, 143, 165,
Australia's Welfare 2011, 336	176, 204, 246, 274, 324, 328, 341
crude divorce rate and number of divorces, 336	Buckley, M., 227
migration, 337	Buckmaster, L., 340
partnership formation, stability and birth rates,	Buğra, A., 249
335	Bustelo, M., 185
population growth, 335	
technological and economic changes, 336	
evidence-based policies (see Evidence-based policy,	C
Australia)	Cadena Ruíz, A.M., 428
families at risk	Cadigan, K., 410, 411
Australian aboriginal and Torres Strait Islander	Camp, J.K., 7
families, 343–344	Canada Prenatal Nutrition Program (CPNP)
Commonwealth funds, 344	cost-efficient program, 366
disability, members, 344	funding to community groups, 366
place-based interventions, 343	vulnerable mothers and infants, 361

Canada's Patchwork Policy	English-speaking history, 406
aboriginal groups, 357	evidence-based policy-making, 411-412
assessment	family and relationships
CCB, 367	economic activity rate, women, 407
constitutionality, 368	geographical proximities and shapes, 406–407
CPNP, 366	governmental and nongovernmental resources
efficiency, adequacy and effectiveness, 365	407–408
maternal/parental leave benefits, 366	issues, Guyana and Trinidad, 407
NHSP, 367	marriage statistics, 407
NLSCY findings, 366–367	maternity leave, 407
OECD countries, 367	"family impact analysis", 410–411
policies and programs, 365	health and education, 414–415
Public Health Agency, 364–365	law and court, family, 413–414
RMAF, 365	multiple agency influences and inputs, 412–413
UCCB, 366	parenting policy, 415
characteristics, 358	political decision-making and policy-making
family dissolution, 363–364	context, 408–409
family dissolution, 363–364 family formation, 361–362	poverty and human development, 410
family maintenance	social policy, family, 409
older families, 363	subgroup exclusions, 408
younger families, 362–363	violence responses against women, 410
family policy types and lifespan perspective,	women, children and families, 409
360–361	CARICOM. See Caribbean Community Secretariat
family succession, 364–365	(CARICOM)
lifespan development perspective, 358	Çarkoglu, A., 7
research, 360	CCB. See Compassionate Care Benefit (CCB)
sociohistorical factors	CDP. See Child Development Program (CDP)
common law vs. civil code, 359	CDR. See Crude divorce rate (CDR)
dichotomies, 359	CEDAW. See Convention on the Elimination of All
family policy vs. family perspective, 360	Forms of Discrimination against Women
federal vs. provincial jurisdiction, 359	(CEDAW)
"piecemeal" and "patchwork", 358	Cerami, A., 226
universal vs. targeted policy, 359–360	Certified Healthy Family Specialist, 309
welfare state vs. neoliberalism, 359	CFWI. See Colombian Family Welfare Institute
Care	(CFWI)
care policies, 115	CHBC. See Community Home-Based Care Program
day-care institutions, 115, 118	(CHBC)
home care services, 119	Chen, M., 298
Icelandic health care system, 119	Child-and family-focused policy, Botswana
shared custody, 111	implementation and assessment, 53-56
Care Dependency Grant, 68	national policy initiatives
Caregap, 121	Botswana Children's Act, 52–53
Caregiving, Kenya	millennium development goals, 49-51
Bill of Rights, 32	"Vision 2016", 52
explicit family policies, 41	Childbearing, USA policies, 378
girls, 37	Child care
Care Program for Displaced People (CPDP)	Germany
description, 436	fathers, 143
strategies, economic self-sufficiency, 436	guarantees, 143
Caribbean Community Secretariat (CARICOM)	percentage of children, 138, 139
complexities	Iceland, 111, 112, 115
Elazar's typology, political cultures, 416	leave, South Korea, 310
family issues, 417	policies
human development achievements, 416	Italy, 162
same sex marriage, 416	South Korea, 311–312
"scenario planning", 417	Child care subsidy, 311
and social partners, 416–417	Child Development Program (CDP), 451–452
social policies, 416	Child marriage
description, 406	Child Marriage Restraint Act, 298
economic and foreign policy, 406	Indian society, 292

legislative measures, 296	Cohabitation
perpetuation, 291	Iceland
Child Marriage Restraint Act, 298	dissolved, 111, 113
Child poverty, Iceland, 118, 119	register, 114
Child protection, Australia	Norway
preventive programmes, 342	after breakup, 85
state/territory authorities, 339	description, 80
Child-rearing	and engagement, 80
allowance, 311, 314	and marriage, 83
Brazil, 466–467	policies, 84
India, 294	Colombia
Kenya	CFWI, 440
Bill of Rights, 32	families (see Colombian families)
explicit family policies, 41	family policy (see Family policies, Colombia)
USA policies, 378–379	forced displacement (see Forced displacement)
Children's best interest, 113, 119	Colombian families
Children's rights	birth control campaigns, 426
Ombudsman for Children's	definition, 426
Rights, 218	social and economic changes, 428
Sweden, 98–99	transformations, 426
USA, childbearing, 378	vulnerable
Child support, 309, 314	CPDP, 436, 438–439
Child Support Grant (CSG), 67	families in action, 435–436, 438
Child welfare	"familism", 437
China	government agencies, 437
education, 264, 266	implicit family policies, 436
health care, 264	laws and public policies, 435
Immunization Management Program,	poverty, and displacement, 434
266–267	women headed, 427
Interim Measures for the Schooling of Migrant	Colombian Family Welfare Institute (CFWI), 440
Children, 266–267	Common-law marriage, 377
policy development, 264, 265	Commonwealth Caribbean. See Caribbean Community
rapid economic growth, 266	Secretariat (CARICOM)
social assistance, poverty, 266	Community Home-Based Care Program (CHBC), 51
Sweden	Compassionate Care Benefit (CCB)
institutional and noninstitutional care, 101	"end-of-life care initiative of international
Social Services Act (SoL), 101	excellence", 367
Chinese family policies	family member, 369
child welfare (see Child welfare, China) dissolution,	Comprehensive family policy, 309, 317
marriages and divorce, 259–260	Conformity
elderly care, 268–269	vs. individuality, 374
government's awareness, 257	requirements, 379
health-care, 267–268	Contraception
marriage laws, 259–260	artificial, 128
maternity leave, 261	compromise statute, 128
one-child policy, 262–263	Convention on the Elimination of All Forms of
policy-making processes, 259	Discrimination against Women (CEDAW), 20
political, socioeconomic, and cultural	Corbett, T.J., 410, 411
contexts, 258	Courts, divorce cases, 111, 113
social and economic transition, 269	CPDP. See Care Program for Displaced People (CPDP)
women against violence, 260–261	CPNP. See Canada Prenatal Nutrition Program (CPNP)
Chin, M., 8	Craig, L., 341
Chou, L.I., 407	Crèches and preschool, 466, 469, 470 Crichton, J., 40
Chou, I.H., 279	
Chou, L.D., 284 Civil code (<i>Código Civil</i>), 464, 465	Crude marriage rate (CMR), 307
Civil Law, 308–309	Crude marriage rate (CMR), 307 CSG. See Child Support Grant (CSG)
Clarke, R., 410	Custody
Clark, R., 410	and cohabitation, 113
CMR. See Crude marriage rate (CMR)	shared, 111
Civilia del Ciado marriago inte (Civilia)	J. 111

D	South Korea, 314
Dancaster, L., 66	and stalking, Italy, 162–163
Danzinger, S.K., 71	Domestic Violence Act, 20
da Silva, L., 347	Domestic violence laws, India, 302–303
Day care, USA	Domestic Violence Prevention Act, Taiwan
description, 384	anti-domestic violence messages, 280
family obligations to strangers, 384	assessment, 282–283
financial support, governmental/charitable	Chinese society, 281
agencies, 384	implementation, 281–282
healthy child development, 384	shocking homicide case, 281
Deblaquiere, J., 344	Domestic work
Delany, Z.I., 69	couples, 111
de Maio, J., 344	men participation, 111
Demographic changes, Japan	Dornette, J., 149, 150
after World War II, 320	Dowry prohibition laws, 298
growing elderly population, Japan, 320	Dreze, J., 298
Devolution of Estates Act, 20	Dual earner-dual career, 117, 121
Diehnelt, E.E., 6	Dual-earner/female-carer model, 233
Dina, Y., 414	DV. See Domestic violence (DV)
Dintwat, K.F., 48	Dye, T.R., 417
Disability Grant, 67	
Disability law, Taiwan, 276–277	
Diversity	E
family formation and structure, 32	ECB. See European Central Bank (ECB)
family policy framework, 43	Economic policy and social development, CARICOM
poverty levels, 39	Secretariat, 406
Divorce. See also Divorce law	Ecuador
China, 259–260	economy, 445, 446
Ireland	family
ban, 129	demographic characteristics,
divorce bill, 130	447, 448
legislation, 127, 130	domestic violence, 449
Divorce law	historical changes, 446–447
India, 299	work and family issues, 448–449
South Korea, 309	family policies
Taiwan	implicit, 446
assessment, 279–280	lower-income families, 446
financial situation, 278	political policies, 446
implementation, 279	poverty and policies
marriage, 277	implicit family policies, 450–452
multi-generational household	Eddy, G., 61
lifestyle, 277	Edwards, B., 349
"the Neighborhood Mediation Center", 278	Elderly care
parent-child relationships, 278	Korea, 306
Do, A., 8	services, 312
Domestic violence (DV)	Elderly policy, 315, 316
Brazil, 464–466	Equality (gender), Iceland
CARICOM	Act on the Equal Status and Equal Rights of Women
advocacy groups, 410	and Men, 112
ministries, women's affairs, 408	explicit basic equality, 113
NCDF, 414	policies and, 115, 121
official responses, Caribbean governments and	Escuredo, R.B., 186
NGOs, 410	Esping-Andersen, G., 138, 176
tensions, 418	European Central Bank (ECB), 196
Iceland	European family policies
child protection, 114	Germany, 7
police, 114	Ireland and Italy, 7
women, 115	Moldova and Portugal, 7
Japan, 323	Norway and Iceland, 6
Moldova, 215–217	Russia, 7–8

Spain, 7	social expenditure, 118
Sweden, 6	welfare system, 117
Evers, A., 140, 141, 143	Sweden
Evidence-based policy	children and poverty, 100
Australia	child welfare, 101–102
audits of research, 346	parents death, 99
description, 346	single-parent families, 100–101
effectiveness, family policy, 347–349	Families with special needs, 313, 314
foster care, 346	Family benefits, Iceland
implementation and assessment, 350	expenditure, 118
indigenous communities and government/	parents, 118
services, 346	Social Security Act, 1946, 117
NTER, 347–348	Family dissolution, Canada, 363–364
policy evaluation (see Policy evaluation,	Family Education Act
Australia)programme design and	assessment, 285
implementation, 346	deliver services and programs, 284
development, Iceland, 112–113	healthy life, 283
South Korea, 316, 317	implementation, 284–285
Ewert, B., 140, 143	socioeconomic changes, 283
Explicit family policies	Family formation, Canada
Ecuador	description, 361
changing structure and roles, families, 453	PHAC and CPNP, 361–362
implementation and evaluation, 453–454	provincial and territorial jurisdiction, 361
legal definitions, family, 452–453	WHO/UNICEF-sponsored Baby-Friendly Hospital
Kenya, 41, 42	Initiative program, 362
Ey, C., 340	Family Friendliness Index (FFI), 311
Бу, С., 540	Family-friendly social environment, 308–310
	Family-friendly work place, 311, 316
F	Family functions, USA policies
	at-risk families, 380–381
Fackrell, T.A., 280	
Fahey, T., 7	childbearing, 378
Fahey, T., 127	childrearing, 378–379
FAHF. See Framework Act on Healthy Families (FAHF)	marriage, 376–378
Families	work/family balance, 379
Iceland	Family life
characteristics, 110–111	Family life
law, 112	CARICOM
state of research, evidence-based policy	contributors, 407
development, 112–113	employment, 411
Kenya	household and family structures,
cohabitation, 34	406–407
divorce, 34	implications, religions, 407
extended families, 32	education and counseling, 309
HIV/AIDS epidemic, 38	Family maintenance, older families, 363
marriage, 33	Family policies
mate selection, 33	Africa, 5–6
nuclear family, 32	Asia, 8
patriarchal kinship, 32	Australia, 9
policies, families raising children, 34–35	Botswana
poverty, 38–39	Central Office of Statistics (CSO), 54
and vulnerable members, 35–37	customary laws, 54
Turkey (see Turkey)	deficits, 55
Families at risk	"3D service delivery", 55
Brazil, 467–469	dual legal system, 54
Iceland	Brazil
child benefit packages, 118	capitalist development model, 459
child welfare services, 119–120	and child-rearing, 466–467
relative poverty rates, 118, 119	"Constituição Cidadã", 459
sickness/old age, 119	families at risk, 467–469
social assistance, 118	legislative powers, 460

Family policies (cont.)	Plan of Action, 70
marriage and domestic violence, 464–466	post-apartheid era, 63-64
and NGOs, 460	social policy framework, 70–71
Canada (see Canada's Patchwork Policy)	targeting marriage, 64–65
in CARICOM (see Caribbean Community	South America, 9–10
Secretariat (CARICOM))	Spain (see Spain)
Colombia	Sweden (see Sweden, family policies)
and CFWI, 428	Turkey (see Turkey)
criticisms, 433–434	Family policy development, South Korea
criticisms, family laws and policies, 433–434	CMR and CDR, 307
domestic violence, 431–432	Korean families, 306
family and work, 433	marriage and divorce rates, 307
Family Compensation Organizations, 428	"return to the birth sexagenary cycle", 306
government agencies, 430	social policymaking process, 307–308
marriage and family–work balance, 431–433	Family policy evaluation, 316
marriage, cohabitation, and divorce, 431	Family policy implementation, 315–316
public policies, 428	Family structure, Brazil, 461, 469
social programs, 428	Family succession, Canada
vulnerable families, 434–439	benefits, CPP, 365
definition, 3	Canadian family policy, 358
Ecuador (see Ecuador)	description, 364
and Europe (see European family policies)	means-tested assistance, funerals and
evidence-based policy, 4	burials, 365
explicit and implicit, 3	taxes, 365
Germany	Family Support Units Program (FSU), 22
amendment, 137	Family type, Iceland, 112
percentage of children, child care, 139	Family violence, Australia
2000–2012 period, 138–140, 142–144	domestic and family violence, 342
politics, demographic and economic trends,	frameworks/plans, 342
140–142	prevention efforts, 343
social welfare system, 138	reasons, indigenous communities, 342-343
status differentials, women and men, 138	Family-work balance
Iceland (see Iceland)	Italy, 165, 167
international arena, 4–5	South Korea
Ireland (see Ireland, family policy)	child care leave, 310
Italy	Equal Employment and Support for Work
child and family allowances, 164–165	Family Balance, 309
pension system, 160	FFI, 311
social assistance, 157, 158	Korean government, 311
targeting family functions, 161	maternity leave and paternity leave, 310
targeting marriage, 161–163	work time policies, 310
"White Book on Welfare", 159	Sweden, family policies, 95–96
Japan (see Japanese family policies)	Fathers
Mexico (see Mexico, families and policies)	children care, 120
Moldova (see Moldova) monitoring and assessment, 4	inheritance rights, 113
North America, 9	parental leave, 116, 117 participation, family life, 110
Norway (see Norway, family policies)	single, 110
Portugal (see Portugal)	take-up rates, 120
Russia (see Russia)	Female-headed households (FHHs), 61
Sierra Leone (see Sierra Leone)	Fendall, N.R., 36
South Africa	Fertility, 315, 316
apartheid era (see Apartheid era)	FFI. See Family Friendliness Index (FFI)
child-rearing and work-family balance, 65–66	FHHs. See Female-headed households (FHHs)
conditionalities absence, 69–70	Fitzpatrick, J., 9
explicit family policy, 70	Flaquer, L., 180
families at risk, 66–69	Fleckenstein, T., 141
individual focused, 70	Flextime, 311
information base, 71	Fodor, E., 199
means testing, 69	Fonseca, A.M.M., 468

Forced displacement	Н
counseling services, 439	Hand, K., 344, 345
description, 425	Hansen, N., 25
economic losses, 438	Han, W.J., 275
and government agencies, 437	Hartz IV reforms
Social Action, 437	critics, 146
Foreign aid	description, 145
CARICOM member states, 412	disabled adults, 149
donor countries, 412	employment requirements, women, 148
Foster Child Grant, 68	implementation, 146
Framework Act on Healthy Families (FAHF), 307, 309	jobs, 145
Friese, B., 416	unconstitutional, 147
FSU. See Family Support Units Program (FSU)	Harvey, E.D., 59
	Hawkins, A.J., 280
	Hayes, A., 335
G	Hayes, M., 349
Gama, A., 10	Healthcare policies, China, 267–268
Gay/lesbian	Healthy families, 309, 313
civil rights, 376	Healthy Family Support Centers (HFSCs), 309, 315
diverse family structure, USA, 374	Helo, J., 438
donations, 378	Hesketh, T., 263
heterosexual cohabitors, 377	Heymann, J., 56
Geisler, E., 143	HFSCs. See Healthy Family Support Centers (HFSCs)
Gender	HIES. See Household Income and Expenditure Survey
equality	(HIES)
Ireland, 132–133	Higgins, D.J., 339, 340, 348
promotion, employment, 185	Holborn, L., 61
social policies and effects on social, 190	Hortaçsu, N., 242
South Korea, 310, 311, 314, 315	Household Income and Expenditure Survey (HIES), 48
equity, 342	Housing and migration, Mexico
inequality/discrimination, 302	changes, land tenure, 397
Gender inequities, CARICOM	ejidos lands, 396
education, career paths and legal policies, 407	NAFTA and subsidies, 396–397
family issues, Caribbean, 417	poverty and inequality indexes, 397
Germany	programs, <i>Infonavit</i> and <i>Fovi</i> , 397
family policy	remittances, 397
history, 138	self-help housing, 397
2000–2012 period, 138–140, 142–144	Hsiao, W.C., 268
politics, demographic and economic trends,	Huston, A., 316, 317
140–142	Hwang, S.H., 8
retrenchments, labor market and social support	
policies	•
the Hartz reforms, 144–146	I
statutory health insurance, 146	Iacovou, M., 127
vulnerable families	Iceland
and domestic and interpartner violence, 147–148	description, 110
families and disabilities, 148–150	family characteristics, 110–111
single-parent families, 146–147	family policies
Gibbons, A.Y., 9	child-rearing and family-work balance, 115–117
Gill, J., 36	families at risk, 117–120
Glendinning, C., 176	implementation and assessment, 120
Gomes, C., 9	targeting marriage, 113–115
González, MJ., 190	socio-economic context, social policymaking,
Governance, 158	111–112
Government pension fund, 79	state of research, families, 112–113
Gray, M., 335, 340, 344, 345, 349	"ie" system, Japan
Grenade, W.C., 408, 417	adoption, husband's last name, 321
Guðmundsson, H.S., 113, 120	concept, individualism, 320
Guerreiro, M.d.D., 7	description, 320
Gurko, T., 227	domestic violence, 323

"ie" system, Japan (cont.)	International arena
family formation and dissolution, 328	"International Perspectives on Family Policies", 4
family networks, 326	IYF, 5
Iglesias de Ussel, J., 180	UNDESA, 5
Ikenye, N.J.B., 32	International Monetary Fund (IMF), 196
IMF. See International Monetary Fund (IMF)	International Year of the Family (IYF), 5
Implicit family policies, Ecuador	Ireland
governmental institutions, 450	family
and INFA, 450, 451	couples, 126
objectives, target population, and activities/services,	marital instability, 127
450, 451	marriages, 126
strategies, poverty rates, 450	'second demographic transition', 126
Income support, Ireland	family policy
antipoverty, 127	implementation and assessment, 134
and antipoverty policy, 131–132	modernisation, 128–133
family-oriented, 128	pre-1960s, 127–128
and gender equality policy, 132–133	Italian welfare system, 156
unmarried mothers, 130	Italy
Income test, 118, 119	active aging and solidarity, 167–169
Indian family system	child and family allowances, 164, 165
authority, 290–291	childcare, 164
child-rearing practices and parental leave, 293–294	domestic violence and stalking, 162–163
civil society, 303	family characteristics, 157
demographic transition, 295	family-work balance, 165, 167
Domestic Violence Laws, 302–303	health, 167
elderly people, 295	immigration, 169
gender inequality/discrimination, 302	maternity leave, 163–164
joint family or extended family, 289–290	parental leave, 163–164
marriage and remarriage of divorced and widowed,	policy development, 169–170
292–293	preschool, 164
patriarchy and domestic violence, 293	sociohistory, economics, and politics, 156–157
pension sector reforms, 296	IYF. See International Year of the Family (IYF)
prepuberty marriage and polygamy, 291–292	
problems, children, 294–295	
rural to urban migration, 290	J
state intervention	Japanese family policies
Child Marriage Restraint Act, 298	after WWII, 320
divorce laws, 299	aging, 319
dowry prohibition laws, 298	to child rearing
issues and domestic relations, 296	child allowance, 324–325
legislations concerning family formation and	childcare, 323–324
dissolution, 297	description, 323
maintenance, 301	work and family balance, 324
remarriage, widows, 296	de facto ineffectiveness, 328–329
succession and right to property, 300	to elderly
Individuality	financial support, 327
vs. conformity, 374	living environment, 328
of family law/policy, 374	mental and physical health, 327–328
Inequalities, Mexico	"super-aging society", 327
and diversity	family formation and dissolution
civil marriages, 390	child support payment, 322–323
education and economic participation, women,	description, 321
390–391	divorce, 321–322
emergence, divorce and new family forms, 390	DV (see Domestic violence (DV))
factors, marital status, 390	marriage/remarriage, 321
family structure, 391	government's effort, 328
support systems, 391	growing elderly population, 320
gender and poverty	household labor, 328
labor markets, 394	ie system, 320
social protection, 394	lack of funding, 329

lowness, TFR, 319-320	democratic presidents and dictatorships, 391
policy makers and practitioners, 319	ejidos, 391
reports and opinions, professionals, 329	historical fragmentation, rural and urban areas, 392
supporting families at risk	land privatization process, 392
in poverty, 325–326	National Revolutionary Party, 391–392
poverty rate, OECD countries, 325	subsistence agriculture, 391
single-mother families, 326–327	Long-term care insurance
women's safety, domestic violence, 329	Germany, 141, 144
Jensen, 81	for senior citizens, 312
Johansen, E.B., 88	Lou, S.S., 285
Joint family, 289, 290, 300	Low-income families, 313
Jones, J.E., 6	Ludwig, V., 147
J. P. Singh, 8	Ludwig, v., 147 Lumumba, P.L.O., 39
J. 1. Singh, 6	Lunacharskii, A.V., 224
T/	Lunn, P., 127
K	
Kafescioğlu, N., 7	
Kagitcibasi, C., 241	M
Kahn, A.J., 175	Makiwane, M., 63
Kainou, T., 323	Mandatory divorce mediation, 278, 280
Kalule-Sabiti, I., 63	Marriage
Kamerman, S., 175	Brazil, 464–466
Kaspiew, R., 344, 345	Kenya
Katsumata, Y., 329	cohabitation, 34
Katz, I., 349	the 2010 Constitution, 33
Kay, N.M., 280	divorce, 34
Keck, W., 176	early marriage, girls, 33
Kenny, P., 339	HIV and AIDS Prevention Act of 2006, 42
Kenya. See also Families	monogamous/polygamous, 37
gender, 37–38	nontraditional and traditional marriages, 33
government	primary purpose, 32
the 2010 Constitution, 39	laws, 259, 260, 308
policies, 39–41	and relationships, CARICOM, 416
Keyder, C., 249	Sweden
Kharas, H., 412, 417	dismissal, employed women, 93
Kohler, HP., 225	family policies, 94
Kohler, I., 225	same-sex, 93, 94
Kostina-Ritchey, E., 9	Marriage-separation policies, 155
Kreyenfeld, M., 143	Maternity capital, 230, 233
Kristjánsson, S., 118	Maternity leave
Kühhirt, M., 147	Moldova, 217
	South Korea, 310
	Maurás, M., 447
L	May, R., 17, 24
Lee, M.L., 277	McDowell, Z., 414
Legislative reform, 63, 169, 337, 410	MCFSCs. See Multicultural Family Support Centers
Legitimacy, 111	(MCFSCs)
Leigh, A., 348	McLaughlin, E., 176
Leite, R., 6	Meil Landwerlin, G., 180
Lieberthal, K., 259	Meißner, M., 140
Lifespan development perspective	Menchini, L., 233
Canada's aging population, 368	Meng, Q.Y., 267
policy makers, 368	Mexico, families and policies
types, family policy by function, 360, 361	benefits, family pensions, 393
Little, O.M., 410, 411	capacity, public finances, 392
Liu, H.E., 279	Care Instances program, 400
Liu, X., 268	child day-care program and SPSS, 399–400
Lobo, P.L.N., 465	description, 389
Local power vs. national power, Mexico	with disabled people, 396
catholic religious indoctrination, 391	diversity and inequalities, 390–391

Mexico, families and policies (cont.)	NCCRP, 218
domestic violence, 398–399	pensions, 220
economic crises, 393	policy assessment, 221
elderly, 395–396	social policymaking process, 212–213
family code, 398	UNDP, 220
family-work balance, productive and reproductive	Moloney, L., 344, 345
work, 394	Monetary transfer program, 468
gender inequalities, 393	Moreno, S., 191
housing and migration, 396–397	Morfeld, M., 150
institutions and programs, 393	Mothers
labor market, 392–393	parental leave, 116, 117
laws and rights, 389–390	paternity suit, 113
local power vs. national power, 391–392	single, 110
marriage and divorce codes, 397–398	surrogate mothering, 110
maternity leave, 394–395	MSWGCA. See Ministry of Social Welfare, Gender and
Oportunidades, 390, 400	Children's Affairs (MSWGCA)
political fragmentation, 389	Muir, K., 349
poverty and gender inequalities, 394	Mullan, K., 341
risk, in poverty, 395	Multicultural families, 313, 315
Seguro Popular de Salud, 390	Multicultural Family Support Act, 313
social assistance, 393	Multicultural Family Support Centers (MCFSCs),
social policies, 392	313, 315
sociohistorical, economic and political contexts, 390	Municipalities
women's work and manpower, 399	Child Protection Committee, 119
work and social security, 393	domestic violence, 114, 115
Meyer, C., 150	family day care, 115
Migrant labour system, South Africa	home care services, 119
absent fathers, 61–62	institutional day care, 115
FHHs high proportion, 61	social security benefits, 118
housing, 62–63	
poverty, 62	
social protection, 60–61	N
young men, 63	NACA. See National AIDS Coordinating Agency (NACA)
Millennium development goals	National AIDS Coordinating Agency (NACA), 51
child mortality reduction, 50	National Council for Child Rights Protection
combat HIV and AIDS, malaria and other	(NCCRP), 218
diseases, 51	Navarro, H., 450
extreme poverty and hunger eradication, 49-50	NCCRP. See National Council for Child Rights
gender equality and empower women, 50	Protection (NCCRP)
maternal health, 50–51	Ndinda, C., 62
universal primary education, 50	The Neighborhood Mediation Center (NMC), 278–280
Ministry of Gender Equality and Family, 308, 310,	Neotraditionalism, 224, 232
311, 316	New Horizons for Seniors Program (NHSP)
Ministry of Social Welfare, Gender and Children's	CPL component, 368
Affairs (MSWGCA), 22	formative and summative evaluations, 367
Misson, S., 349	Newnham, E.A., 25
Moen, P., 416	NHSP. See New Horizons for Seniors Program (NHSP)
Mokomane, Z., 6, 56	Nixon, E., 7
Moldova	NMC. See The Neighborhood Mediation Center (NMC)
cash benefits and social services, 219	Nordic countries
community-based social services, 220	childcare and social security, 112
demographic situation, 211–212	family law, 113
family policy	lone parents, 110
child-rearing and work-family balance, 217–218	mothers, 116
development and implementation, 213	Nordic model, 111
targeting marriage, 214–217	Northern Territory Emergency Response (NTER),
government, 219	347–348
juvenile justice system, 219	Norway
life expectancy, 212	•
1 2	economics, 78–79
migration, parents on children, 218	education, 78

family	Parental benefits, Germany, 141, 142
and children, 81	Parental leave
definition, 80	Germany, 142–143
divorces, 82	Iceland
evidence-based policy development, 83-84	fathers and mothers, 116, 117
fertility rates, 81	fund, 116
same-sex partners, 82	legislation, 116
family policies	paid, 117, 118, 120
child rearing and family-work balance, 85	percentage of fathers, 116
family functions, 84	India, 294
implementation and assessment, 88–89	Italy, 162
targeting marriage, 84–85	law, 275–276
parental leave (see Parental leave, Norway)	Moldova, 217
politics, 79–80	Norway
social policymaking process	adoption benefits, 86
the Council of Ministers, 78	care for children, 87
immigrants, 78	cash benefits and taxes, 87
National Insurance Scheme, 83	cash-for-care benefits, 87–88
National Public Scheme, 83	child benefit, 87
public benefit initiatives, 82	lump-sum maternity grant, 86
Sami, 78	period, 85–86
NTER. See Northern Territory Emergency Response	unpaid leave, 86
(NTER)	South Korea, 310
	Sweden, 96–97, 102
	Parental obligations, 113
0	Patel, V., 26
OAG. See Old Age Grant (OAG)	Paternity leave
Obiol Francès, S., 184	Moldova, 217
OECD. See Organization for Economic Co-Operation	South Korea, 310
and Development (OECD)	Paternity suit, Iceland, 113
Oil revenue	Patriarchy and domestic violence, 293
employment, 79	Patulny, R., 349
export, 79	Pedroso, P., 206
income, sales, 79	Petersen, E., 185
social welfare system, 79	Place-based interventions, 343
Oksenberg, M., 259	Policies for senior citizens
Olafsdóttir, H., 115	elderly care services, 312
Old Age Grant (OAG), 67	long-term care insurance, 312
One-child policy	old-age pension, 312
assessment, 263	Policy development, Italy, 169–170
description, 262	Policy evaluation, Australia
government provides incentives, 262	communities for children, 350
implementation, 262	evaluation, 2006 changes, 349–350
On-site child care, 311–312	past adoption practices, 350
Ooms, T., 410, 411	Policy framework developments, Australia
Organization for Economic Co-Operation and	marriage
Development (OECD), 315	commonwealth and state/territory legislation, 337
Ortega, I., 397	De facto relationships, 337
Oseland, L.M., 5	mechanisms, same-sex relationships, 337
	past family policy, lingering effects and reforms, 338–339
P	shifts, 1975 legislation, 337
Paes-Sousa, R., 468	out-of-home care, 339–340
Paid work/employment/labour market, Iceland	Policy-making, CARICOM
agreements, 119	complexities, 416
divorce rates, 110	evidence-based, 411–412
parental leave, 116	family professionals, 410
social assistance, 118	involvement, social partners, 416–417
Palamuleni, M., 63	multiple agency influences and inputs, 412-413
Parens patriae, USA, 375, 378	and political decision-making, 408–409

Policy recommendations, Italy	reduction strategies, 401
active-aging policies, 170	social assistance, DIF, 393
social change, 169	social policies, Mexico, 392
territorial socioeconomic differences, 170	women's work, 399
unfair and illegitimated social model, 170	social policymaking process, 340
Political development, Sierra Leone	Prepuberty marriage, 291–292
"family", 17–18	Privacy, USA
history, 16–17	description, 375
legal framework, 18–19	and equality values, USA, 377
"Rebel War", 17	parenting classes, 379
Polygamy, 291–292	self-determination, 378
Portugal	and self-initiative values, 375
Catholic marriage, 196	Pronatalism, 232, 233
Estado Novo, 196	Public policies
families	ECB and IMF, 196
adult off-spring live, 198	Kenya
Catholic marriage, 197	creating families, 32–34
couple with children, 197	families and stress, 38–39
demographic indicators, 197, 198	gender, 37–38
division, labour, 198–199	government, 39–41
implementation and assessment, 206–208	policies, families raising children, 34–35
parental education programmes, 208	and vulnerable members, 35–37
social welfare, 195	sociology, family, 199–200
sociology, family, 199–200	30Clology, family, 177–200
twenty-first century	
childcare provisions, 204–205	Q
domestic violence, 201–202	Qin, S., 8
eldercare and disabled support, 205–206	Qu, L., 335, 336, 344, 345
family-work balance and care, 202–203	Qu, L., 333, 330, 344, 343
greater recognition, fatherhood, 204	
marriage, filiation and divorce, 200–201	R
policies targeted, poor families, 206	Rauch, A., 149, 150
shared parenthood and family-work policies, 203	Ravens-Sieberer, U., 150
temporary reorientations, 204	"Rebel War", 17
Post-conflict societies, Sierra Leone	Redmond, G., 233
children protection, 21	Reduced work schedule, 310
families, 18, 22	Registered partnership, 114
family policy, 23	Registration of Customary Marriage and Divorce Act, 20
judicial system, 19	Remarriage
youth, 25	divorced, 292, 297
Poverty Propril 461 462 466 470	widowed, 292, 296, 297–298 Reproductive technology, USA, 376
Brazil, 461–463, 466–470	
Colombia	Republic of Korea. See South Korea
CPDP, 436	Residency, 113
and displacement, 434	Results-Based Management and Accountability
families in action, 435–436	Framework (RMAF), 365, 366
"feminization of poverty", 427	Rights
laws and public policies, 435	artificial insemination, 114
vulnerable families, 436–437	children, 120
Ecuador	cohabiting couples, 113–114
children, 455	employees, 112
implicit family policies, 450–452	inheritance, 114
negative effects, 455	parental, 114, 116
and human development, CARICOM, 410	same-sex couples, 114
law, 276	visiting rights, 113
Mexico	RMAF. See Results-Based Management and
families in, 395	Accountability Framework (RMAF)
and gender inequalities, 394	Rodríguez, C.S., 434
Oportunidades and Seguro Popular	Rombo, D.O., 5
de Salud, 400	Rønsen, M., 84

Russia	"Freetown", 16
congruence and innovation, gender equality, and	legal framework
diversity, 234	city courts, 19
demographic and sociological aspects, 225-226	customary law, 18-19
fighting poverty and social exclusion, 231–232	sexual crimes, 19
financial transfers, 230–231	policy makers
ideology and implementation	good governance, 23–24
early preschool education and childcare	implementation strategies, 24–25
system, 233	marginalized populations, 24
economic independence, 232	outstanding needs, 26–27
local residency registration, 233	research needs, 25–26
parental responsibilities and rights, 233	political and military instability, 17
traditional life-cycle model, 232	post-independence political history, 17
insurance regulations, 226 marriage, divorce, parenthood, and domestic	"Rebel War", 17 slavery, 16
violence, 227–228	•
nondiscriminatory environment, 234	Singh, J.P., 292, 293 Single-parent families, 314, 316
officially married adults, 234	Skew, A., 127
societal change, 223–224	Skrede, K., 84
welfare policies, 226	Smith, H.E., 5
work and family reconciliation, 228–230	Smit, R., 66
Rzhanitsyna, L., 227	Social assistance
	Germany
	benefits, 150
S	the Hartz Reforms, 144–146
Same sex marriages, 93, 94	payments, 140
Samms-Vaughn, M., 407	South Africa
Samson, M., 69	conditional social assistance, 69-70
Sano, Y., 8	Social Relief of Distress Grant, 68-69
Sanson, A., 347	unconditional social assistance, 69
Saraceno, C., , 176	Social care
Schafer, R., 33	Franco's dictatorship, 178
School Enrolment and Attendance through Welfare	Spanish welfare system and role, families
Reform Measure (SEAM), 340	classification, 176
Schorr, A.L., 416	defamilialisation, 176
Scott, D., 348	employment rates, 177
SEAM. See School Enrolment and Attendance through	Esping-Andersen's typology, 176
Welfare Reform Measure (SEAM)	the European and OECD averages, 177
Seguro Popular de Salud (SPSS) program	female involvement at work, 177
description, 399	male breadwinner model, 176
uninsured population, IMSS <i>Solidarity</i> , 393 Services	Mediterranean welfare states, 176, 177
	Social grants, South Africa, 70, 71 Social policies. <i>See also</i> Public policies,
after-school, 116 and benefits, sickness/old age, 119	
child welfare services, 119–120	Kenya CARICOM
day-care, 115	family law and family court, 413–414
local social services, 113	for family policy, 409
Sexual equality, Norway	indigenous populations, 408
home and workplace, 88	Mexico
laws, 84	formal labor market, social security and
parenting, 85	marriage, 392–393
Shanks, T.R.W., 71	fragmentation, 392
Sierra Leone	and poverty reduction strategies, 401
cynicism and youth alienation, 17	"Save-Italy" Decree, 160–161
"family", 17–18	Social Relief of Distress Grant, 68-69
family policies	Social security, Iceland
childrearing and family-work balance, 21	Nordic countries and, 112
families at risk, 21	Social Security Act, 117
implementation and assessment, 22-23	Social Security System, 118
social services implementation, 24	support for parents, ill/disabled
targeting marriage, 20–21	children, 119

Socioeconomic context	long-term care, 186–188
Africa, 5–6	parliament PSOE members, 181
Asia, 8	policies against gender violence, 189
Australia, 9	recommendations and measurement, 191-192
Europe, 6–8	regulates separation and divorce, 180
North America, 9	same-sex marriage, 181
South America, 9–10	in the 1980s and 1990s, 180
Soloff, C., 339	services and economic benefits, 175
Sorj, B., 10	social benefits, 180
South Africa	structure, 175–176
apartheid era (see Apartheid era)	welfare state and role, 176-177
child-rearing and work-family balance, 65-66	Sperner, J., 150
conditionalities absence, 69-70	SPSS. See Seguro Popular de Salud (SPSS) program
explicit family policy, 70	Stanton, D., 340
families at risk, 66–69	St. Bernard, G., 407
family policy	Strasser, V., 17
apartheid era (see Apartheid era)	Stratigaki, M., 185
post-apartheid era, 63–64	Succession, 297, 300
targeting marriage, 64–65	Sun, T. H., 277
individual focused, 70	Sweden
information base, 71	children's rights, 98–99
means testing, 69	description, 91–92
Plan of Action, 70	domestic violence, 95
post-apartheid era, 63-64	family policies
social policy framework, 70–71	child rearing and family-work balance, 95–96
Southern European welfare	families at risk, 99–102
Catholic marriage, 196	individual freedom and a gender-equal
childcare, 204	society, 102
democratic revolution, 196	and single mothers, 102
Estado Novo, 196	targeting marriage, 94
South Korea	higher income families, 92
child care policies, 311–312	history, socioeconomics and politics, 93
domestic violence, 314	parental leave, 96–97
families and family policy development, 306–308	poverty, 103
family–work balance policies, 309–311	state of research, families, 93–94
healthy families, 309	traditional attitudes, gender, 102
HFSCs and MCFSCs, 315	welfare system, 92
international experiences, 317	work-family balance, 97–98
low-income families, 313	Sweid, R., 339
marriage and divorce, civil law, 308–309	
Ministry of Gender Equality, 316	_
multicultural families, 313	<u>T</u>
OECD, 315	Taiwan
policies, senior citizens and families, 312	divorce law (see Divorce Law)
policy evaluation, 316	Domestic Violence Prevention Act, 280–283
single-parent families, 314	education programs, 286
Welfare of Persons with Disabilities Act, 1989, 314	family characteristics, 274
Spain 40/2002 101	Family Education Act, 283–285
the Act Ley 40/2003, 181	governmental activities, 273
assessment and implementation, 190–191	prevention-based and intervention-driven
care services, children and elderly, 191	approaches, 285
cash transfers and tax treatment, 182–184	socioeconomic context
childcare services, 182	disability law, 276–277
Civil Code, 181	job skills, 275
conciliation, work and family lives, 184–186	Martial Law, 274
definitions, 175 Franco's dictatorship, 177–180	multi-generational co-residence, 275
incorporate policies and measurement, 191	parental leave law, 275–276 poverty law, 276
'large family', 180–181	Tang, S.M., 274
LGBT movements, 181	Tax, Iceland, 118
	2011, 200101101, 110

Taylor, D., 340	USA policies
TFR. See Total fertility rate (TFR)	best practices, family policy, 383
Therborn, G., 113	day-care centers, 384
Thévenon, O., 196	diverse family structures, 374
Thyen, U., 150	economic and religious constraints, 373
Torns Martín, T., 191	executive branch, 381
Total fertility rate (TFR)	family functions (see Family functions, USA)
aging population, Japan, 330	family policies, 374
lack of funding, policies implementation, 329	fluid and emergent, 374
policies, child rearing, 323	individuality vs. conformity, 374
Transnational marriage, 307, 313	judiciary branch, 381–382
Trzcinski, E., 7	legislative branch, 381
Turkey	organizations, 382
characteristics	research, 384
child-rearing practices, 241–242	sampling, laws, 382–383
	settlers, 373–374
interdependence in intergenerational	
relations, 241	socioeconomic context
marriage, 242	Colonial Period (1500s–1800s), 374–375
childbearing, 244	Industrial Period (1800s–1920s), 375
"out-of-wedlock children", 244	Modern Period (1950s–2012), 376
planning education, 244	Postindustrial Period (1900–1950s), 375–376
traditional societies and married couples, 244	transitory system, public leaders, 381
Civil Code, 250	
dependent care	
childcare policies, 246–247	V
Disability Law, 248	Vaitsman, J., 468
elderly care, 247	Vidal, S., 190
Labor Law and Social Security Law, 245	"Vision 2016", 52
maternity and paternity leave policies, 245–246	Vulnerable conditions, Colombia
Social Security and General Health Insurance	CPDP, 436, 438–439
Law, 245	families in action, 435–438
"erode family ties", 251	government agencies, 437
policy-making process	implicit family policies, 436
demographic shifts, 240	laws and public policies, 434
family characteristics, 240–242	poverty and displacement, 433-434
family life, 239	
poverty, 249	
protect family and prevent violence, women, 250	W
social assistance programs, 250	Waldfogel, J., 275
targeting marriage	Wang, H., 8
Civil Code, 242	Webster, E., 347
domestic violence, 243–244	Wedlock, Iceland, 110, 113
Women's Human Rights, 243	Welfare, Icelandic welfare system
	elderly, 119
	families at risk, 117–118
U	financial crisis, 120
UCCB. See Universal Child Care Benefit (UCCB)	social security, 110
UN conventions, 415	Welfare reforms, Australia, 340
UNDESA. See United Nations Department of Economic	Wells, M.B., 6
and Social Affairs (UNDESA)	Weston, R., 335, 336, 344, 345
UNDP. See United Nations Development Program	Whitehouse, E., 367
(UNDP)	Whiteside, A., 38
Unemployment assistance, Germany	Widows remarriage, 292–293, 297–298
the Hartz Reforms, 144–146	Wilson, S.M., 5
long-term, 145	Wise, S., 347, 349
United Nations Department of Economic and Social	Wolf, A.C., 140, 143
Affairs (UNDESA), 5	Women and children, CARICOM
United Nations Development Program (UNDP), 220	and families, 409
Universal Child Care Benefit (UCCB), 362, 366	family issues, Caribbean, 412
Universal family policy, 308, 315	poverty, 410
Omversar ranning poncy, 300, 313	poverty, 410

Women's movement, 114	Work-life balance, Iceland, 110
Work and family balance	Work time policies, 310
Australia	
arrangements, 341	
child care, 341–342	X
job sectors, 341	Xia, Y.R., 8
tax policies implementation, 341	
workforce participation and capacity, 341	
Commonwealth Caribbean, 413	Y
Work, family	Yasumoto, S., 8
child education, 466	
conciliation mechanisms, 469, 470	
leave entitlement, 466	${f Z}$
Workforce	Zakharov, S., 225
health and welfare professionals, 339	Zimmer, A., 140, 143
participation and capacity, 341	Zimmerman, S.L., 257, 409, 416, 417