Men’s participation in unpaid care

A REVIEW OF THE LITERATURE
MEN’S PARTICIPATION IN UNPAID CARE

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ACKNOWLEDGEMENT

Prepared for the Department of Labour and the Ministry of Women’s Affairs by Dr Lindy Fursman and Dr Paul Callister

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EXECUTIVE SUMMARY

This paper summarises the results of a comprehensive literature review examining the barriers and supports for men’s greater participation in unpaid care.

**Men and care: the current situation and the impacts of increased participation**

Men – in a variety of ways and in a variety of situations – are involved in providing unpaid care. Some undertake a considerable amount of care, some relatively little. However, on average, men spend significantly less time in unpaid caring work and significantly more time in paid work than do women. While the amount of time men spend caring for children has risen dramatically in the last 40 years, women have also increased the amount of time they spend caring for children, and as such, the average difference between the time men and women spend in care has not changed significantly. Women still spend 2–3 times as much time caring for children and are more likely to undertake routine physical care tasks.

Most of the literature examining men as carers is focused on the care men provide as parents. The literature on the care of elderly people, the disabled or those in poor health focuses on female carers. Literature specifically on men providing care to other family members or friends, including for their spouses and parents, is significantly more limited and is often clinically based or comprised of smaller qualitative studies that focus on more micro-level issues, such as the specific care tasks that men undertake or the ways the division of care is negotiated between male and female siblings.

Men are in a diversity of parenting situations, including a significant proportion of fathers who do not live full-time with their children. However, across a variety of family types, fathers’ participation in care has been linked to significant gains in wellbeing for children, including positive cognitive, psychological and social outcomes. A number of studies have found that these benefits remain even after influences such as income, maternal involvement and child health are controlled for.

However, a significant body of literature has found that, when men are involved in the care of children, they tend to do so in a secondary role. The literature suggests that men are more limited in their opportunities to experience providing independent care to their young children. Men’s time with children is most often mediated by the presence of women, with some studies estimating that mothers are present for more than 90 per cent of the time fathers are with their children. Some researchers note that this may affect the ability of men to form independent bonds with their children, with this having implications for the quality of father-child interactions following marital dissolution.

Most men who are providing care to someone other than a child are caring for their spouses. Because of gender differences in longevity, men above the age of
75 are more likely than women of that age to be caring for an ill or disabled person in their own household, an experience that the literature notes is significantly different from the care provided within other relationships. Research indicates that the care men provide to their parents or other relatives is mediated by the care provided by the women around them, especially their wives and sisters.

Participation in unpaid care and in the paid labour force are mutually interdependent for both men and women, with the two facets of work impacting on each other in a number of ways. Participation in paid work limits the amount of time that is available for unpaid care. A more equal distribution of paid work and unpaid work, including care, by gender may contribute to reducing gender inequalities in employment and earnings outcomes. In order to meet care responsibilities particularly associated with children, many women scale back their involvement in paid work, either by working part-time, accepting a less demanding position or exiting the workforce. Greater sharing of unpaid care by men may allow women to avoid this scaling back and thus prevent the potential weakening of women’s human capital and skills, as well as maintaining family income and overall lifetime earnings. In turn, this could have positive implications for the economy at a time when population ageing has amplified the need for the participation in paid work of those of working age. As women increasingly hold higher qualifications than men, greater participation in paid work by women may result in increased productivity, as well as avoiding an underutilisation of women’s skills and a lesser return, both public and private, from the investment these represent.

Greater participation by women in paid work potentially allows men to increase their participation in unpaid care work. When women significantly alter their work patterns to accommodate care responsibilities, men may face greater pressure to support their families financially, with this having the potential to limit their subsequent choices around employment, education and their availability and ability to care for dependents in the future.

In addition to increasing women’s labour force participation, there is evidence of other related economic benefits to increasing men’s participation in care, including a reduction in women’s poverty rates. The literature also suggests that improvements in the work-life balance and wellbeing of both men and women may also result from men’s greater participation in care.

**Barriers to greater participation**

The need for women to manage pregnancy, recover from childbirth and establish breastfeeding means that men often begin parenthood in a secondary role. However, research indicates that the impact of biology in limiting men’s care for their newborn children may establish a gendered pattern of care that continues after biological imperatives have receded and thus may impact on men’s caring for children throughout their dependent years. The arrival of the first child often leads to a more traditional sharing of tasks in the household, with the gendered division of labour following birth often resulting in women’s continued greater responsibility for childcare and men’s lesser participation in care across the life
course. These differences also flow through to variations in labour force participation by gender.

A significant body of literature indicates that long hours in paid work are a major barrier inhibiting equality between men and women in both unpaid care and labour force participation. Long hours of work lessen the availability of men to engage in care, and research indicates that men who work very long hours are less likely to engage in a variety of specific care activities.

Workplace culture also remains a major barrier to men’s participation in unpaid care work, with this highlighted in both New Zealand research and the international literature. Workplace culture and employers’ attitudes are cited as barriers to taking up entitlements that aim to encourage men’s greater participation in care, including in the Nordic countries, which are commonly held up as the pinnacle in gender equality with regard to the care of children.

Perceptions of men as peripheral to care and differences in labour force participation patterns by gender contribute to gendered occupational segregation. When men are viewed as secondary to care, professions that are dominated by men are not obliged to offer working arrangements that facilitate the combining of paid work and care. Because of this, women may choose to work in professions, or specialities within professions, that allow them to meet their care responsibilities, with a resulting clustering of women in professions such as teaching and nursing, and the continuation of a reinforcing cycle of occupational segregation and gendered pay differences. The gender pay gap also acts as a barrier to men’s participation in care by resulting in unequal rewards from paid work for men and women and thus influencing the division of paid and unpaid work between couples.

Gendered government policies can act as a barrier to men’s greater participation in care. For example, parental leave policies that are contingent on mothers meeting eligibility criteria, or rely on mothers’ willingness to transfer leave to their partners, mean that some fathers are unable to access leave to care for children.

Particular obstacles to participating in care are faced by fathers who do not live in the same household as the mother(s) of their children, with most of these fathers finding themselves in a secondary carer role. While some separating couples do negotiate equitable caring arrangements, post-separation custody decisions and other applications of family law such as supervised access may also impact on the ability of men to participate in the care of their children. In addition, the justice system, particularly imprisonment, may also have a significant impact on men’s caregiving activities, both directly through time away from children and indirectly through the impact of imprisonment on lifetime earnings, reductions of which are correlated with men being less likely to live in couple families raising children.

Women have some influence over the time men spend in the care of their children, because mothers are partners and sometimes facilitators in the father-child relationship, both in intact relationships and in separated or divorced
families. As noted, women’s preferences about paid and unpaid work may also impact on the need for men to support their families financially, with this having implications for men’s hours in paid work and availability to undertake care.

Gendered ideologies about appropriate roles for men and women are also a significant barrier to men’s greater participation in care. Gendered assumptions and expectations of men and women shape what constitutes appropriate behaviour, such as perceiving women as the ‘nurturers’ in families and men as peripheral to the nurturer role. This flows through to non-parental care, with research showing that family members, especially those of older generations, act according to strong gender norms and thus discourage sons from performing traditionally female caring tasks.

Research indicates that norms about fathers can act as a barrier to men’s participation in the care of their children. A study in New Zealand reported beliefs amongst new fathers that there are pervasive negative stereotypes regarding fathers and fathering, with reports of domestic violence reinforcing these misperceptions. Norms about the roles of fathers may also act as barriers to men’s greater participation in care, with some research finding that fathers tend to be viewed as a support person for their partner, rather than as a parent in their own right.

There are numerous other barriers to men’s increased participation in care, many of which may appear insignificant or minor in themselves, but send out negative messages about men as carers. These factors work in the same direction to undermine the validity of men as carers and thus together form a significant set of mutually reinforcing barriers to men’s greater participation in care.

Supports for men’s greater participation in care

Policy level initiatives to support the greater participation of men in unpaid care have focused on parental leave policies, in part, because the birth of a child is a critical juncture where gendered inequalities in the division of paid and unpaid work, including care, become of major importance.

The Nordic countries stand out for their generosity in this policy area. Cross-national examinations of their policies and those of other European countries have showed a positive correlation between the ‘father-friendliness’ of leave provisions and the amount of time fathers spend caring for their children. In addition, a number of studies have shown that men who take parental leave are more likely than men who do not take leave to engage in care for children after the leave period.

However, evaluations of the impacts of parental leave policies on the distribution of unpaid care work are not overwhelmingly promising, showing that, while men take up leave that is ring-fenced solely for their use, women still use the vast majority of leave. This suggests that, while having many other benefits, parental leave policies that are able to be allocated between partners at their discretion, are compensated at a low rate and are relatively long in duration are a questionable tool for advancing greater participation of men in care activities and,
in fact, may undermine gender equality. While offering a range of positive impacts, policies that do not mandate the equal sharing of leave between men and women can act to reinforce women’s lesser participation in the labour force and cement gendered and traditional inequalities in the patterns of paid and unpaid work.

Evaluations of leave entitlements aimed at supporting the greater participation of men in care work have, however, highlighted the role of government policy in changing attitudes both generally and within workplaces in particular. Where implemented, such policies establish a norm validating men’s participation in care and sanction as legitimate leave from work to care for children. Some researchers note that granting entitlements to leave for care purposes reduces the risks associated with the use of such leave and thus allows fathers to circumvent workplace cultures that deny men’s family and care responsibilities. Policy initiatives limiting working hours have a similar effect.

Family-friendly working arrangements are a second common support that facilitates men’s participation in care. Nevertheless, as long as these tend to be taken up mostly by women, such arrangements can also act to reinforce women’s primary status as carers and secondary status in the labour market by lowering their labour market experience and time devoted to paid work. To the extent that these arrangements are gender neutral, men are also permitted to utilise them to assist with care responsibilities. However, labour market segregation (that, in turn, is perpetuated by women self-selecting into occupations where family-friendly working conditions are available) means that men are likely to be in better paying jobs characterised by work cultures that are unsympathetic to men’s care responsibilities, meaning that men may feel less able to use such arrangements even when they are available.

**Implications for New Zealand and conclusions**

A key issue that arises when considering the literature on caring is the overall goal for men’s participation in care. Supports for increasing such participation are dependent on whether the ultimate goal is equal opportunity or equal outcomes for men’s care, or whether an increase in such care, independent of gender equality, is the desired goal.

Overall, the survey of the literature shows that there are a significant number of barriers to men’s greater participation in care. These include policy settings that reinforce traditional divisions of paid and unpaid work, cultural norms and ideologies about appropriate roles for men and women, workplace cultures and practices, and the applications of family and criminal law, all of which undermine the ability, and possibly desires, of men to participate in care work. There are also a vast number of more subtle and minor barriers, which together form a mutually reinforcing set of conditions that act to impede men’s participation in unpaid care.

To encourage men to participate more in care, a key focus of governments internationally has been on parental leave, with the Nordic countries implementing the most extensive provisions. The history of the progressive
implementation of leave schemes to support men’s participation in unpaid care shows that there was initially significant resistance in some Nordic countries to the notion of the ‘daddy months’, but that the implementation of the policy changed attitudes around the division of unpaid work.

The evaluations show that ring-fenced leave entitlements for men increase their participation in care, even when the leave period is over. However, even where leave entitlements are the most generous, when the division of such entitlements is left to individual couples, men take up only their sole entitlement to leave, and thus the overall division of care work remains largely unchanged. New Zealand’s parental leave evaluation found a similar pattern, with women using the vast majority of entitlements, and both men and women reporting that it was more important for mothers to use the available leave.

The literature suggests that there is no silver bullet that will address men’s lesser participation in care and that, even in the Nordic countries, entrenched gendered patterns of care remain. However, the literature also suggests efforts to remove such barriers to men’s participation in care could reap rewards.

The literature also indicates that there is a role for policy in setting norms about men’s involvement in care. A policy package that includes ring-fenced leave entitlements for men and incentives for sharing leave may further this change. However, the literature highlights the need for recognition of competing policy priorities, with the result that family-friendly legislation may further reinforce barriers to the participation of men in unpaid care.
1. INTRODUCTION

Men – in a variety of ways and in a variety of situations – are involved in providing unpaid care. Some men undertake a considerable amount of care, others relatively little. However, on average, men spend significantly less time in unpaid care than do women. Conversely, on average, men spend significantly more time on paid work than women.

This report outlines the results of a review of recent literature about the impacts of men’s current levels of participation in unpaid care, the barriers impeding greater participation by men in unpaid care and the range of supports that may assist men to become more involved in care.¹

Much of the paper discusses men as carers of their children, rather than as carers of other family members or friends. This is because the bulk of the literature examining men as carers is focused on care as parents. The literature on the care of elderly people, the disabled or those in poor health focuses almost entirely on female carers, with the literature specifically on men providing care to other family members or friends, including for their spouses and parents, being significantly more limited. What research there is, is often either clinically based or comprised of smaller qualitative studies that focus on more micro-level issues, such as the specific care tasks that men undertake or the ways the division of care is negotiated between male and female siblings. As such, while this paper discusses literature that is relevant to all kinds of care carried out by men and includes sections specifically on issues for men as non-parental carers, in many areas, the evidence available is solely based on parenting. This paper reflects that in the focus and weighting of its discussion.

As an introduction and to provide context to this paper, this section very briefly considers language and culture as two of the factors that shape how we think about care. We do not specifically address how biology might affect the overall division of labour between women and men. However, a number of studies mention biology-based influences on some caring roles, and where appropriate, we include comments on these. In particular, pregnancy, childbirth and breastfeeding are identified as influencing the gender division of labour in the early months of a child’s life, with this discussed in a later section.

This introductory section also outlines the amounts and kinds of care that men and women are involved in, as well as highlighting the related issues of the outsourcing of care and the participation of men in paid care.

Section 2 of the paper lays out some of the consequences of the current level of care by men, with much of the evidence in this area presented within a framework of potential impacts of men increasing their levels of care. This avoids the use of a deficit model or the attribution of blame.

¹ Our methodology for selecting relevant literature is set out in Appendix 1.
Section 3 of the paper describes a series of barriers that impede men from taking a greater role in unpaid care. While we work through a list of barriers, we are aware that not all of them are of equal importance. This discussion is then followed by a fourth section that describes some of the factors that research suggests may support men's greater participation in care. The paper concludes with some comments about the implications of these findings in the New Zealand context, as well as suggesting areas for further research.

1.1 Language frames the debate

In undertaking this analysis, we are very aware that debates around gender have often critiqued the language used in the discussions. Language, including our own in this paper, frames debates in a certain way. Language not only reflects ideas and social norms but also helps shape them and is thus important in shifting attitudes and behaviours. For example, in early feminist analysis, ‘history’ was seen as focusing on men’s lives and so concepts of ‘her-story’ evolved (for example, Sochen, 1974). This view that language matters continues. For example, Burnier (2006:861), when studying performance reports in workplaces, notes that:

\
\[a\]t the analytic level of the sentence, the figurative language, metaphors, and bridging assumptions privilege experiences and actions that are socially constructed as male and rely on traditional gender stereotypes about work, family, and government service use.

Much attention has been given to the elimination of gender-specific language that was considered biased against women. Hence, there were objections to the use of ‘he’ when it could mean ‘he or she’, and words such as ‘chairman’, ‘fireman’ and ‘actress’ were criticised for being gendered. Efforts to eliminate such language could be considered as an attempt to remove a bias in the language and, through this, help reduce barriers to women moving into these traditionally male roles.

Equally, language can also help frame agendas about male roles in families, including shaping public and official attitudes (Fairclough, 1995; Cobb and Ross, 1997; Considine, 2005; Curran, 2006). Biases can be introduced or reinforced through the use of particular language. This suggests some care about the use of a range of family-related terms such as ‘sole parent family’ (when there is another parent); ‘primary caregiver’ (which can easily be then seen as a sole caregiver); ‘absent parent’ (who can be very actively involved); ‘abuser’ and ‘victim’ (which denies the possibility of mutual abuse) and explicitly gendered terms (such as ‘deadbeat dad’).

It is not difficult to find examples where inaccurate, and often inappropriate, language is used in relation to fathers. Family types commonly known as ‘single parent’, ‘mother only’, ‘lone mother’, ‘sole father’ or, more in a US context, ‘fatherless’ are focal points in policy discussions, political debates, social science research and everyday conversation (Hill and Callister, 2006). Underlying these terms and the images they convey is the assumption, explicitly recognised or not, that children have but one reliable biological parent. In truth, most such children have not just one, but two living biological parents. One is the parent who lives with the children. The second parent lives in another household. Some children
see only the parent they live with, but some see both. Researchers and policy-makers rarely see the second parent and tend to label them absent, non-resident or non-custodial even though these terms can be misleading when children spend time with both parents.

There has also been some historical debate about how to ‘name’ fathers who fulfil non-traditional roles, particularly where the father is the main caregiver. The term ‘primary caregiver’ has been used at times. At other times, particularly within the popular media, but also within academic literature, terms such as ‘househusband’ or ‘role reversal family’ have been used when describing fathers as full-time caregivers. However, Nussbaum (1985), in an American study, argued that ‘househusband’ was inappropriate, in that it defines a person by the location of his work and as an attachment to his wife. At the same time, Nussbaum suggested that there were difficulties in not having an occupational label for men who are primary caregivers. In his own study, Nussbaum used the term ‘primary caretaker’. Pruett, also looking at American families, did not like the term ‘role reversal’, as he felt that this type of change represents an extremely complex collage of issues of identity, creativity and parental satisfaction for both men and women (Pruett, 1987). Harper (1980), in a study of Australian families, similarly rejected the term ‘role reversal’ for two reasons. Firstly, according to Harper, there is seldom a strict reversal of ‘traditional’ sex roles, and secondly, people in this family situation see the very existence of sex roles as questionable in the first place. She argued that these families, in general, saw the roles themselves as needing to be abandoned, rather than there being simply an exchange of who fills them (Harper, 1980). The difficulty in developing appropriate language in the face of social change was illustrated by a media article where the author, to avoid using the lengthy term ‘male primary caregiver’, used the initials MPC throughout the article (The Listener, 1993).

Where possible, we have tried to take care in the use of our own language, but at times, we are simply repeating terms used by other researchers.

**Terms used to describe care in this paper**

In this paper, we use the terms ‘care’, ‘unpaid care’ and ‘care work’ to describe the unpaid caring that is typically undertaken in the family setting or provided on an uncompensated basis to extended family and friends. While it would be simpler to use a single term to describe this, the literature uses all three terms, and thus we also refer to all three when reporting the results of the review.

When the discussion distinguishes between paid care (such as that provided by nurses or early childhood workers) and unpaid care, we use the terms ‘unpaid care work’ and ‘paid care work’. In contrast, ‘unpaid work’ is a broader term that includes both care and other unpaid domestic tasks such as housework.

**1.2 The role of culture**

In undertaking this analysis, it is clear that culture is a significant overarching factor that influences how men (and women) participate in both unpaid care and paid work (and indeed, in all aspects of life). Men and women are immersed in cultural milieux that shape their attitudes and beliefs and their perceptions of
both what is possible and what is appropriate. It is within their particular cultural settings that men and women make ‘choices’ about how to balance care responsibilities with paid work and other aspects in life.

Isolating the impact of culture is extremely complex and beyond the scope of this analysis. However, it is essential that the role of culture in shaping and reinforcing the gendered divisions of care and choices about who does such care is kept in mind when considering the issue of supporting men to increase participation in care.

There are significant problems with separating the effects of culture and practice. One example is apparent in the use of flexible work arrangements. In a broader culture (and workplace culture) that prioritises men as earners and women as carers, men will be less likely than women to take up gender-neutral family-friendly working options available to them. Ideologies of the ideal worker as one who is unencumbered by care responsibilities reinforce this pattern of uptake of flexible work and augment the perception that men who use such arrangements are less committed to their work. Women, by contrast, are defined more as carers, and thus flexible work arrangements are more accessible to, and used by, them in greater proportions. While women may benefit from the use of such arrangements, they also disproportionately bear the costs of using such arrangements. This, in turn, serves to reinforce men’s and women’s different cultural roles, both in the cultures of individual workplaces and more broadly.

The complexity and reinforcing nature of culture makes discussion of the specific impacts of men’s participation in care difficult to ascertain; this must be kept in mind when interpreting the discussion in this paper. The role of culture as a barrier to men’s participation in care is also further considered below.

1.3 Men and care: the current picture

**Measuring overall time: men’s care and total work**

Participation in unpaid care and in the paid labour force are mutually interdependent for both men and women, with the two facets of work impacting on each other in a number of ways (a more detailed discussion of this is below). While a number of researchers (for example, Bianchi, Milkie, Sayer and Robinson, 2000; Bittman, England, Sayer, Folbre and Matheson et al, 2003; Craig, 2007) show that paid work and care for children is not a zero-sum proposition, it is clear that paid work limits the time available to undertake unpaid care; conversely, undertaking care limits the time available for paid work. As such, on one side of the ledger are the factors that impact on time spent in unpaid care; these factors, such as the division of care between spouses, in turn have a significant impact on the ability of women and men to engage in paid work. On the other side, factors that impact on how paid work is carried out, such as working hours and workplace cultures, have a significant flow-on effect to how much care men and women can undertake.

The discussion in this section focuses on the first side of the ledger, namely that the current division of care undertaken by men and women has significant
implications for women’s labour force participation, in particular. The other side of
the ledger, namely the factors that affect how work is carried out, is considered in
Section 3 on barriers that impede men’s ability to increase their participation in
unpaid care.

**How many men are engaged in caring for others?**

Data from the 2006 New Zealand Census show that around a quarter of men
reported caring for a child in their own household, while 10 per cent reported
providing care for a child outside their household. Around 5 per cent of men are
providing care to someone who is ill or has a disability in their own household,
with similar numbers providing care of this kind to someone outside their
household. However, these data give no idea of how much time is devoted to
providing such care.

**Table 1: Numbers and proportions of men and women providing care for others,
Census 2006**

<table>
<thead>
<tr>
<th></th>
<th>Male (15 and over)</th>
<th>Female (15 and over)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looking after a child who is a</td>
<td>24.5%</td>
<td>32.0%</td>
</tr>
<tr>
<td>member of own household</td>
<td>372,858</td>
<td>525,057</td>
</tr>
<tr>
<td>Looking after a member of own</td>
<td>5.7%</td>
<td>8.2%</td>
</tr>
<tr>
<td>household who is ill or has a disability</td>
<td>86,430</td>
<td>134,799</td>
</tr>
<tr>
<td>Looking after a child who does not</td>
<td>10.2%</td>
<td>18.6%</td>
</tr>
<tr>
<td>live in own household</td>
<td>155,106</td>
<td>305,037</td>
</tr>
<tr>
<td>Helping someone who is ill or has a disability who does not live in own household</td>
<td>5.8%</td>
<td>10.4%</td>
</tr>
</tbody>
</table>

Source: 2006 Census of Population and Dwellings, Statistics NZ.

**Time spent in care**

While data from the 2006 Census show that fewer men than women are engaged
in providing care to others, data from the 1999 time use survey show that those
men who are providing care are spending less time doing so than women who are
providing care.\(^2\)

**Table 2: Time use data 1999, average minutes per day**

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household work</td>
<td>119</td>
<td>175</td>
</tr>
<tr>
<td>Caregiving for household members</td>
<td>75</td>
<td>128</td>
</tr>
</tbody>
</table>


Data from the time use survey also show differences by age and ethnicity in the
amount of care undertaken. Figure 1 shows that the 25–44 age group, the peak
time of child-bearing and child-rearing, is the stage in the life-cycle when the
most time is spent in caring for others, with this the case for both men and

\(^2\) Fieldwork for the next time use survey is being conducted in late 2009, and results will be available in 2011.
women. The age data also show that, from a peak in the 25–34 age group, women’s time caring goes down, while the male peak is at 35–44. This may reflect that men spend more time caring for older children than they do for younger ones, as well as the higher age for men when first children are born. Another related factor is that children are more likely to live with separated fathers as they move into their teenage years (Davey, 1999). Further, the graph shows that there is broad parity between the genders in time spent caring for others following the child-bearing and rearing years. These data suggest that looking at caring across a life-cycle and not just cross-sectionally is important.

**Figure 1: Time spent in care by age and gender**

![Bar graph showing average hours per day spent on caring for household members (primary activity) by sex and age.](image)

Source: Statistics New Zealand (2001)

Figure 2 shows that Māori women spent more time in caregiving tasks than non-Māori women, particularly with regard to physical care. Māori men spent slightly more time in physical care and travel associated with care, but slightly less time playing with children.

**Figure 2: Time spent in care by age, gender and ethnicity**

![Bar graph showing average minutes per day spent on caregiving tasks in the household (primary activity) by sex and ethnicity – adjusted for age.](image)
However, differences by ethnicity should be treated with caution. While the international literature indicates that variables such as length of parental leave and time spent in care differ by ethnicity (for example, Smeaton, 2006), ethnicity is conflated with other variables such as income and occupation, as well as factors as broad as whether a respondent is a recent immigrant who may be bringing with them attitudes of the source country. As such, it is extremely difficult to unpick the true causality of relationships where ethnicity is correlated with patterns of care. This is exacerbated for the division of unpaid care, as decisions about who undertakes this work are made by couples, rather than by individuals. For example, as around 50 per cent of Māori have non-Māori partners (Callister, 2004a), it is difficult to get a true sense of the degree to which participation in unpaid care varies by ethnicity. Because of these difficulties, this paper does not consider in detail the impact of ethnicity on the division of care.

Across the total population, broad time use data from New Zealand show that men’s and women’s total hours of work are very similar, but as in other industrialised countries, men undertake more paid work and women more unpaid work (Gershuny, 2000; Statistics New Zealand, 2000; Burda, Hamermesh and Weil, 2007). The sum of market and household work by men and women tends to be equal at a point in time. However, the total amount of work can change over time, and the total amount of work differs across countries.

Not surprisingly, New Zealand data show some trade-offs between paid and unpaid work by both men and women. For example, women who work full-time undertake, on average, less unpaid work than those working part-time, while employed women undertake less unpaid work overall than those not in paid work. When the New Zealand sample is restricted to partnered men and women with a child under 5, Stevens (2002) has demonstrated that total hours of work are higher for parents of young children than for men and women without children.3 Steven’s data also show that the ratio of total hours of women’s to men’s work was 0.96; that is, on average, partnered men with a child under 5 work longer total (paid and unpaid) hours than partnered women. The OECD (2004) has also produced a ratio of total paid and unpaid time of women to men for couple families with a child under 6 years of age. This ratio again shows that, on average, men in New Zealand work longer total hours than women. The New Zealand ratio was 0.7, compared with ratios of 1.2 in Portugal and 1.0 in Switzerland.4,5 These broad level data suggest that, if New Zealand fathers continue to work long hours of paid work, but are also now expected to be ‘good fathers’, both in terms of providing ‘quality’ and ‘quantity’ time for their children,

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3 These data are calculated not by using couples as the unit of analysis but according to individuals who live in couples.
4 The OECD did not calculate an average OECD ratio, as not all countries deposited time use data. In addition, there were compatibility problems with the data that were deposited that prevented the averaging of the figures.
5 It is not clear why the OECD ratio and the ratio calculated by Stevens are so different.
then total hours of work are likely to be high. The long-term time use data show that paternal care has been growing in a range of industrialised countries (for example, Bianchi, 2000; Gershuny, 2000; Yeung, Sandberg, Davis-Kean and Hofferth, 2001).

However, these type of data are for all partnered men and women, not just couples where both are employed. Thus they include ‘traditional’ couples where the father works full-time and the mother stays at home. International time use data restricted to couples where both partners work full-time suggest that there is a significant double burden for women in some countries but not in others. Table 3 shows a selection of ratios of women’s to men’s total work time (paid and unpaid) in couple households with a child under 5 years where both partners work full-time. New Zealand is not included in these data. The total work time for couples in Sweden is nearly equal. In the other countries shown, women working full-time have a higher total workload than men. When the data are restricted to childcare time, then the ratios are strongly tipped towards women undertaking a much higher proportion of the childcare, especially in Italy.

Table 3: Ratio of women’s to men’s total work time (paid and unpaid) in couple households with a child under 5 years and where the women work full-time

<table>
<thead>
<tr>
<th></th>
<th>Ratio of total work time (paid and unpaid)</th>
<th>Ratio of mothers’ to fathers’ childcare time</th>
</tr>
</thead>
<tbody>
<tr>
<td>US (1995)</td>
<td>1.05</td>
<td>1.9</td>
</tr>
<tr>
<td>UK (1999)</td>
<td>1.16</td>
<td>-</td>
</tr>
<tr>
<td>Sweden (1991)</td>
<td>0.99</td>
<td>1.9</td>
</tr>
<tr>
<td>Italy (1989)</td>
<td>1.26</td>
<td>2.7</td>
</tr>
</tbody>
</table>


The more narrow measure of childcare indicates that measuring unpaid work as a whole conflates activities such as shopping, housecleaning and childcare, although it is likely that some activities are linked. This includes that some of these activities can be undertaken together (for example, shopping while caring for children).

Examination of the measures used in the various time use surveys also highlights the significant methodological difficulties associated with comparing New Zealand’s time use data with those of other countries. Some studies collect data on time spent in unpaid work, some focus on ‘care’ and still others separate out the kinds of care tasks undertaken. Much of the international time use data have been standardised through the Luxembourg Income Survey, but as New Zealand does not make available data for this purpose, international comparisons using identical measures can not be made.

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6 Time use data also show that some paid and unpaid work is carried out simultaneously, for example working on paid work at home while caring for children (Callister and Singley, 2004).

7 The total time spent in paid and unpaid work varies considerably between countries, suggesting some differences in time use methodologies.
**Men not in the labour force looking after children**

Although a long-term view of the ‘family’ shows that the model of a full-time mother at home looking after children was not the norm for much of history, it was the dominant child-rearing pattern in much of the 20th century (Coontz, 2005). Amongst some commentators, there was some expectation that, in a move to gender equity, we would see more fathers full-time looking after children. As shown in Figure 3, New Zealand Household Labour Force data show that the number of men who are not in the labour force and state that their main activity is looking after children has increased from just over 6,000, reached a peak of around 18,000 in the early 2000s and, in June 2008, was around 14,000. It is not clear what drove the growth and then the subsequent flattening of the numbers.

**Figure 3: Men not in the labour force, looking after children**

![Graph showing the number of men not in the labour force looking after children over time.](source: Household Labour Force Survey (HLFS)).

The total number of men not in the labour force increased over this period, so as a percentage of men not in the labour force, men looking after children has increased only from 2.6 per cent 1986 to reach a peak of just under 5 per cent in the early 2000s before slipping back to 3.6 per cent by June 2008.

As a comparison, the number of women not in the labour force looking after children full-time at home rose from 167,000 in March 1986 to reach a peak of 180,000 by the late 1980s, before dropping back to 139,000 by September 2008. In March 1986, for every male not in the labour force looking after children, there were 27 females, but by 2008, this had declined to 10 females to each male.

Census data indicate that the model of a father who is full-time at home and a mother who is in paid work has increased but is not a significant family type. In 1986, for couples with a child under 5, 0.9 per cent of couples had this arrangement. By 2001, this had increased to 3.4 per cent. At the same time, the model of the full-time mother at home decreased from 59 per cent to reach 38
per cent in 2001. The largest change in family and work arrangement was an increase in dual job couples. As shown in Figure 4, the Household Labour Force data indicate the strong growth in dual job couples since 1986 through to June 2008.

**Figure 4: Dual job couples 1986–2008, by number of children**

![Figure 4: Dual job couples 1986–2008, by number of children](image)


Equally there has only been a small rise in sole fathers not in paid work. Again, for couples with a child under 5, 3.5 per cent of sole parents fitted this model, rising to 4.6 per cent by 2001.

The HLFS and Census data together indicate that, despite the growth in non-employment of prime-aged men and the growth of men looking after children, overall, fewer men than might have been expected have left the labour force to become full-time caregivers. There are a number of possible reasons why this could be so:

- A high proportion of men who are not in paid work may not be fathers.
- Many fathers who are not in paid work are not living with their children.
- Fathers in two parent families who are out of work may tend to be with partners who are also out of work and so gender roles in the home are not challenged.
- Many of the fathers who are now seen spending more time with their children are unemployed and actively looking for work, working part-time or working full-time and caring for their children in out of work hours.

Until research is carried out in this area it will not be possible to actually determine the reasons.
1.4 Perspectives on men as parents

Changes in the amount of time spent caring

Over the past decades, there have been some major shifts in the time men and women spend doing domestic labour (Bianchi et al, 2000). Research in the US shows that, between 1965 and 2003, the average amount of time married employed fathers spent on unpaid domestic work increased by nearly 6 hours per week (Hook, 2006), while the time women spent on such work declined. As such, in many countries, including the US, the observed increase in men’s share of domestic tasks over the past 40 years has resulted in part from women’s reduction in their own housework (Bianchi et al, 2000.)

As noted, these analyses tend to group care activities with housework and other forms of unpaid work. When time caring for children is isolated from these other activities, it is apparent that, while there is a trend towards fathers spending more time with children, mothers are also doing more, so the average difference between men’s and women’s time caring for children is barely affected (Baxter, 2002.) Women still spend 2–3 times as much time caring for children as men (Craig, 2006).

The long-term time use data show that paternal care has been growing in a range of industrialised countries (for example, Bianchi, 2000; Gershuny, 2000; Yeung et al, 2001). However, Gregory and Milner (2007) argue that the increases in time fathers spend with children are not constant across fathers, and while overall paternal involvement appears to be increasing, behaviour is polarised between fathers who are spending more time caring for their children and those who, because of divorce and separation, are reducing contact.

Research suggests that women may be less willing to reduce their time with children than their time doing other household tasks (Craig, 2006). In the US, Bianchi et al (2000) note that, while, in the past, the time that non-employed mothers spent with children was reduced by the demands of unpaid family work and domestic chores, employed mothers now try to find new ways to maximise time with children. For example, in all the years studied, employed mothers undertook less housework than non-employed mothers, although total hours of housework were also declining among both groups. Similarly, using a large sample from the Australian Bureau of Statistics time use survey, Craig (2007) found that employed mothers spent less time than other mothers in housework, child-free leisure and personal care, as well as rescheduling activities to earlier or later in the day to accommodate time with children.

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8 This reduction in housework hours can occur in a variety of ways. Standards may be lowered or housework time may be ‘intensified’; that is, more work is carried out in less time. For example, dishwashers or clothes driers may speed up housework, or individuals may simply work harder. For those who can afford it, ‘professionals’ are increasingly cleaning houses, while other forms of household work, such as food preparation, are increasingly being ‘outsourced’. This outsourcing in relation to both men’s and women’s childcare time is explored in more depth in another section.
Differences in parenting tasks between men and women

In addition to examining the time men and women spend in care work, research suggests that it is also important to examine the kind of care men and women provide. Craig (2006) notes that a number of studies have shown that women spend a greater proportion of the total care time in physical care activities than men, with fathers more likely to engage in play, talking, educational and recreational activities. Similarly, Bittman, Hoffman and Thompson (2004) found that fathers spend the bulk of their childcare time engaging in the more ‘valuable’ activities of talking, playing and reading, while mothers spent proportionately more time performing physical care tasks. Fathers are also engaged in activities that are more time-flexible, while women undertake the aspects of care that are more time-critical and time-constraining, with this having consequences for gender equity and women’s labour force participation (Craig, 2006).

Typologies of care by fathers

Increasingly, the literature is going beyond broad examinations of unpaid work, and even childcare, to looking at how specific activities are undertaken by men and women and under what circumstances the amount of work changes. This includes even defining what is ‘care’.

The issue of what is care by fathers has been explored by Lamb (1987), who outlined three groupings for a father’s involvement. Interaction refers to the father’s direct contact with his child through care-taking and shared activities. Availability is a related concept that concerns the father’s potential availability for interaction, by virtue of being present or accessible to the child whether or not direct interaction is occurring. Responsibility refers to the role the father takes in ascertaining that the child is taken care of and arranging for resources to be available for babysitters, choosing schools, making appointments with the doctor and seeing that the child is taken to them, determining when the child needs new clothes and so on.

Broad concepts of ‘quality’ versus ‘quantity’ time are now also being discussed in the literature, adding further complexity to the measures of care. This idea has also been raised by Bianchi et al (2000), who suggested that, in the past, children did not have the same level of interaction with parents, for example, often not being actively monitored.

A second typology of care is provided in Brandth and Kvande (2003), who describe two types of caring by fathers in relation to parental leave. One is ‘home alone’ and the other is ‘home but not alone’. The ‘home but not alone’ fathers were involved in caring for their children but were doing so alongside their partner. Often these fathers were in support roles in relation to the mother’s care and were not taking full responsibility for the care of the child. Brandth and Kvande suggest that, for men, it is ‘quantity’ time, on their own, that often mattered in terms of fathers developing close relationships with the child and in understanding their needs. In addition, when fathers spent long periods alone with the child, then this was no longer just ‘fun’ time (perhaps a component of quality time) but involved a range of care and non-care activities including other forms of domestic work.
Adding even further complexity to defining and measuring care by fathers, Christiansen and Palkovitz (2001) argue that ‘providing’ is a form of paternal involvement not readily acknowledged in the modern fatherhood literature. They suggest that providing is often overlooked because it is taken for granted, it can hold negative connotations (for example, having the control over family finances) and can be inadequately conceptualised. They suggest, as an example, that paying for a music lesson can be as important ‘caring’ as actually taking the child to the lesson.

O’Brien (2004) also notes that financial provision is rarely conceptualised as a form of care (with the exception perhaps being separated fathers who pay child support\(^9\)). She argues that:

…the manner in which parents collectively provide material support, for instance, the extent to which it is organised in a way that promotes children’s emotional security and wellbeing, should be included in a ‘positive care package’ (Ibid:12).

Furthermore, she asks:

Engaged, sensitive care from both parents may be optimal, but at what point does a reduction in the time available, for example, to listen and spend time with children, outweigh the financial advantage gained through hours spent in employment? (Ibid).

Similarly, Bianchi, Robinson, and Milkie (2006:12), commenting on fatherhood in the United States, noted that men “also see their paid work as a powerful way to become more involved with their children. Paid work hours ‘count’ as good parenting for them”. They argue that:

…this pushes men to work more, not fewer, hours outside the home when they first become fathers. To the extent that providing is the essence of good parenting for men, and to the extent this has not changed as the ‘ideal’ for them, it is very difficult to cut back on one’s role as a provider and still be a ‘good father’ (Ibid:13).

In line with this, Sarkadi, Kristiansson, Oberklaid and Bremberg (2008) suggest that the ideal father model has gone through a number of changes over time. They argue that an early ideal was father as moral teacher and disciplinarian, then a breadwinner, followed by a gender-role model and ‘buddy’, finally moving to a model of a nurturing co-parenting parent. These changes in model are set against a growth in the diversity of family types, including sole father and sole mother households, same-sex families, ‘blended’ families with one or more non-biological parent, as well as adoptee families and families where children have been conceived using donated sperm. Some of these family types create structural challenges to the ‘nurturing, co-parenting parent’ model.

\(^9\) In this context, some separated fathers have argued that, if they are paying child support, this should ensure some access to their children.
Research has also indicated that changes in what it means to be a good father can be problematic for men. O’Brien (2004:25) argues that the current model of the ‘good father’ means that:

...earning is not automatically construed as caring, which can cause confusion and frustration for men, particularly those with a cultural tradition of the breadwinner father. Fathers who are constrained by economic considerations or custom and practice to work long weekly hours can feel disappointed in missing out on time with their children and not having space for a satisfying family or personal life.

In addition, while overall there may be changing societal ideals, within any society, there will be individuals and families who continue to favour one model over another. For example, a number of studies have indicated that younger generations of people have tended to be early adopters of the gender equity model as an ideal (Nickel and Köcher, 1987a; Sandqvist, 1987; Shelton, 1992; Gendall and Russell, 1995), but a range of factors influence which model is supported, including religious beliefs.10

**Men as secondary parents**

Like the typology used by Brandth and Kvande (2003) described above, a number of researchers have argued that, when men are involved in the care of children, they tend to do so in a secondary role. The UK Equal Opportunities Commission (2003) found that most fathers play a support role within the family, often having minimal involvement with their children during the week but putting weekends aside for family life. As such, fathers played a secondary role rather than sharing the responsibilities of parenting with their partners. Similarly, Gregory and Milner (2007), citing an evaluation of French parental leave policy, found that fathers participated in childcare during leave but only took a support role (‘helping the mother’), and this did not continue after resuming work. Craig (2006) argued that men’s time with children is most often mediated by the presence of the mothers. She found that more than 90 per cent of the time fathers are with their children, the mother is there too, with this having implications for the ability of men to form and maintain independent bonds with their children. This also has consequences for the quality of father-child interactions following marital dissolution.

A New Zealand study by Mitchell and Chapman (2006) found that men’s role as a secondary parent was perpetuated by service providers assisting families before and after the birth of a child. While men in their study were committed to being a partner in the parenting relationship, other parties expected that men’s main role was that of a support person to the mother rather than as a parent in their own right. More discussion on the roles of service providers is below.

**1.5 Men as non-parental carers**

One of the most consistent findings across the literature is that men provide significantly less care than women. However, a number of authors argue that

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10 An example of a faith-based group supporting fathers, but generally within traditional role models, is the Promise Keepers – see [www.promisekeepers.org.nz/fathers.html](http://www.promisekeepers.org.nz/fathers.html).
narrow definitions of caregiving activities tend to underestimate men’s contributions to caregiving (Dentinger and Clarkberg, 2002; Davey, 2006). This is particularly the case with regard to the participation of men in care for individuals other than their children.

Davey (2006) contends that “the gender bias in research favours the types of support more traditionally offered by women, which heightens their apparent dominance as caregivers and minimises the support provided by sons and male relatives” (Davey, 2006:38). Evidence from the General Household Survey in the US suggests that substantially more men were involved in family caring than previously estimated and that a significant number were involved in providing intensive care for many hours per week (Milne and Hatzidimitriadou, 2003).

**Men caring for their spouses**

While women form the majority of carers, the numbers of men caring more than 20 hours a week is significant, particularly among older age groups (Renwick, 2008; Maher and Green, 2002; Work and Pensions Committee, 2008). Most of these are men caring for their spouses.

Research suggests that men who are caring for someone other than a child are more likely to be caring for their spouse than any other person. This is because men are less likely to care for other groups of vulnerable adults and because a larger proportion of older men than women are still married (while women are more likely to be widowed due to shorter life expectancies for men) (Milne and Hatzidimitriadou, 2003). Because, on average, men die younger and marry younger women, older men are therefore more likely to be still living with their spouse who may need care, than are women of the same age (Himmelweit and Land, 2007). Increasing longevity of men also means spouses are living together for longer in old age, caring for each other in their own household (Ibid).

In her report on older people within families, Davey (2006) shows that older men above the age of 75 are more likely than women to be caring for an ill or disabled person in their own household, indicating that “older men play a comparable or even larger part in caring for ill or disabled people within their own households. These are likely to be their wives or partners” (p21). Similarly, the Work and Pensions Committee in the UK (2008) note that, amongst the over 75 age group, men are more likely than women to be carers, and the person receiving care is predominantly a spouse or partner living in the same household. Campbell and Carroll (2007) also note that men provide between 30–50 per cent of all spousal care.

Men who are caring for their elderly spouse faced particular challenges, particularly around having to learn and undertake daily tasks that previously their wives would have done (Calasanti and Bowen, 2006). In addition, because, on average, men who become spouse carers do so at a greater age than their female counterparts and tend to care for longer periods as their wives are likely to be younger, they provide this care while they themselves are becoming more frail (Milne and Hatzidimitriadou, 2003).
As such, the caring that men (and women) undertake later in life is significantly different from the care provided by parents for their children. Hancock and Jarvis (1994) argue that the recipient of care, the duration of care and the objective burden of care all differ significantly from care earlier in the life course. In addition, factors such as the health problems of the person providing care and the presence of dementia mean that the experience may be more onerous and physically demanding than care provided earlier in life (Milne and Hatzidimitriadou, 2003). Other research suggests, however, that older husbands derive considerable social esteem from their caregiving activities, with this coming from several sources such as the admiration of other family members and wider society (Ribeiro, Paul and Nogueira, 2007).

**Men caring for their parents and other relatives**

Examining the participation of men in care for the elderly, Houde contends that “men have not been studied adequately because of limitations in sampling design, with too few men in many caregiving samples. Sons, in particular, have been inadequately sampled”. (Houde, 2002:634). However, while research suggests that men may be more likely to care for their spouses as they age than vice versa, there remains a significant gap between men and women in the care of parents by adult children (Campbell and Carroll, 2007).

Gerstel and Gallagher (2001) note that the presence of female siblings impacts on the likelihood of men providing care to parents, with men with sisters relying on them as primary caregivers and providing only limited sporadic care themselves. Their research also suggested that men in brother-only sibling sets draw on the labour of their wives to care for elderly parents, and as such, it is the characteristics of men’s families (rather than the characteristics of other factors, such as jobs) that affect the time men spent providing care. In their study of 94 couples, men whose wives spent more time in care were also more likely to spend more time in care themselves, with this being a significant predictor of both time spent in care and in particular caring tasks. As such, when wives spent more time helping their parents, men spent significantly more time helping their parents-in-law as well, and when wives spent more time helping their adult children, men also spent significantly more time helping their adult children.

A variety of studies have found that gender is a considerable factor shaping the kinds of care tasks that men undertake in the care of their parents. Campbell and Martin-Matthews (2003) found that strong gender norms discouraged sons from generally performing traditionally female tasks, even when daughters were not available. They argue that:

…family members, including older parents, adopt cultural assumptions about what constitutes gender-appropriate behaviour, such as perceiving women as the “nurturers” in families and men as peripheral to the nurturer role. The gendered nature of these socio-cultural assumptions and expectations might also help to explain sons’ reduced involvement in certain types of assistance, particularly personal care (Ibid:350).

As such, men’s involvement in providing care for a parent was influenced not just by the gendered context of caregiving in society, but also by the gendered nature
of individual caregiving tasks, such as undertaking home repair and yard work rather than personal care such as bathing (Ibid).

Hequembourg and Brallier (2005) similarly found that gender influenced the negotiation of caregiving tasks by brother and sister pairs. They classified men into ‘helper brothers’ and ‘co-provider brothers’ but found that even the co-providers relied on their sisters to coordinate the care of their parents.

Davey and Keeling’s (2004) study of city council employees caring for elderly relatives showed an interesting pattern with regard to the gender of the carer and the care recipient, as shown in Table 4, with participants in their research providing care almost solely to relatives of the same gender. They also found that there were clear differences between the strategies men and women used to combine work and care. Women were more likely to use annual leave, sick leave and leave without pay than men, while men were more likely to take time off in lieu or use flexitime (Ibid).

| Table 4: Relationship of care recipients to working carers, by gender of recipients |
|-----------------------------------|-----------------|---------------|
|                                   | Men  | Women  |
| Mother                            | 0    | 72    |
| Father                            | 32   | 0     |
| Mother-in-law                     | 0    | 14    |
| Father-in-law                     | 6    | 0     |
| Aunt                              | 0    | 8     |
| Uncle                             | 1    | 0     |
| Grandmother                       | 0    | 10    |
| Grandfather                       | 4    | 0     |
| Other family member               | 2    | 3     |
| Friend                            | 3    | 12    |
| **Total**                         | 48   | 120   |


While the literature suggests that the majority of men caring for relatives other than their own child are caring for their spouses, there are also a group of men caring for children, most likely their grandchildren. Table 5, from the 2006 Census, shows that one in ten men between the ages of 65 and 74 are providing care for a child in another household, while 5 per cent provide care for a child in their own household.

<table>
<thead>
<tr>
<th>Table 5: Percentage of older men providing care, 2006 Census data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td>Looking after a child</td>
</tr>
<tr>
<td>65–74</td>
</tr>
<tr>
<td>75–84</td>
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<tr>
<td>85 plus</td>
</tr>
<tr>
<td>Looking after an ill or disabled person</td>
</tr>
<tr>
<td>65–74</td>
</tr>
<tr>
<td>75–84</td>
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<tr>
<td>85 plus</td>
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</tbody>
</table>

Source: 2006 Census of Population and Dwellings, Statistics NZ.
1.6 Outsourcing and paid care

Care outside of the home

Historically, most households grew their own food, made their clothes, fashioned tools and cared for dependents, both young and old. However, changes in technology and the demise of the extended family, along with a general trend towards specialisation of work, mean that, in industrialised countries, most of these goods and services have been sourced outside the household. This includes much of the education of children. However, the extent of the outsourcing of care can vary between countries.

Time use data suggest that the amount of paid and unpaid work, including childcare, varies between countries. As an example, Freeman and Schettkat (2001) compared the total working hours (paid and unpaid) of women from Europe and the United States and showed that these are quite similar. However, their time series showed a major growth in women’s employment in the United States, with American women being at the high end internationally in terms of paid working hours. In contrast, in countries such as Germany, a considerable amount of women’s working time is spent in unpaid work. The authors suggested various reasons for this, but a main reason is that unpaid work such as food preparation, childcare and cleaning houses – work that is labour-intensive and cannot be replaced by technology – tends to be marketised or outsourced in the United States.

If gender equality in the workplace and, by inference, equality in unpaid work (including care) is a goal, then there are a number of possible models for achieving this (Callister, 2005). Some of these models do not have to be mutually exclusive. One that most of this paper focuses on is increasing the time fathers spend with their children and/or increasing other caregiving activities of men (and, at the same time, potentially increasing other unpaid work of men), but the other route is lowering the amount of unpaid work, including childcare and eldercare within households, then equalising whatever unpaid work remains.

Various components of unpaid work can be contracted out, so parents as well as other adults can be more focused on paid work and/or childcare and eldercare. One route involves primarily the outsourcing of non-caring housework. This involves hiring cleaners, gardeners, eating out and outsourcing many other housework jobs. This gives the potential to spend more time with children or other dependents. Another route involves the outsourcing of all unpaid work, including childcare and eldercare. Again, there are options within this. The care of children or older people can be in high-quality care settings – for children, generally in early childhood centres, schools or after-school care. Older people can be cared for in their homes or in residential care. In all these situations, the carers/teachers can be well trained and well regulated. Alternatively, poorly trained low-income workers can provide the care in these situations.

The other model is the low-income individualised outsourcing route. In Europe and the United States, relatively low-skilled immigrants from countries such as the Philippines, Turkey or Mexico are often among those who are employed by...
high-earning families to provide personalised family services including childcare and eldercare (Ehrenreich and Hochschild, 2002).

The decisions as to how to undertake household work will be being made by individuals but also by society. Policies about childcare/eldercare and migration, as well as attitudes of families and individuals, will all impact on how much unpaid work is carried out in society but also how the remaining unpaid work in the household is shared. Such decisions will also impact on gender segregation in paid work, given that most outsourced caregiving work is undertaken by women. Gender segregation may then feed back into what are seen as appropriate roles of men in unpaid work. The model of outsourcing will also impact on the pay rates for such work and both horizontal and vertical equity.

**Decline of men in paid caring roles in New Zealand**

Over the long term, the education of children, including very young children, has been moved outside the household; thus, the requirement has grown for a paid teaching staff. In New Zealand, as in many other industrialised countries, there has been a decline in the proportion of teachers who are male in early childhood education and care, as well as in both primary and secondary schools. These trends show up in official Ministry of Education data, but have also been commented on by researchers and by the media (for example, Livingstone, 2002; Farquhar, 2007). Various theories have been put forward as to why it might be important to have men in pre-tertiary teaching roles. One is around improving boys’ academic performance (Dee, 2006; Buchmann and DiPrete, 2006). However, another is that, as more boys are being raised by mothers only and/or lack good male role-models present in the family, then it is important to have caring male role-models within education. There is currently little strong evidence supporting or refuting this theory, however.

In terms of barriers to men taking these paid caring roles, a number of factors have been explored. These include that men can find better paying jobs elsewhere; attitudes and behaviours of parents, teachers, colleagues; working in a female-dominated environment; and beliefs about the roles of men and women and gender appropriate jobs. A further issue raised by a number of researchers in New Zealand is whether men feel that this caring role is unsafe for them given the potential for false accusations of abuse. The concerns about this appear to have reached a peak in the immediate period after the Peter Ellis case (Cushman, 2005). Whether barriers to men in these paid caring roles reflect wider barriers to men in taking unpaid caring roles is unclear, or whether this is an issue that is separate, but overall, it is likely that a concern about men looking after children in a paid role does reflect some concerns about men, or particular men, as carers.
2. IMPACTS OF MEN’S PARTICIPATION IN CARE

Men’s current level of participation in unpaid care has implications for women, children and the economy, as well as for men themselves. Historically, much of the discussion around men as carers has been framed according to a deficit model; that is, a significant body of research over the past decades has attributed a vast range of negative outcomes to poor fathering, a lack of care by fathers and ‘father absence.’ To avoid this tendency, this section presents the evidence of the impacts of current levels of care within the framework of the considerable and positive implications for individuals, their families and the broader economy that increasing men’s participation in unpaid care work may have.

2.1 Fathers’ care of children

Men are in a wide range of parenting situations, including a significant proportion of fathers who do not live full-time with their children (O’Brien, 2004). However, across a variety of family types, fathers’ participation in care has been linked to significant gains in wellbeing for children, including positive cognitive, psychological and social outcomes. A number of studies have found that these benefits remain even after influences such as income, maternal involvement and child health are controlled for.

The literature on the benefits to children of fathers caring for them has been through a number of phases, in part, reflecting the increasing complexity of parenting arrangements and, in part, reflecting a growing sophistication in thinking about what constitutes care. While early studies suggested there were positive gains for children from their fathers’ greater involvement, these were often based on small-scale cross-sectional surveys, case studies or for married couples and sometimes based simply on whether children lived with their biological fathers (for example, Pruett, 1987; Snarey, 1993; Parker and Parker, 1986). In a review article, Lees (2007) notes that most of the early studies had major limitations with methods, measures and conceptions of father involvement. Lees notes that the methods of most of the earlier studies were not robust enough to test if fathers contributed uniquely to the lives of their children or if the effects of father involvement were actually due to maternal involvement or were due to the father’s indirect contributions to the family. At a more extreme level, and related primarily to the growth of families being raised mainly by mothers, Blankenhorn (1995) drew on studies to suggest that simple ‘father absence’ was at the root of most major social problems. The Blankenhorn approach mirrored the now discredited theory of ‘maternal deprivation’ promoted by Bowlby in the 1950s11 (Bowlby, 1951).

The national and international literature, as well as personal interviews reported in the media, has suggested that involved and caring fathers do make important and positive contribution to lives of children and that, for many children (and

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11 Bowlby’s original study focused on orphan children, with a range of negative outcomes attributed to mother absence. However, the argument was then widened to include mothers who left children in the care of others in order to engage in paid work.
adults), the absence of a father in their lives has been, at the very least, the cause of much sadness (for example, Amato and Rivera, 1999; Braunias, 1999; McCann, 1999; Smith, 1990). Recent research suggests that fathers’ emotional investment in, attachment to and provision of resources for their children are all associated with positive “well-being, cognitive development and social competence of young children even after the effects of such potential significant confounds as family income, neonatal health, maternal involvement and paternal age are taken into account”. (Cabrera, Tamin-LeMonda, Bradley, Hofferth and Lamb, 2000:130). Research has also shown fathers’ involvement with children can have positive impacts on emotional regulation and control, academic achievement and enjoyment of school, control of delinquent behaviours, emotional distress and more “desirable educational, behavioural and emotional outcomes” (Ibid:130). Cabrera et al extended the positive impacts of father involvement to step-parents engaged in positive parenting; however, they note that little is known about the effects of non-resident fathers’ involvement on children’s development.

Two recent review articles (both themselves peer-reviewed) summarise findings from well-constructed studies, particularly longitudinal studies, about the benefits of father care for children. These are Lees (2007) and Sarkadi et al (2008). The studies indicate overall that fathers can make unique, direct contributions to their children’s wellbeing. Active and regular engagement with the child predicts a range of positive outcomes, although no specific form of engagement has been shown to yield better outcomes than another. These findings generally hold after controlling for a range of factors, including mothers’ involvement, children’s characteristics, children’s early behavioural problems, family income, socio-economic status over time, step-father involvement and family structure.

The Lees study suggests that just being present is not enough for fathers to be able to make a unique contribution. Fathers must have a close relationship with their children. Children whose fathers are involved and responsive are less likely to be anti-social, aggressive or delinquent. They are less likely to get into trouble at school, have emotional problems or have a negative self-image. Support and encouragement from fathers can have a positive influence on children’s attitudes to school and their educational achievement. Sarkadi et al (2008:157) come to a similar conclusion and suggest that:

It would seem that active and regular engagement in the child predicts a range of positive outcomes, although it is not possible to say exactly what constitutes fathers’ ‘effective’ type of engagement… what is especially promising with the effects of father engagement is that it seems to differentially influence desirable outcomes. Father engagement reduces the frequency of behavioural problems in boys and psychological problems in young women; it also enhances cognitive development while decreasing criminality and economic disadvantage in low SES families.

In line with these findings, Gruenert and Galligan (2007) found higher levels of wellbeing amongst young men who reported positive relationships with their fathers. They reported that close relationships with fathers were associated with higher levels of wellbeing, lower depression and social anxiety, a greater ability to
experience intimacy in non-verbal ways and closer relationships with male friends.

Both Lees and Sarkadi suggest that the pathways through which fathers can make contributions are still somewhat unclear. In addition, father involvement may make different contributions at different stages of life and in different dimensions. Lees concludes that, while the direct contributions made by father involvement remain relatively modest compared to the sum total of all the other factors affecting child wellbeing, they still are important. The overall findings of Sarkadi et al (2008:157) led them to suggest:

...public policy has the potential to serve as a facilitator or barrier to fathers spending time with their children during the crucial early years of development. Thus, even without knowing what exactly brings about the positive outcomes seen in this review, there is enough support to urge both professionals and policy-makers to improve circumstances for involved fathering.

In addition, in both the historic and current literature examining fathers’ ‘unique contribution’, there remains some tension around whether a father’s contribution to parenting might come primarily from being a ‘male role model’, from being a male model of nurturing behaviour or simply through being another caring adult. The male role model includes encouraging children to adopt behaviours that are seen as traditionally male, including risky activities such as tree climbing or being involved in active contact sports.12 Fathers are seen as needed to provide positive role models of ‘masculinity’, to teach boys to be ‘real men’ and not become ‘motherbound’ (for example, Biddulph, 1995). Similarly, Doherty, Kouneski and Erickson (1998:277) ask:

How much should [men] emulate the traditional nurturing activities of mothers, and how much should they represent a masculine role model to their children?

2.2 Participation in care and labour force participation

It is extremely difficult to isolate the specific impacts of the current levels of care by men, especially with regard to the impact on the labour market. Unpaid care and paid work are inextricably intertwined, each reinforcing and impacting each other, and affecting almost every aspect of both spheres for both men and women. The relationship between care and paid work is interconnected, and the causal direction is impossible to determine: do men engage in less care/more paid work because of the demands of men’s paid work and/or because their partners are doing the care, or do women engage in more care/less paid work because men don’t do much care? Or both? Do men engage more in paid work to allow their partners to fulfil preferences to stay home with children, or do women stay home with children because men prefer not to? Do women choose unpaid

12 There is an on-going, and sometimes gendered, debate about what activities are ‘hard work’ versus what are ‘fun’ type care and, related to this, what might actually be leisure versus unpaid care work. For example, reading a book to a child is often seen as unpaid work whereas taking a child to a football match can be seen as leisure. However, both can have learning opportunities within them and both can be valuable in terms of child wellbeing.
caring over paid working because the rewards of paid work are not enough to warrant outsourcing care, or are the rewards of work less for women because women tend to prioritise care demands over those of paid work? And how much of a role does culture or biology play? The complexity and lack of clear causal direction in these arguments means that many findings about the relationships between men’s and women’s engagement with care and paid work risk sounding tautological; as such, the reinforcing effect of the outcomes in each of the areas of paid and unpaid work need to be taken into account when these issues are considered.

**Women’s care load and labour force participation**

Gornick and Meyers (2008) note that, in the ‘rich’ countries of the world, women’s labour-force participation is approaching that of men. Figure 5 shows the rise in employment rates in a New Zealand context.\(^\text{13}\)

**Figure 5: Long-term employment rates for women and men aged 15 and older, 1956–2008**

\(^{13}\) However, measuring the total employment rates obscures the gender differences in full- and part-time work.
combine work and care are often subject to a ‘mommy tax’, which reduces their lifetime earnings, with this resulting from career breaks, periods of part-time employment, parenting-related occupational and job choices and employer discrimination based on parental status.\textsuperscript{14} Men’s average earnings are higher than women’s in all OECD countries, and men have higher lifetime earnings, resulting in a greater risk of poverty for women at various stages of the life course.

A significant body of literature has documented the relationship between tenure in paid work and lifetime earnings, noting the impacts of gender differences in time out of the workforce. Gornick and Meyers (2008) note that men’s stronger ties to the labour market carry social, political and economic advantages that are denied to many women, especially those who spend substantial amounts of time out of work in order to care for children.

A more equal distribution of paid work and unpaid work, including care, by gender may contribute to reducing gender inequalities in employment and earnings outcomes. Greater sharing of unpaid care by men may allow women to avoid or reduce the scaling back of paid work and thus lessen or prevent the weakening of women’s human capital and skills, as well as maintaining family income and overall lifetime earnings. The flip-side of this is that many women are able to reduce their hours of employment to accommodate care needs only because of the longer hours worked by their spouses (Baxter, 2007).

**Occupational segregation**

An example of the mutually reinforcing nature of paid work and care is occupational segregation. Despite the complexity of the relationship between unpaid care and paid work, what is clear is that there are significant gender differences in the composition of the workforce, with men and women clustered in different occupations, and that this segregation has implications for the ability of men to participate in care. In New Zealand, while the largest group of employed men are employed in corporate management positions, the occupations where the next largest groups of men are found are agriculture and fisheries, building and labouring jobs, where, it could be argued, the implementation of flexible work arrangements is difficult. By contrast, women are employed, in large numbers, in teaching, administrative and ‘personal service’ positions, which more closely align with the need to fulfil care responsibilities. As discussed earlier, for a variety of reasons, including perhaps discrimination, men are less likely than women to work in paid caring occupations such as teaching or nursing.

Perceptions of men as peripheral to care and differences in labour force participation patterns by gender contribute to gendered occupational segregation. When men are viewed as secondary to care, professions that are dominated by

\textsuperscript{14} However, a 1999 study of the impact of parental leave on earnings for men and women in Sweden found that employers penalised men more than women when parental leave was taken, as they interpreted men taking leave as evidence of less commitment to their careers, while it was normative for women to take leave. This study also found that the earnings penalty associated with taking parental leave was significantly higher for men than women. See Albrecht, Edin, Sundstrom and Vroman (1999).
men are not obliged to offer working arrangements that facilitate the combining of paid work and care. Because of this, women may choose to work in professions, or specialities within professions, that allow them to meet their care responsibilities, with recent research by the Families Commission (2008) highlighting the role of care responsibilities in shaping women’s decisions about career choices. As a result, there is a clustering of women in professions such as teaching and nursing, and the continuation of the cycle of occupational segregation and gendered pay differences. Gupta, Smith and Verner (2008:79), citing the labour markets in Nordic countries as an example, argue that this ...may have led to a societal system in which mothers (women) select into relatively low paying jobs... where it is easy to combine a career with family responsibilities while men tend to locate in the private sector, have a low rate of take-up of family-friendly schemes, earn the larger part of household income and support the family...

This is evident in the data collected in the 2006 New Zealand Census. Table 6 shows the distribution of male and female workforce across the occupations, while Table 7 shows the proportions of male and female employees in some key occupational areas and highlights the prevalence of men in occupations with little flexibility.

**Table 6: Gender distribution across occupations, 2006**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>% of male workforce</th>
<th>% female workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate Managers</td>
<td>13.93%</td>
<td>12.60%</td>
</tr>
<tr>
<td>Agriculture and Fishery Workers</td>
<td>8.55%</td>
<td>4.27%</td>
</tr>
<tr>
<td>Building Trades Workers</td>
<td>8.38%</td>
<td>0.22%</td>
</tr>
<tr>
<td>Total Labourers and Related Elementary Service Workers</td>
<td>7.40%</td>
<td>4.76%</td>
</tr>
<tr>
<td>Other Associate Professionals</td>
<td>6.77%</td>
<td>10.93%</td>
</tr>
<tr>
<td>Not elsewhere included</td>
<td>6.00%</td>
<td>5.31%</td>
</tr>
<tr>
<td>Personal and Protective Services Workers</td>
<td>5.23%</td>
<td>11.85%</td>
</tr>
<tr>
<td>Drivers and Mobile Machinery Operators</td>
<td>5.12%</td>
<td>0.43%</td>
</tr>
<tr>
<td>Metal and Machinery Trades Workers</td>
<td>4.50%</td>
<td>0.11%</td>
</tr>
<tr>
<td>Physical, Mathematical and Engineering Science Professionals</td>
<td>4.40%</td>
<td>1.22%</td>
</tr>
<tr>
<td>Stationary Machine Operators and Assemblers</td>
<td>4.32%</td>
<td>2.41%</td>
</tr>
<tr>
<td>Salespersons, Demonstrators and Models</td>
<td>3.81%</td>
<td>6.78%</td>
</tr>
<tr>
<td>Other Professionals</td>
<td>3.80%</td>
<td>4.95%</td>
</tr>
<tr>
<td>Office Clerks</td>
<td>3.47%</td>
<td>12.42%</td>
</tr>
<tr>
<td>Physical Science and Engineering Associate Professionals</td>
<td>3.39%</td>
<td>1.30%</td>
</tr>
<tr>
<td>Teaching Professionals</td>
<td>2.18%</td>
<td>6.98%</td>
</tr>
<tr>
<td>Life Science and Health Professionals</td>
<td>1.54%</td>
<td>4.68%</td>
</tr>
<tr>
<td>Other Craft and Related Trades Workers</td>
<td>1.42%</td>
<td>0.38%</td>
</tr>
<tr>
<td>Industrial Plant Operators</td>
<td>1.37%</td>
<td>0.11%</td>
</tr>
<tr>
<td>Legislators and Administrators</td>
<td>1.32%</td>
<td>0.55%</td>
</tr>
<tr>
<td>Customer Services Clerks</td>
<td>0.96%</td>
<td>5.90%</td>
</tr>
<tr>
<td>Building and Related Workers</td>
<td>0.87%</td>
<td>0.02%</td>
</tr>
<tr>
<td>Precision Trades Workers</td>
<td>0.83%</td>
<td>0.28%</td>
</tr>
<tr>
<td>Life Science and Health Associate Professionals</td>
<td>0.42%</td>
<td>1.55%</td>
</tr>
</tbody>
</table>

**Total (rounded)**                             | **100%**            | **100%**           |
Table 7: Gender breakdown of selected occupations, 2006

<table>
<thead>
<tr>
<th>Occupation</th>
<th>% of total male</th>
<th>% of total female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building and Related Workers</td>
<td>98.38%</td>
<td>1.62%</td>
</tr>
<tr>
<td>Metal and Machinery Trades Workers</td>
<td>97.88%</td>
<td>2.12%</td>
</tr>
<tr>
<td>Building Trades Workers</td>
<td>97.68%</td>
<td>2.32%</td>
</tr>
<tr>
<td>Industrial Plant Operators</td>
<td>93.43%</td>
<td>6.57%</td>
</tr>
<tr>
<td>Drivers and Mobile Machinery Operators</td>
<td>93.09%</td>
<td>6.90%</td>
</tr>
<tr>
<td>Other Craft and Related Trades Workers</td>
<td>80.52%</td>
<td>19.48%</td>
</tr>
<tr>
<td>Physical, Mathematical and Engineering Science Professionals</td>
<td>80.20%</td>
<td>19.80%</td>
</tr>
<tr>
<td>Precision Trades Workers</td>
<td>76.58%</td>
<td>23.42%</td>
</tr>
<tr>
<td>Physical Science and Engineering Associate Professionals</td>
<td>74.47%</td>
<td>25.53%</td>
</tr>
<tr>
<td>Legislators and Administrators</td>
<td>73.09%</td>
<td>26.91%</td>
</tr>
<tr>
<td>Agriculture and Fishery Workers</td>
<td>69.19%</td>
<td>30.81%</td>
</tr>
<tr>
<td>Stationary Machine Operators and Assemblers</td>
<td>66.80%</td>
<td>33.19%</td>
</tr>
<tr>
<td>Labourers and Related Elementary Service Workers</td>
<td>63.58%</td>
<td>36.42%</td>
</tr>
<tr>
<td>Corporate Managers</td>
<td>55.35%</td>
<td>44.65%</td>
</tr>
<tr>
<td>Salespersons, Demonstrators and Models</td>
<td>38.62%</td>
<td>61.39%</td>
</tr>
<tr>
<td>Personal and Protective Services Workers</td>
<td>33.11%</td>
<td>66.89%</td>
</tr>
<tr>
<td>Life Science and Health Professionals</td>
<td>27.00%</td>
<td>73.00%</td>
</tr>
<tr>
<td>Teaching Professionals</td>
<td>25.96%</td>
<td>74.03%</td>
</tr>
<tr>
<td>Office Clerks</td>
<td>23.84%</td>
<td>76.16%</td>
</tr>
<tr>
<td>Life Science and Health Associate Professionals</td>
<td>23.34%</td>
<td>76.66%</td>
</tr>
<tr>
<td>Customer Services Clerks</td>
<td>15.50%</td>
<td>84.50%</td>
</tr>
</tbody>
</table>

Source: 2006 Census of Population and Dwellings, Statistics NZ.

Singley and Hynes (2005:379) argue that continuing gender segregation in the paid labour force makes it more ‘rational’ for women to reduce their employment to undertake the bulk of unpaid care in the home:

...women in heterosexual couples typically face a labor market different from that faced by their partners. The historical separation of home and work has led to continuing high levels of occupational sex segregation and a pay gap between men and women, as well as between male- and female-dominated occupations. Consequently, within most couples, the opportunity costs for the woman’s time at home are generally less than for her partner’s time. Gender stratification in the labor market and within marriage are inextricably linked.

A number of researchers highlight this occupational sorting, with research particularly in the Nordic countries illustrating how this has resulted in a predominance of women in public sector jobs. Klinth (2008:24), for example, argues that:

...women are directed to the side of the labour market (the public sector) where child-related absence is expected. They receive a lower income, have fewer opportunities for full-time work, and more limited career possibilities. Men form the majority of the other side of the labor market.
Similarly, Duvander, Ferrarini and Thalberg (2005:16), in their evaluation of parental leave and gender equality in Sweden, show that there are:

...reasons to believe that men and women are treated differently since employers regard young women (with and without children) as a risk group. Men and women are consequently sorted to different workplaces, positions and professions in the labour market. As a result, inequalities, associated with gender segregation in the labour market and the gender wage gap, are reinforced.

2.3 Men’s care, wellbeing and work-life balance for men and women

In addition to impacts on women’s labour force participation and associated financial circumstances over the life course, the involvement of men in the care of their children is related to higher levels of wellbeing for women. Jacobs and Kelley (2006:24) argue that “it appears that father involvement not only has positive associations with child outcomes but may have important benefits for their partners and for family processes.” Similarly, in a nationally representative US study, Milkie, Bianchi, Mattingly and Robinson (2002) found that differences between expected levels of father care and actual father involvement in the emotional care of children were related to mothers’ beliefs that the division of labour was unfair to them and to these mothers having significantly higher levels of self-reported stress. Burton, Lethbridge and Phipps (2007), in their study of parents caring for a disabled child, found that the division of responsibilities according to traditional gender roles gave mothers the tasks most damaging to their health, resulting in a deterioration in health status relative to that of her husband.

Men may also benefit in a number of ways if unpaid care work was more equally distributed between men and women. When women significantly alter their work patterns to accommodate care responsibilities, men may face greater pressure to support their families financially, with this having the potential to limit their subsequent choices around employment, education and their availability and ability to care for dependents in the future.

Studies have reported that men would like to spend more time with their children, but are impeded by long hours in paid work. A 2003 survey of fathers carried out by the EEO Trust (2003) found that 80 per cent of fathers reported that they wished they could spend more time with their children. In addition, 82 per cent said their paid work negatively affected the amount of time they spent with their children, and 52 per cent said their work affected the quality of the time they spent with their children. O’Brien (2004) reports that increased participation in care may have a number of positive impacts for men. She cites Palkowitz (2002):

...fatherhood creates meaning for men: ‘fathering anchored men’s mental, physical and relational life’. Through... in-depth investigation of involved
fathers of different ages, including resident and non-resident fathers, [Palkowitz] suggests that men who are active in their children’s lives tend to be more personally integrated and involved in their community. It may well be, he argues, that men’s emotional involvement with children can operate to buffer against employment related stress (O’Brien, 2004:10).

Furthermore, there is a significant body of research indicating that men’s focus on paid work may have negative impacts on their relationships. The EEO Trust (2004) online survey on work and relationships found that men were more likely than women to perceive that their work had negative impacts on the quality of time with their partner and on the amount and quality of time they had for friends and socialising.

A greater sharing of unpaid care work may improve work-life balance for both men and women. Some literature suggests that women have significantly poorer work-life balance than men as a result of having full-time paid employment and longer hours of unpaid care work, while other research has found that men have poorer work-life balance than women, related to their high hours of paid work, lack of access to flexible work arrangements and workplace cultures that do not define men as carers. Assessments of the impact of men’s participation in unpaid care on work-life balance are complicated by the fact that women tend to reduce their paid work hours to accommodate care work. However, cross-country estimates show that total working hours (paid and unpaid) are almost universally higher for partnered men with children than for their female equivalents.

There is some New Zealand evidence that men have poorer work-life balance. A review of working hours shows that men are significantly more likely to work very long hours than women (Fursman, 2008). In line with this, the Department of Labour’s (2006) work-life balance survey created a work-life scale that combined respondents’ ratings of their work-life balance, the difficulty they experienced in achieving work-life balance and their job satisfaction. They found that men were slightly more likely than women to experience significant work-life conflict, with 20 per cent of men falling into the most severe work-life category (compared with 17 per cent of women.) In addition, 30 per cent of men stated they would prefer to work fewer hours even if it meant earning less money (compared with 25 per cent of women).

Regardless of which gender has poorer work-life balance, the greater participation of men in unpaid care would help to change cultures, both in the workplace and more broadly, that impede the ability of men and women to achieve their preferred balance between paid work and care responsibilities. As discussed earlier, greater participation of men in care would reduce the costs of using flexible work arrangements by making such arrangements gender neutral, with this also impacting positively on pay equity and occupational segregation. Ekberg, Eriksson and Friebel (2005) note that this was an explicit goal of the Swedish government’s parental leave policy, which, by encouraging both men and women to take leave, hoped that employers would discriminate less, as job disruptions owing to parental leave would be less concentrated to women.
2.4 Economic implications of men’s participation in care

In addition to the economic benefits of increasing women’s labour force participation, there have also been suggestions of other economic benefits to increasing men’s participation in care. For example, Misra, Moller and Budig (2007), in a study examining work-family policies across 11 European countries, found significant macro-economic implications for countries that included a focus on men as carers, with a key finding relating to levels of poverty. They found that countries with a work-family policy model that included men in care had the lowest poverty rates for single and partnered women with children. This was because work-family policies that reinforced women’s caregiving roles led to a greater risk of poverty for women, particularly among female-headed households, while countries with dual-earner, dual-carer policy settings assumed that both men and women would be in the labour force and provided subsidised care for children to facilitate this. Misra et al concluded that countries that emphasised balancing care and employment for men as well as women showed significant reductions in poverty rates compared to those that excluded care from men’s roles.

...gendered assumptions that underlie broad welfare state strategies and specific work-family policies result in different patterns of support for families. These patterns are linked to differences in poverty rates for families with children. Poverty rates remain remarkably high in many nations, particularly for single mothers with children. However, these rates vary by policy strategies. Poverty is much lower in countries with the earner-carer strategy, which emphasizes policy approaches meant to balance care and employment for both men and women (Misra et al, 2007:820-21).
3. BARRIERS TO MEN’S GREATER PARTICIPATION IN CARE

Barriers to greater participation in care by men are numerous and range from the visible and clearly significant to the hidden and seemingly minor. However, together, these barriers form a formidable system that may discourage many men from engaging in greater levels of care.

The barriers to men’s greater participation discussed in this section include:

• biology and the time of first childbirth
• workplace factors such as working hours, workplace cultures and occupational characteristics, as well as the gender pay gap
• the impacts of various government policies and laws, such as paid parental leave, laws impacting on separated fathers (including custody decisions and child support) and the impact of the criminal justice system
• not residing with children (i.e. non-resident fathers)
• women’s preferences for undertaking care
• the attitudes and skills of professional services
• the support of men in settings such as playgroups
• structural barriers to men’s care, such as the placing of infant changing facilities in women’s rest rooms
• culture and ideology
• a lack of ‘official’ advocates for men as carers in the policy arena.

3.1 Biology and the time around the first birth as a critical juncture for care

The need for women to manage pregnancy, recover from childbirth and establish breastfeeding means that men often begin parenthood in a secondary role. This need is reflected in legislation, with both New Zealand (for example, New Zealand’s paid parental leave scheme) and other countries acknowledging the role of biology (such as the ILO’s convention on maternity leave).

Research indicates that the impact of biology in limiting men’s care for their newborn children in the short term may establish a gendered pattern of care that continues after biological imperatives have receded and thus may impact on men’s caring for children throughout their dependent years. As such, the time of the birth of a first child is a critical juncture for the division of both care and paid labour force participation for men and women.

The arrival of the first child often leads to a more traditional sharing of tasks in the household. Cowan and Cowan (2000) have shown that gender becomes more salient during the transition to parenthood, while Singley and Hynes (2005:377) note that the transition to parenthood is:

...an especially critical juncture in the life course of many couples. During early parenthood, many couples adopt a more traditional gender split in family roles, either temporarily or more permanently.
They further note that gender exerts an influence on mothers’ and fathers’ work arrangements during early parenthood:

At the cultural level, new mothers and fathers must engage with cultural ideals that define “good” mothering and fathering as qualitatively different. ... this has traditionally meant that women provide intensive caregiving and men provide economic support. During the transition to parenthood, couples are involved in constructing their new social roles as mothers and fathers. ...thus, through their own self-definitions and their interactions with others, individuals within couples create gender difference during early parenthood.

A significant body of research supports the theory that the introduction of children into the household is a pivotal point when the division of care and paid work becomes gendered. The Department of Labour (2007:19) evaluation of parental leave, for example, found that:

While many of the mothers and fathers may have strived for equality in both paid and unpaid work before having a child, pregnancy and the birth of a child often reinforces traditional gender roles.

Similarly, the OECD (2007a) note that many of the differences in employment outcomes for men and women can be related to the period of family formation.

Bernhardt, Noack and Lyngstad (2008), in their analysis of the division of housework in Norway and Sweden, argue that the presence of children in the household strongly reduced the actual sharing of housework, a finding that corresponds to earlier findings by Bianchi et al (2000) that the arrival of the first child often leads to a more traditional sharing of tasks in the household. They cite a Swedish study by Ahre and Roma (1997) that classified couple households into egalitarian, semi-egalitarian, conventional and patriarchal, based on degree of sharing of household tasks. Couples without children were found to be the most egalitarian, with almost three-quarters were classified as egalitarian or semi-egalitarian. However, three-quarters of couples with children of school age were conventional and patriarchal families. Bernhardt et al (2008:277) argue that a dramatic change in gender equality in the home occurs when the first child is born, as:

...it is the woman, not the man, who changes her attachment to the labour market after childbirth, first by taking most of the parental leave and, when returning to her job, by working part-time (at least until the child is in school). These circumstances tend to either create or strengthen an already existing asymmetrical relation between the parents.

As such, the gendered division of labour following birth often results in women’s continued greater responsibility for childcare and men’s lesser participation in care across the life course. These differences also flow through to variations in labour force participation by gender. Gornick and Meyers (2008:315) state that “childbirth (or adoption) is the moment at which men’s and women’s working lives begin to diverge most radically”.
In contrast to unpaid caring work, paid work appears to be changing by becoming less affected by biology. Jobs that require ‘brawn’ have been declining rapidly in industrialised countries, while those requiring ‘brains’ or ‘soft skills’ have been increasing (Reich, 1993; OECD, 2007b). This is one factor behind the rise of women’s employment in recent decades.

3.2 Workplace factors

It is worth noting that the workplace barriers to providing care that men face are also faced by women carers, with this particularly for those who are providing care to relatives or friends, rather than to children. However, in their study of employees combining work and eldercare, Davey and Keeling (2004:8) point out that “it is primarily women rather than men who are hindered by the responsibility and burden of caring for older relatives”.

**Working hours**

A significant body of literature indicates that long hours in paid work are a major barrier inhibiting equality between men and women in both unpaid care and labour force participation. Long hours of work lessen the availability of men to engage in care, and research indicates that men who work very long hours are less likely to engage in a variety of specific care activities. Gornick and Meyers (2008:318) argue that the persistence of long weekly hours among male workers is “a formidable obstacle to greater involvement in the daily tasks of caring for children”, while Kitterod and Pettersen (2006) contend that fathers’ long working hours mean that men do not have much time available to undertake unpaid work.

The vast majority of men are employed in full-time work, with more than a third of these working 50 or more hours each week (Fursman, 2008). Of all those who work long hours, three-quarters are men. This indicates that the impact of long working hours in New Zealand may affect significant proportions of men with care responsibilities. Certainly, 2001 Census data indicated that many fathers with young children worked long hours. In this year, 37 per cent of fathers aged 25–34 with a child under 5 worked 50 or more hours per week. In contrast, 7.9 per cent of comparable mothers worked these hours (Callister, 2003b).

A study by the Department of Labour found that those who work the longest hours are less likely to be able to participate in other activities such as spending time with family (Department of Labour, 2006). More than a third (38 per cent) of those working more than 60 hours a week reported that work often made it difficult for them to get home on time, with 20 per cent of this group reporting that work often had an impact on them spending time with family members.

Similarly, the Work, Family and Parenting Study, conducted by the Ministry of Social Development (2006), found that those who worked long hours reported missing out of some of the rewarding aspects of being a parent because of work. Parents also reported having family time that was less enjoyable and more pressured, losing their temper, yelling at their children or increasing their use of physical discipline as a result of work stress (Ministry of Social Development, 2006).
In a large UK sample of 9,592 children, Tanaka and Waldfogel (2007) found that long work hours were associated with significant reductions in fathers’ involvement with their young children. When compared to fathers working standard hours, fathers who worked long hours were 17 per cent less likely to look after their babies, 18 per cent less likely to change diapers, 22 per cent less likely to feed their babies and 10 per cent less likely to get up at night to care for their babies. Similarly, in their comparison of France and the UK, Gregory and Millner (2007:75) argued that organisational working time policies and practices significantly influenced men’s involvement with their children, with long working hours “put[ting] a brake on men’s availability for and involvement with their children”.

Jacobs and Kelley (2006), in their study of couples with preschool children, found that the more hours fathers worked outside the home, the less they were involved in childcare, and that the amount of responsibility for children as well as the time spent with children were predicted by the hours fathers worked. Similarly, Aldous, Mulligan and Bjamason (1998) found that the more hours fathers were employed, the less fathering they did.

Haas and Hwang (2005), in their Swedish study of fathers’ time spent with children following parental leave, found that fathers’ work hours were significantly correlated with six out of nine childcare and relationship variables that measured father involvement in childcare. Their study used Lamb’s (1987) typology of responsibility, accessibility and engagement, as described above, to assess fathers’ involvement with children. They found that the more hours fathers worked, the less responsibility they took for childcare, the fewer hours they spent with children on workdays and the less they were engaged in specific childcare tasks. Haas and Hwang concluded that fathers’ long working hours were “a formidable barrier to fathers’ sharing childcare” (Haas and Hwang, 2005:14).

A number of studies have highlighted long working hours as impeding men’s ability to participate in care by contributing to the gendered divisions of labour force participation and unpaid work. Hook (2006:643), in her analysis of paid and unpaid work in 20 countries, concluded that:

Long standard and maximum working hours may encourage specialization by requiring exhaustive hours of the primary breadwinner, putting the breadwinner in an advantaged bargaining position, and making adherence to traditional gender ideology relatively easy.

Similarly, Himmelweit and Land (2007:26) argued that:

...(long) hours provide one of the main stumbling blocks to promoting equality between fathers and mothers in both caring responsibilities and labour market opportunities. Many women are restricted to low paid part-time employment because long hours of full-time employment are incompatible with the long hours that their partners work. This restricts both the father’s ability to take part in caring for their child and the mother’s available time for employment and her ability to take up labour market opportunities. The same applies to those with caring
responsibilities for older people: fulfilling or even sharing these is difficult for those working long hours.

In line with this, Aldous et al (1998) found that the greater number of hours women worked in the paid labour force, the more husbands were involved with young children, supporting the interdependent relationship between participation in care and paid work for both men and women.

Baxter (2007) argues strongly, however, that working hours do not necessarily act as a significant barrier to the participation of men in care. Using a sample of 3,268 children from the Longitudinal Study of Australian Children, she analysed the time fathers spent with children and fathers’ working hours and found that fathers’ involvement only decreased when they worked 55 or more hours each week, and even then, there was only a small reduction in the time spent with children. As such, the differences between full-time employed fathers working longer and shorter hours were quite small. In addition, Baxter notes that, even among fathers working standard hours, there were some fathers who were less involved in children’s activities, while among those with the longest hours, there were fathers who were heavily involved with their children’s activities. She concludes that the number of hours worked is just one indicator of fathers’ availability to their children and that how fathers spend their non-work time and the degree to which they make themselves available to help with child-rearing tasks or to interact or develop father-child relationships is likely to vary with factors other than those measured by working hours.

It is commonly reported that fathers work longer hours than non-fathers; however, Dermott (2006) shows that this correlation is problematic because of the presence of other variables. She notes that the age of parenthood commonly coincides with the period that is also key for career progression and stabilisation, and uses analysis of two major surveys to show that fatherhood status is not a good predictor of the number of hours worked. Rather, when other variables were taken into account, the effect of fatherhood status became insignificant. As such, Dermott concludes that attributing the differences in the average working hours of fathers and non-fathers to parenthood status ignores the fact that the two groups differ in other aspects. However, Dermott’s argument is focused on the difference between men by parenthood status, a finding that does not refute the fact that many men – both fathers and non-fathers – work long hours, leaving limited time for care activities.

**Workplace culture**

Workplace culture remains a major barrier to men’s greater participation in unpaid care, with this highlighted in both New Zealand research and the international literature. Workplaces remain structured around the ‘ideal worker’, with Appelbaum, Bailey, Berg and Kallberg (2002) noting that employers still feel entitled to “unencumbered workers” who function as if they have no care responsibilities. They argue:

> Under this model, anyone – male or female – can hold a full-time job provided they conform at work to employers’ notions of the ideal worker.

The ideal worker is available to work full-time, works mandatory overtime
or long hours as needed, and does not take time off for child-bearing or child-rearing responsibilities... Care work is to be fitted in without impinging on the employee's availability for work (Ibid:126-127).

Workplace culture and employer attitudes are cited internationally as barriers to taking up entitlements that aim to encourage men's greater participation in care, including in the Nordic countries, which are commonly held up as the pinnacle in gender equality with regard to gender equity in the care of children.

The impact of workplace culture in New Zealand is apparent in the Department of Labour (2006) study of work-life balance. This study found that workplace culture made it more difficult for respondents to achieve work-life balance, with 59 per cent of respondents reporting that the attitudes of supervisors, managers, colleagues and co-workers were an impediment to them achieving the balance they desired.

Workplace cultures and values that reinforce the separation of work and family life have a major impact on whether men are able to participate in unpaid care. In part, this is because, even when family-friendly work arrangements are available, such cultures prohibit their use, as to take advantage of these arrangements would be to signal a lack of commitment to work.

Bittman et al (2004), in his review of men's uptake of family-friendly work arrangements, found a number of workplace barriers faced by men that reflected the power of the ideal worker norm. These included: doubts about the legitimacy of men's claims to family responsibilities; negative attitudes on the part of immediate supervisors; and informal practices and taken for granted assumptions. In addition, employers, supervisors and senior managers thought that breaks or reductions in working hours could irreversibly damage men's careers (Bittman et al, 2004).

Duvander et al (2005:12), in their evaluation of the use of parental leave in Sweden, reported that:

Fathers often mention the workplace and employers' attitudes as reasons to not use the parental leave and it seems that small, private, male dominated workplaces inhibit parental leave use for fathers.

Albrecht et al (1999) found that employers in Sweden interpreted men taking parental leave as signalling a lesser commitment to their careers and responded by penalising those who took significant amounts of leave. In contrast, because virtually all Swedish women take substantial leave following childbirth, their leave-taking behaviour did not signal anything to their employers.

Similarly, Haas and Hwang (2008) quote a 2005 Swedish study that found that a majority of human resources professionals believed that men who took leave to care for children were less career-oriented. In an earlier study, Haas, Allard and Hwang (2002) found that men's use of parental leave was significantly affected by organisational culture, including the company's commitment to caring values, the company's levels of 'father friendliness', the company's support for women's
equal employment opportunity, fathers’ perceptions of support from top managers and fathers’ perceptions of work group norms that rewarded long hours at work rather than performance. When the culture was perceived to be flexible and adaptive in responding to fathers’ desire to take time off to care for children, men were more likely to take leave and to take more days of leave. Haas et al conclude that, within the sample they studied, organisational culture was the most important predictor of men’s use of parental leave, tied in importance with men’s advocacy of shared parenting (Haas et al, 2002).

The Equal Opportunity Commission (EOC) in the UK highlights workplace culture as a barrier specifically to men’s participation in care, with this reaching beyond the use of family-friendly work arrangements. Their report argues that:

This is about more than just family-friendly policies. It includes issues such as how comfortable fathers feel discussing their family commitments in the workplace and how acceptable it is to leave early in order to pick up the children from school, or to spend time with them in the evenings (Equal Opportunities Commission, 2003:5).

The EOC further argues that the pervasiveness of such cultures in the workplace results in men regarding the need to reconcile work and care as their personal responsibility, with this reducing their expectations about whether particular work-life practices could be made available in their workplace. As a result, men’s expectations and use of specific family-friendly policies and practices are low despite high demand from parents for an improved balance between work and family (Ibid).

One notable aspect about a number of the most recent studies of workplace culture and its effect on men’s participation in care is that much of the research has been carried out in Sweden, a country that is often held as the ideal for policies promoting the participation of men in childcare. These studies highlight the significance of workplace culture as a barrier to men’s greater participation in care by providing an example where, it could be argued, the government has attempted to remove many other barriers to men’s participation.

**Occupation and men’s participation in care**

The link between occupation and care opportunities and outcomes is very complex. Particular occupations can be a barrier to undertaking care work, but, equally, those who either want or need to be involved in caregiving may be attracted to particular occupations. As discussed, occupational segregation itself is associated with unpaid caregiving in the home, but also paid caregiving in the workforce.

As noted above, the research literature shows that it is not only occupation that matters, but also hours of work within that occupation. Where the work is carried out, when it is carried out (in terms of when during the day, the week and over the year) and whether the person is an employee or self-employed can also be important – in a New Zealand context, see Callister and Dixon (2001), Callister (2003a, 2004b) and Callister and Singley (2004) – but occupation itself can have a major influence on these variables.
Frontline occupations within the fishing and oil exploration industries provide examples of work that is male dominated and where the people work very long hours, but they are also occupations where many people work for intense periods and then have substantial periods off work. In some situations, this can be a barrier to caregiving, but the time off can facilitate it. Another example that is often talked about in the fathers’ literature is men in the military where the fathers can be away for lengthy periods but might also have relatively long periods off work (for example, Applewhite and Mays, 1996).

While parents generally care for children outside of their paid work time, they can care for children within their workplaces or they can work at home while caring for their children. As an example of the possible benefits of simultaneous work, Lareau (2000) suggests that the ‘presence’ – as distinct from active care – of fathers at home in the evening can be important for the wellbeing of older children. She provides examples of fathers initiating homework even if they are involved in other activities such as undertaking some paid work at home.

As an example of such simultaneous work and the effect of employment arrangements, the childcare survey undertaken in New Zealand in 1998 asked whether a parent had a child at work with them as one of the care arrangements in the previous week (Department of Labour, 1999). For employees, a total of 6 per cent recorded this response (for mothers, 9 per cent, and for fathers, 3 per cent). This arrangement was, however, much more common for self-employed parents. Amongst this group, 29 per cent had used this arrangement (for mothers, this was 44 per cent, and fathers, 21 per cent).

However, when childcare and paid work in the New Zealand time use survey is considered, overall, fathers were more likely than mothers to record a period of simultaneous care and paid work. This primarily reflects the greater likelihood of fathers being employed. The time use data show that just over a third of employed mothers and fathers undertook a spell of simultaneous work in weekends, while during the week, the figures were a fifth for fathers and a quarter for mothers. The time use data show that employers, the self-employed and, connected with this, people in agricultural occupations (all more likely to be men rather than women) stand out as being most likely to undertake such simultaneous work. Some of this may reflect active employment choices made by parents. For example, some parents may choose to be self-employed so they can combine spending time with their children with paid work.

**The gender pay gap**

A further important factor that may shape who might be a primary breadwinner and who might be a main caregiver is relative wage rates, that is, the pay gap between women and men. However, over time, this gap has decreased. In addition, the size of the gap changes quite significantly over a life-cycle. A number of studies indicate that, while many factors influence inequalities in wages, one important determinant of the pay gap is gendered roles adopted after having a child (for example, Budig and England, 2002).
While studies have yet to be carried out in New Zealand on wage rates and earnings before having a child, data on hourly wages by age suggest the gap might be quite small before having a child. In New Zealand, Crossan (2004) has shown that, in the 15–29 age group, the gap is small (and, in fact, in some age groups, in favour of women). Equally, and as Figure 6 indicates, the more recent Ministry of Social Development Social Report 2008 shows little gap in hourly earnings up to age 30.

Figure 6: Median hourly wage and salary earnings, by age and sex, June 2007


3.3 Government policy and law

Gendered government policies can act as a barrier to men’s greater participation in care. These include the structure of paid parental leave schemes, and other policies and laws, such as those impacting on separated and divorced fathers.

Paid parental leave

Paid leave from work is a key strategy for supporting men’s participation in care in many countries (further discussed in the following section). However, the design of leave initiatives can also mean that leave policies can act as a barrier to men’s care of children. Parental leave policies that are contingent on mothers meeting eligibility criteria, or rely on mothers’ willingness to transfer leave to their partners, mean that some fathers are unable to access leave to care for children.

Lappegard’s (2008) Norwegian research studied the use of parental leave by the parents of 167,234 children born in the 5 years immediately following the introduction of the father’s quota in 1993. During this period, fathers’ payments for the father’s quota were dependent on mothers’ benefit rights.15 As such, a father’s parental leave depended on how much the mother had been working, independent of his own work time.

Lappegard argued that, because of the structure of the policy, how much the mother was working before the birth became crucial to the cost to the family of the father taking parental leave. For instance, if a mother had been working half-

15 Since 2005, this is no longer the case.
time, the father was entitled to only 50 per cent of the benefit rights, even though he had been working full-time.

As such, Lappegard (2008:140) argued that:

Even though the parental leave program is intended to promote gender equality, it has a gender-inegalitarian component whereby the father’s eligibility for leave is dependent on the mother’s work status, but not vice versa. That fathers’ use of the father’s quota is dependent on mothers’ connections to the labour market means that not all fathers are entitled to this leave, which results in about 60 per cent of all fathers actually using the father’s quota.

Access to paid parental leave for fathers in New Zealand is also based on their partner’s eligibility and labour force participation. The 2007 evaluation of paid parental leave (Department of Labour, 2007) showed that, of the 1,000 women in the sample, 434 were not eligible for leave, either because they were not employed or, if they were employed, had not been employed for enough months, were self-employed16 or had not worked enough hours per week. As such, the partners of these women were thus also unable to access paid parental leave (PPL). The report states:

...where mothers are not eligible but, through their work patterns, fathers potentially are, the fathers cannot access any PPL. While mothers can potentially transfer leave, most do not decide to. In fact, of the small number of mothers who return early from PPL, most forfeit the remainder of their payment rather than transferring it to a spouse/partner. The survey of fathers, however, indicated that if PPL existed specifically for fathers, half would take it up (Ibid:61).

The quote above illustrates that, assuming that mothers are eligible for leave, fathers’ access to leave still relies on mothers transferring part of their leave to their partners. Similarly, Whitehouse, Diamond and Baird (2007), in their research on fathers’ use of unpaid parental leave in Australia, note that, while fathers’ eligibility to leave is not dependent on mothers’ labour force status, accessing the entitlement reduces the mother’s leave period, thus placing a powerful restraint on men’s take-up of leave. As such, in both Australia and New Zealand, the structure of the leave policy impedes men’s ability to participate in the day-to-day care of their newborn baby.17

O’Brien, Brandth and Kvande (2007) note that the gendered nature of such policies may act as a barrier to men’s participation in care to varying degrees, depending on factors such as a family’s financial situation. They argue that:

16 The review was conducted before the eligibility criteria were extended to include self-employed mothers.

17 In 2008, the Australian Productivity Commission was asked to examine options for a paid parental leave scheme. This included considering the merits of the New Zealand scheme. Amongst its September 2008 draft recommendations, the Commission recommended that, when the mother was not eligible for paid parental leave and the father was eligible for job protection, then he should have an independent right to take paid leave.
...in the absence of paid job-protected leave, poorer and less economically secure fathers may be less able to spend time with their infants and partners during the transition to parenthood. It is possible that, from the earliest period of life, infants in poor households experience less paternal investment than infants in more affluent households (Ibid:379).

The structure of such policies also contributes to reinforcing the traditional division of care and paid work, which, in turn, has an impact on labour force segregation and pay equity. Lewis (2006:110), commenting on leave schemes where the leave is available to be shared by couples, argues that:

...state programmes to support family care by parents are mostly taken up by women, which does have a profound effect on gender equality in the labour market; the Scandinavian countries are marked by high levels of horizontal occupational segregation. The unequal gendered divisions of paid and unpaid work are intimately linked. If the aim is to provide genuine choice to men and women to engage in both forms of work, and if women’s choices are necessarily constrained by those of men, then policies that result in women combining “work and family” such that they work long part-time (in Scandinavia) or short part-time (in the UK, The Netherlands and Germany) can only be considered to be a first step.

Similarly, Himmelweit and Land (2007:30) contend that:

Fathers need plenty of encouragement to take parental leave. Taking part of a mother’s leave is not popular. Even where parental leave has a non-gendered name and is the right of the couple, and thus either parent can take it, most couples are likely to conform to current gender norms so that the mother takes most of the leave. Economic pressures, where there is unequal pay, reinforce this tendency.

**Separating couples and the applications of family law**

While some separating couples do negotiate equitable caring arrangements, post-separation custody decisions and other applications of family law such as supervised access may also impact on the ability of men to participate in the care of their children.

Gregory and Milner (2007:70) note that

...it is still nevertheless the case that when it comes to determining the place of residence and care of the children of divorced parents, judicial decisions continue to be made on the basis of societal norms relating to maternal competence in the care of (especially young) children. Consequently, many fathers... lose contact with their children after divorce and/or are left with a residual financial role.

Most separated or divorced fathers will find themselves in a secondary parenting role. In New Zealand, as at 30 June 2006, of the parents liable for child support, about 24,500 were female, compared to 115, 500 males.18 There are over

18 Parliamentary Question for Written Answer No 12589(2006).
220,000 children in the child support liable assessment records. However, IRD child support data indicate 7,685 children were in shared custody in February 2008 (Catherall, 2008). Under the Child Support Act 1991, shared care is considered as “an arrangement when both parents care for their children substantially equally. This generally means that the paying parent cares for the children for at least 40 per cent of the nights in a year” (Inland Revenue Department, 2004). Catherall also gave a figure for 1995 of 7,320 children. This does not suggest much change in the amount of shared care.

The data in Table 8 also indicate little change in award of custody by the Family Court over the past 20 years, with most cases of sole custody involving mothers, and little change in shared custody. No data were collected for the years 1990–2006.

Table 8: Award of custody

<table>
<thead>
<tr>
<th>Year</th>
<th>Mother</th>
<th>Father</th>
<th>Shared</th>
<th>Divided</th>
<th>Total</th>
<th>Mother only/Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1985</td>
<td>1487</td>
<td>242</td>
<td>93</td>
<td>62</td>
<td>1884</td>
<td>78.9%</td>
</tr>
<tr>
<td>1986</td>
<td>1628</td>
<td>220</td>
<td>127</td>
<td>55</td>
<td>2030</td>
<td>80.2%</td>
</tr>
<tr>
<td>1987</td>
<td>1384</td>
<td>223</td>
<td>137</td>
<td>75</td>
<td>1819</td>
<td>76.1%</td>
</tr>
<tr>
<td>1988</td>
<td>1459</td>
<td>226</td>
<td>156</td>
<td>65</td>
<td>1906</td>
<td>76.5%</td>
</tr>
<tr>
<td>1989</td>
<td>1674</td>
<td>250</td>
<td>162</td>
<td>82</td>
<td>2168</td>
<td>77.2%</td>
</tr>
<tr>
<td>1990</td>
<td>1578</td>
<td>242</td>
<td>144</td>
<td>58</td>
<td>2022</td>
<td>78.0%</td>
</tr>
<tr>
<td>Y/E Jun06</td>
<td>1358</td>
<td>234</td>
<td>232</td>
<td></td>
<td>1824</td>
<td>74.5%</td>
</tr>
</tbody>
</table>

The terms used in the Guardianship Act 1968 were ‘custody’ and ‘access’, with the possibility of shared custody. Under the Care of Children Act 2004, references are to ‘day-to-day care’ and ‘contact’, with the possibility of shared care. There does seem to be a slight switch from mother to shared care by 2006. However, 2006 data are for day-to-day care, not custody, and shared care may not be shared between the mother and the father.

There is both the actual law and the application of family law. Historically, the debate on father involvement has been specified in such a way that it required fathers to justify their parenting by arguing that father absence is harmful. It has had an effect on court deliberation, where a presumption that one parent is sufficient resulted in parents being required to compete, each trying to show the deficiencies of the other. In line with this, O’Brien (2004:19) notes that:

19 Parliamentary Question for Written Answer No 11826(2006).
20 This does not take into account families that make their own arrangements following separation.
21 1985–1990 data from the answer to 1995 parliamentary question for written answer no.9879. 2006 data from answer to 2006 parliamentary question for written answer no.9643. The latter are for day-to-day care, not custody. The 2006 figures for shared care, at 12.7 per cent of orders involving parents and 10.8 per cent of all orders, are much lower than those given by Catherall (2008). She states: ”In the Family Court in the year to May 2007, parents were ordered to share child care in 18 per cent of parenting orders”. Such a large difference is suspicious. However, if there really has been a major shift in award of care, does this mean that today’s fathers are different from those of a few years ago? Alternatively, would past cases be viewed differently if considered now? What does that say about the ongoing consequences of past decisions?
Fathers’ lobbyists often complain that courts tend to underplay their child-caring competencies whereas mothers’ lobbyists declaim fathers’ desires for contact without responsibility.

The outcome of such a competition was largely predetermined given the concept of women as ‘primary caregivers’ and gendered patterns of care before judgement.\(^\text{22}\) It was made more problematic in that ‘conflict’ was viewed by Judge Patrick Mahony, when Principal Family Court Judge, as harmful to children (Haines, 2000). The conflict may be a disagreement between the parents as to whether the father should be an active parent, in which case, the mother could have an effective power of veto by refusing to cooperate. Fathers who had been most involved could justifiably have wanted to continue as active parents. For them, the common alternative weekend arrangement may have seemed most unsatisfactory. However, if they were less willing to accept it, then they were more likely to find themselves in a conflict situation. In other words, the Family Court may have been giving worse treatment to those fathers who had been taking their parenting role more seriously (Hubin, 1999).

Friedman has suggested that there were additional reasons for favouring mothers besides suitability as a parent. These included continuing fathers’ financial obligations when not living with the mother and maintaining ties between mothers and children into mothers’ old age, both with the aim of avoiding placing a financial burden on taxpayers (Friedman, 1995:121).

**Child support**

The Child Support Act 1991 has been criticised as being inequitable to many of the liable parents, primarily fathers (Birks, 2000). There are several grounds for this. The formula does not consider the income of custodial parents. There is no change in child support liability as contact increases from zero to 145 nights in a year. There are no guidelines as to how child support money should be spent, and the custodial parent is not accountable for its use or misuse. There is no clear explanation as to why the particular formula was chosen, nor whether the custodial parent is expected to make any financial contribution to the costs of children (Ibid).

The area of child support is a prime example of an issue where language is important. The term ‘deadbeat dad’ is an expression more common in the US (for example, Reichert, 1999; Sorensen, 1997) but for which examples of use can be found in New Zealand (Pierard, 2006; TV3, 2008). When researchers, policy-makers and the general public refer to a group of separated fathers as ‘deadbeat dads’, it is generally because they are not paying child support. Yet, such a focus on dads as being ‘deadbeat’ also ignores the fact that a not insignificant number of mothers are also not paying their full child support payments. For instance, as at March 2008, there were 99,780 New Zealand fathers who had a child support

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\(^\text{22}\) This position is frequently strengthened due to mothers being awarded interim custody before the issues are addressed in detail. Subsequent delays in resolution merely add to that advantage.
debt but also 24,082 mothers. These mothers are not referred to as being ‘deadbeat’. The focus on enforcement of child support awards from fathers ignores many important issues including whether such men are facing financial hardship themselves. Callister and Birks (2007) suggest a more balanced view would include thinking about whether there were ways to bolster their earning power or ways to recognise potential contributions from social involvement with the fathers’ separated children. A more balanced view would also require a change in language (see discussion in Introduction above).

Finally, while much attention has been given to financial contributions by fathers following divorce, other aspects have been given little attention. In general, in debate on positions post separation and fathers’ contributions to their children, “...nonmonetary contributions are all but ignored by researchers” (Parke and Brott, 1999:71).

**Portrayals of domestic violence**

The framing of domestic violence has shaped attitudes about the role of men in families. Portrayals of domestic violence affect social norms, including how we view how risky individual fathers might be in a family setting, which can then affect family law. Domestic violence is a very complex area, both with regard to research and in determining public policy. Not surprisingly, the debates in the academic literature are very intense and can elicit quite differing responses to similar data.

Debates within the domestic violence literature include: levels of violence; the frequency versus the prevalence of violence; whether violence against children is more common by mothers than fathers and, in turn, whether this relates to the time spent with children by mothers versus fathers; and differences in violence and sexual abuse by step-parents versus biological parents. All these areas are underpinned by a growing literature but it is beyond the scope of this paper to fully address these important debates. Perhaps in part due to the complexity of this issue, there is much information and, at times, misinformation, about domestic violence. For example, Issue 2 of the New Zealand Families Commission’s newsletter *Family Voice* stated that “two out of three men do not physically abuse their partners”, that is, one in three do. This is despite research that indicated that 26.4 per cent of women who had ever had a partner had been a victim of domestic violence over their lifetime versus 18.2 per cent of men (Morris, Reilly, Berry and Ransom, 2003). In fact, the incidence rate for women in

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24 An earlier figure showed that there were 24,500 women liable for child support. This figure of 24,082 women who had a child support debt is similar, but they are two different measures. Those potentially with debts will be a larger group as it includes all parents who have been liable in the past but have not fully paid their support.

25 An example of such debates was an article based on New Zealand’s Christchurch longitudinal study in the highly ranked *Journal of Marriage and Family* in 2005. This article prompted a series of very strong responses and counter responses in the journal.
the previous 12 months was 3 per cent and for men, 1.8 per cent – orders of magnitude lower than the one in three.

When a parent is accused of violence towards their partner or their children, their access to their children may be affected. This can be done by denying or restricting contact with their child, awarding responsibility for the day-to-day care of the child to the other parent (usually the mother) or ensuring supervised contact with their child. As being violent towards a partner does not necessarily mean that they are violent towards their children, this can be perceived as being unfair and may impact on some men’s ability to care for their children.

**Men, prisons and caring**

The justice system, particularly imprisonment, has a significant impact on men’s caregiving activities, both directly through time away from children and indirectly through the impact of imprisonment on lifetime earnings, reductions of which are correlated with men being less likely to live in couple families raising children.

In New Zealand, as in some other industrialised countries, notably the United States and the United Kingdom, the prison population has been rising. Long-term prison data show that, at the turn of the 20th century through to the late 1960s, the prison population as a rate per 1,000 population varied between 0.60 and 1.0. However, since this time, it has risen steadily to reach a rate of 1.8 by 2007. More than three-quarters of OECD countries have prison population rates below New Zealand’s, which ranks seventh highest in the OECD, just below Mexico. Data drawn from the Department of Corrections indicate that, in 1992–1993, there were just over 4,300 men incarcerated, but this had risen to just under 8,000 by 2007–2008. While the female prison population has been rising, in 2008, males still formed 94 per cent of the New Zealand prison population. In New Zealand, Māori and, to a lesser degree, Pacific men are highly over-represented within the prison population. While data are not available, this suggests that a significant proportion of Māori children are likely to have had a father in prison at some point in their childhood.

The justice system, but particularly imprisonment, can have a major impact on men’s caregiving activities. This includes active parenting. There are two main routes – one direct and the other indirect. The direct route is through time away from children through fathers being in prison. The indirect route is through the long-term impact of imprisonment on lifetime earnings. As an example, using US longitudinal data, Western and Pettit (2005) show that the low-skilled minority men (in the US context, primarily African American and Hispanic men) who face high risks of imprisonment also have lower earnings over a lifetime. This is both through time out of the labour market while in prison and reduced earnings through having a prison record. In a New Zealand context, low income, along with low education, has been associated with men being less likely to live in couple families raising children (Callister, 2000). Research would be needed to

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assess whether a time in prison in New Zealand can be directly linked to lower levels of contact with children post-release.

In a discussion of public policy in relation to fathers in prison in the US, Hairston (2001) suggests that the parenting roles and responsibilities of incarcerated men have not traditionally been considered an important public concern but that this needs to change. Factors to consider include location of prisons, communication regulations and the post-release environment. Qualitative studies undertaken in the US have also investigated the experiences of incarcerated fathers, their perceptions of fatherhood and the nature of their involvement with their children (Arditti, Smock and Parkman, 2007). This analysis has revealed participants’ feelings of helplessness and the difficulties of being a ‘good father’ while in prison. Release signified an opportunity to ‘start over’ with their children but such a start over often faced a number of problems. Father involvement was very much constrained during incarceration, and men were entirely dependent on non-incarcerated mothers or caregivers for contact with children. Many fathers perceived mothers’ gate-keeping, or efforts to prevent contact, and saw this as putting them in a powerless position in terms of parenting. Other qualitative research suggests some real complexities and difficulties of father-child relationships and how to maintain them both in prison and after release. Issues of drug-taking, sometimes difficult relationships with mothers, limited income earning capacity and having children with different partners all add to difficulties in parenting (for example, see Day, Bahr, Acock and Arditti, 2005).

It has also been suggested there may be complex relationships between prisons, parenting by fathers and the prospects of children themselves ending up in prison. For example, Brenner (1998) notes theory that suggests that, if a father comes out of prison more committed to his children, he may choose not to commit more crimes and risk another separation from them. In addition, Brenner suggests there is potential for a decrease in future crime rates if more children grew up in homes with their fathers. In his review of father support programmes across US states, he finds some tentative support for these ideas.

There is also a parallel, but more extensive, literature in relation to mothers in prison. This includes issues of how to manage incarcerated pregnant mothers and what arrangements should take place on the birth of the child (for example, Baunach, 1985; Myers, Smarsh, Amlund-Hagen and Kennon, 1999; and in New Zealand, Kingi, 2000). In New Zealand, the Corrections (Mothers with Babies) Amendment Bill was passed into law in September 2008. The Bill sets out provisions for mothers to keep their children with them in prison up to 2 years of age, an arrangement that could be considered to discriminate against fathers, who do not have such provisions available to them. While, overall, there seems to be less attention given to the connection prison fathers have with their children in New Zealand, there have been some small-scale programmes with, for example, local based programmes to encourage prison fathers to read to their children (Department of Corrections, 2008).
3.4 Non-resident fathers

Marsiglio, Amato, Day and Lamb (2000), in their review of research on fathering, argue that divorce is often followed by a decline in the quality and quantity of contact between fathers and children, with never-married fathers even less likely than divorced fathers to keep in contact with their children following relationship break-up. Nevertheless, some non-resident fathers manage to see their children frequently and maintain positive relationships.

There are particular obstacles faced by fathers who do not live in the same household as the mother(s) of their children. Wallerstein and Kelly (1980:123) describe the particular difficulties of parenting when limited to being a ‘visitor’ in a child’s life:

[T]he father-child relationship rests entirely on what can be compressed into the new and limited form. The difficulties inherent in this compressed funnelling process have been insufficiently appreciated.

Amato (1993) has suggested that, rather than just contact between a parent and a child, ‘authoritative parenting’ is important (Amato, 2004; Amato and Gilbreth, 1999). A separated father is generally placed in a secondary role. Hence, it is hard for him to maintain an active ‘authoritative parenting’ style unless he has support from the mother. Amato also recognised the part played by a mother in enabling this, arguing that “[d]ivorce does not bring an end to the triadic relationship between parent, child and parent. Instead, a good deal of research indicates that the quality of one relationship impacts on the others” (Amato, 1993:34).

Similarly, Marsiglio et al (2000) comment that contact between non-resident fathers and children tends to be recreational rather than instrumental. They note that, compared with fathers in two-parent households, non-resident fathers provide less help with homework, are less likely to set and enforce rules, and provide less monitoring and supervision of their children. They conclude that ...

...non-authoritative fathering within the context of minimal inter-parental cooperation is the pattern observed in most [separated parent] families. For this reason, non-resident fathers may have a difficult time making positive contributions to their children’s development (Ibid:1184).

Davey (2006) notes that the timing of divorce may be important. If separation occurs when children are young and the father loses contact with them, then these ties are rarely resumed in later life. However, if the divorce occurs when the children are adults and a good relationship between parents and children has been formed and maintained, then ties between fathers and their children are more likely to remain unaffected.

3.5 Women can be a barrier to men’s participation in care

Women have some influence over the time men spend in the care of their children, because mothers are partners and sometimes gate-keepers in the father-child relationship, both in intact relationships and separated or divorced families (Doherty et al, 1998). For example, Doherty et al (Ibid:286-287), in their review of ‘responsible fathering’, contend that:
...even within satisfactory marital relationships, a father's involvement with his children, especially very young children, is often contingent on the mother's attitudes toward, expectations of, and support for the father, as well as the extent of her involvement in the labour force... studies have shown that many mothers, both inside and outside marriage, are ambivalent about the father's active involvement with their children... Given the powerful cultural forces that expect absorption by women in their mothering role, it is not surprising that active paternal involvement would threaten some women's identity and sense of control over this central domain of their lives.

Similarly, O'Brien (2004) notes that fathers' care of children is embedded in a network of family relationships, from which it cannot be easily separated. She notes:  
...the vital mediation role mothers play in facilitating men's parenting... Men's attempts to become more involved in childcare are contingent on maternal beliefs and mothers' assessment of its benefits (Ibid:8).

Women's preferences may act as a barrier to increasing men's participation in care.28 Women who prefer to stay home full-time to care for children may rely on men's paid labour force participation, with long hours of work for men being a possible cost of 'purchasing' time at home for women.

In addition, women's preferences to provide care impact on the take-up of leave policies and flexible work, which, in turn contribute to further barriers for men to participate in care. For example, the Department of Labour's (2007) evaluation of paid parental leave found that almost three-quarters (72 per cent) of mothers did not consider transferring any of their parental leave to their partner, with the most common reason for this being that it was more important for the mother to be bonding with the baby. The evaluation showed that fathers supported this decision. Similarly, Smeaton (2006) found that mothers were significantly less likely than fathers to support transferring the leave and pay associated with parental leave.

Perhaps reflecting these preferences, the literature suggests that men are more limited in their opportunities to experience providing independent care to their young children. As noted, Craig (2006), in her analysis of time-diary data, found that men's time with children is most often mediated by the presence of women, with mothers present for more than 90 per cent of the time fathers are with their children.

The role of women in creating and maintaining barriers to parenting by fathers has been recognised and is sometimes referred to as gate-keeping. Mothers play the role of mediator or 'gate-keeper' by either facilitating or curtailing the father's involvement, and maternal gate-keeping is typically defined as "a collection of

28 Little is known about men's preferences in this area. Even Hakim (2000, 2002) only briefly mentions men's preferences, and where she does, notes that only about 10 per cent of men have 'home-based' preferences.
beliefs and behaviours that may inhibit a collaborative effort between men and women in family work” (Schoppe-Sullivan, Brown, Cannon, Mangelsdorf and Sokolowski, 2008:389). Gate-keeping behaviours include assuming primary responsibility for child-rearing tasks or criticising the father’s actions when he is involved and may stem from a variety of reasons, including “belief in the appropriateness of differentiated family roles, the need for validation of a mothering identity, a pessimistic assessment of fathers’ competence in child care, or the adoption of particularly high standards for child care” (Ibid.) Schoppe-Sullivan et al argue that mothers may shape father involvement through their roles as gate-keepers, but stress that this may include both inhibitory and facilitative behaviours engaged in by mothers with the goal of regulating fathering behaviour (Ibid).

Gate-keeping may be a more significant barrier following an acrimonious separation or divorce, when mothers who are not supportive of fathers’ parenting can additionally constrain father-child relationships, especially given current family law and its interpretation.29 At a more extreme level, parental alienation may occur, where a child is encouraged to develop an aversion to a parent, perhaps forming an alliance with an alienating parent (Rand, 1997a, 1997b). Such actions have been described as a form of child abuse (Blaikie, 1994), but for many years, they were not given much attention by the New Zealand Family Court. The issues have been highly politicised. This has had an impact on research, with some being openly critical of groups trying to give separated fathers a voice (Kaye and Tolmie, 1998: Nash, 1992). The argument has been presented that fathers’ groups are concerned with their own rights, rather than the interests of their children. In response, on the basis that it is difficult to be a responsible parent when hardly seeing a child, Hubin (1999) described ‘fiduciary rights’ – rights that are needed for people to fulfil their responsibilities.30

3.6 Attitudes and skills of professional services

In the late 1980s, Sagi (1987) reported that international literature on welfare services provided for children and families suggested that helping professionals (physicians, public health nurses, social workers and so on) were not prepared either ideologically or organisationally to encourage paternal involvement in the family. More recent research from both Australia and New Zealand suggests there continues to be some challenges for support services to engage with fathers. A 2008 Australian review article notes:

Incorporating fathers into established family-related services, however, has not proved to be straightforward. Everything from publicity (in which the language and images may be pitched at mothers) to opening hours, referral procedures and staff training has required rethinking or, at least, reviewing. Simply advertising programs for “parents” instead of for “mothers” has not brought dads flocking to the services, and highly

29 Difficulties arising from the constraints of their position are described in the section on non-resident fathers’ experience in Wilson (2006:301-304).

30 Note also: “The new parental rights in Section 2 of the Children (Scotland) Act 1995 exist ‘only to enable him [the parent] to fulfil his parental responsibilities in relation to his child’ (Section 2.1)” (Wilson, 2006:287).
trained practitioners have not always found it easy to interact with fathers (Fletcher, 2008:1).

Fletcher (2008) examines research undertaken both in the United States, the UK and Australia and notes that there are a wide range of settings through which fathers could potentially be supported. These include health, welfare, education and counselling. In each of these areas, there is also a diverse set of services. For example, in health, there can be the standard services that support new parents through to specialist services such as neo-natal intensive care units. In terms of parenting programmes, Fletcher notes that these need to cover a variety of groups including expectant fathers, fathers of children with a disability, fathers in prison, indigenous fathers and fathers of primary school-age children.

Overall, Fletcher suggests services for families have often not successfully engaged fathers. He states that health, early education and welfare services aiming to support families are mostly staffed by women and accessed by mothers. In summarising how services could change, Fletcher suggests there is a need to:
- change from mother-focused to father-inclusive publicity
- recruit males as staff or volunteers
- develop father-sensitive models of service delivery.

In addition, he provides recommendations from Head Start strategies for including fathers, which include:
- revamping services’ policies (including a clear expectation that fathers should and will participate), registration forms (providing information on fathers), hiring practices (having more male staff), physical environment (providing positive images of fathers) [and] referral pathways and staff training.

Fletcher suggests that knowledge about fathers is less important than the ability for practitioners to be self-reflective in relation to fathers. This requires service providers to be reflective about their beliefs and attitudes. Drawing on the work of Russell, Barclay, Edgecombe, Donovan, Habib, Callaghan and Pawson (1999), Fletcher illustrates that the attitudes of service providers towards male behaviour, particularly in the areas of competency to care for children and child abuse, can be far more negative than the actual data show. For instance, he cites that over half the female staff and one-third of male staff believed that up to one in four of fathers physically abuse their children, a finding that is significantly different from the true statistics of domestic violence.

In New Zealand, Mitchell and Chapman (2001) have investigated the support given by Plunket to new fathers. In the literature review for the research, the authors found evidence that, while fathers are becoming increasingly involved in childcare, services that support families have not effectively adapted to this change. The services were seen to be continuing to target the mother as the primary caregiver and to treat fathers as a support person. The actual research was based on focus groups of Plunket nurses. These participants felt the nature of their work with families provided an ideal opportunity to involve new fathers more
directly in their services, but the nurses acknowledged that practices tended to focus on the needs of mothers. As an example, initial referral processes tended to exclude fathers. While the participants in the focus groups were adamant there was considerable benefit if increased effort was made to involve fathers, they found it difficult to identify specific strategies that would increase the involvement of fathers.

In a recent study, Chapman, McIntosh and Mitchell (undated) undertook a study of new fathers in the Nelson area. The research involved a small survey of new fathers supplemented by focus groups. The survey showed a high degree of involvement and satisfaction by fathers was evident in the environments prior to birth and during preschool. In contrast, the focus groups raised some concerns about the support of fathers. Fathers were often seen as ‘helpers’ but not a central figure in parenting. In addition, many new fathers found it difficult to communicate their sense of isolation and felt that support services were unable to assist them.

The main recommendations of the report were:

- There is a need to reduce the effect of myths and negative stereotypes about fathers.
- More research is needed to identify specific skills and processes that would enable service providers to best meet the needs of fathers. The authors also suggested that men are involved in all aspects of this research.
- There is a need to develop educational programmes that focus on the needs of fathers.
- There is a need to develop an advocacy service for fathers.

3.7 The support of fathers in settings such as Playcentre and playgroups

Literature on the support, or otherwise, of fathers in playgroups primarily relies on case studies or small-scale qualitative research – for example, in the US, Radin (1988), in Australia, Grbich (1992) and in New Zealand, Callister (1994). Based on similar methods, a history of Playcentre in New Zealand provides some guide to attitudes to fathers, as well as attitudes by fathers, to being involved in settings designed to support both children and parents (Callister, 1998). In parallel, Playcentre itself has undergone some transformations reflecting primarily changing roles for mothers and, to a lesser degree, fathers. After a long period of growth, there have been declining enrolments, reflecting primarily the decline in the traditional ‘mother at home’ two-parent family and little growth in the ‘father at home’ couple (Callister, 1999).

Fathers have been involved, in a variety of ways, in Playcentre since its foundation. However, their main involvement has been in fund-raising and

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31 It is recognised that playgroups and Playcentre are different in terms of structure and regulation. Playcentres are formally recognised, licensed, parent-led institutions that require NZQA-qualified members. Playgroups are informal institutions, exempt from licensing, and funded quite differently to Playcentres. However, a similarity is that they are both parent-led institutions relying heavily on parents as teachers.
providing labour for building projects. By 1976, a survey of 1,362 parents who assisted in caring for children at Playcentre indicated only six were male, or 0.4 per cent.\textsuperscript{32} By 2007, 31 years later, males as a percentage of unpaid caregivers had risen only to 3.1 per cent, and when hours were considered, the males put in 2.4 per cent of total time.\textsuperscript{33,34} While the numbers are still extremely small, they are significantly higher than the numbers of paid male caregivers in early childhood education (ECE) facilities in New Zealand (Farquhar, 2007).

A number of themes emerge out of the literature around men and Playcentre.

Over a long time period, there have been mixed reactions to father involvement in Playcentre. Men have been universally welcomed as fund-raisers and builders. The perceptions of fathers are that some fathers have felt very welcomed, some have felt their presence has been tolerated and some have felt unwelcome (Callister, 1999). Women in Playcentre have also expressed a range of opinions. Many have worked very hard to involve fathers, but some have seen Playcentre as primarily an institution supporting mothers and have not welcomed male involvement (Ibid).

There have been language and institutional barriers to men’s involvement. Terms like ‘mother help certificate’ have now disappeared from the official language. There had also been a long debate about whether Playcentre needed to change to make men feel comfortable, or men themselves needed to change to feel comfortable at Playcentre.

The traditional hours of Playcentre have not suited most men (and increasingly women) in paid work. Those fathers who have been able to be involved in the day-to-day running of centres have been shift-workers, full-time caregivers, those working part-time, the self-employed who have some flexibility over hours worked or unemployed fathers.

While there have been attempts to set up separate ‘father-friendly’ playgroups within the movement, these have not tended to last long. A number of New Zealand commentators have noted that ‘father only’ playgroups have not met with much success, indicating that either these have not been set up in a way that is attractive to fathers or that this is not what most fathers are seeking.

Paralleling trends in paid childcare provision, there is some indication that fathers became more conscious of the potential impact of being accused of child abuse in the 1990s (Callister, 1999). This may have affected their participation, but also their engagement with children in these settings. In 2008, it was proposed to amend the Education Act to police check all parents volunteering in groups such as Playcentre, an indication that society also has concerns about potential abuse.

\textsuperscript{34} Data are not available on the gender breakdown of parent helpers at kōhanga reo.
In her Australian setting, which appears to have much common ground with New Zealand, Grbich argues that most of the men in her study faced considerable reaction from their social groups – some responses were positive, some were positive with reservations, while the majority, initially, were negative (Grbich, 1992).

New Zealand research and media articles around the 1980s and 1990s support the idea that male caregivers faced a variety of reactions from positive to negative (Kedgley, 1985; Nelson Evening Mail, 1993; New Zealand Herald, 1992; The Listener, 1993). Hutchins (1993) writes of his experiences as a primary caregiver in small town New Zealand in the 1980s. He gives examples of men in hotel bars making derogatory comments and notes indifference and rudeness when he made contact with local parents at meetings and daycare centres (Hutchins, 1993:55). However, he goes on to note that, by the early 1990s, some attitudes had changed.

While overall attitudes may have changed, the Playcentre data indicate that, for whatever reason, only a minority of fathers want to engage, or can engage, in this type of parent-staffed ECE centre. More recent British research also indicates that, for many of the reasons set out for Playcentre, it is difficult to attract fathers to playgroups or related father support groups (Ghate, Shaw and Hazel, 2000; Lloyd, O’Brien and Lewis, undated). The Ghate et al study specifically noted that while fathers’ part of ‘father only’ support/playgroups valued them, they were not popular. They note that “[p]roviding a men’s group alone is unlikely to be a successful way to recruit large numbers of fathers” (Ghate et al, 2000:48).

3.8 Structural barriers to men’s greater participation in care

There are numerous other barriers to men’s increased participation in care, many of which may appear insignificant or minor in themselves, but send out negative messages about men as carers. These include, for example, private sector policies prohibiting men sitting next to unaccompanied minors on planes, the habitual placing of infant change tables in women’s rest rooms, the tendency of schools to call mothers first when children are injured during the day or not include separated fathers in school newsletter distributions, as well as the language that is sometimes used when framing discussions around men and care. While each of these factors appear minor, all these factors work in the same direction to undermine the validity of men as carers and, thus, together form a significant set of mutually reinforcing barriers to men’s greater participation in care.

3.9 Culture and ideology

**Gender-appropriate roles**

Gendered ideologies about appropriate roles for men and women are a significant barrier to men’s greater participation in care. Gendered assumptions and

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expectations of men and women shape what constitutes appropriate behaviour, such as perceiving women as the ‘nurturers’ in families and men as peripheral to the nurturer role. This flows through to non-parental care, with research showing that family members, especially those of older generations, act according to strong gender norms and thus discourage sons from performing traditionally female caring tasks (Campbell and Martin-Matthews, 2003).

Broad cultural ideals of appropriate roles for men and women act to exacerbate and reinforce the structural conditions they create. Singley and Hynes (2005:380) argue that“...biological, cultural, interactional, and institutional forces come together to influence men’s and women’s work and family involvement... These forces may sometimes be in conflict with each other, but often act in concert to reinforce a traditionally gendered division of labour. For example... the gender gap in earnings – an institutional factor – intersects with the dominant cultural imagery of women as primary caregivers to reproduce the traditional division between female caregiving and male breadwinning.

In discussing the impact of culture and ideology on participation in paid work and care, they go on to state that:
...multi-level factors... are filtered through the couple context itself, producing variation in the work arrangements of the individual men and women involved. Each spouse in a dual-earner couple brings a set of opportunities and constraints from his or her own work environment, which includes the work-family policies specific to the firm, informal relationships with supervisors, pay, access to other employer benefits such as health insurance and workplace norms. Both partners’ workplaces and the partners themselves are also embedded in a wider institutional and cultural context that includes the relative pay levels of women and men, federal- and state-level policies, and the dominant cultural imagery related to gender and parenting roles (Ibid:394).

Negative views of fathers
Research indicates that norms about fathers can act as a barrier to men’s participation in the care of their children. A study in New Zealand reported beliefs amongst new fathers that there are pervasive negative stereotypes regarding fathers and fathering, with the media reinforcing a variety of negative images of fathers (Mitchell and Chapman, 2006). Norms about the roles of fathers may also act as barriers to men’s greater participation in care, with some research finding that fathers tend to be viewed as a support person for their partner, rather than as a parent in their own right (Ibid).

In addition, while evidence about the positive benefits for child development associated with positive contact with fathers is increasing, there is also evidence that the rise in female-headed households is changing ideologies about the necessity of contact with fathers. Some understanding of the current situation of fathers may be gleaned from views expressed in the past. A Listener/Heylen poll conducted in New Zealand in 1994 found: “Only about half the women surveyed
this year thought that children needed both parents; in 1985, nearly two-thirds thought so.”\textsuperscript{36} (Listener/Heylen, 1994). Dr Gabrielle Maxwell of the Office of the Commissioner for Children explained this change:

Many more women are solo parents now than in 1985, “and they know the reality that they can provide for their children without a man”. These attitudes translated into the view that children need ‘one home base’ and that should be with their ‘primary caregiver’.\textsuperscript{37}

Hassall and Maxwell, in making the point, describe a primary caregiver according to the tasks performed, with a clear emphasis on those things usually undertaken by a mother and especially with younger children (Hassall and Maxwell, 1992). In response, Henaghan and Ferguson (1992:90) made the following statement on the issue:

The Hassall-Maxwell primary caregiver rule [defining the primary caregiver] is promoted as a child’s right. The main proponents of such a principle internationally have been writers who take a feminist perspective. The rule has been supported by such writers not on the basis of children’s rights but women’s rights in relation to their children.

\textsuperscript{36} While this survey suggests that there were significant changes in attitude between the 80s and 90s, the article is now 15 years old, and it is possible that there could have been an equally large change in attitude over the past 15 years. It is possible that the attitudes described by the Listener article don’t continue today.

\textsuperscript{37} This need only for mothers did not include sole financial provision. In an arguably one-sided arrangement, even those fathers who wish to play a full parenting role are expected to pay for their children, while not necessarily having a relationship with them.
4. SUPPORTS FOR MEN’S GREATER PARTICIPATION IN CARE

The supports for encouraging men’s greater participation in care are, for the most part, the policies and practices that would address the barriers identified in the previous section, as well as initiatives that provide incentives for men to increase their participation in care. As such, supports for encouraging men’s participation in care range from addressing barriers through relatively simple strategies (such as placing infant change tables in men’s restrooms) through to the more complex strategies such as examining the various components of family law for policies or practices that discriminate against fathers.

The literature reviewed focuses on supports for men’s participation in care in two inter-related areas: initiatives related to working arrangements, and leave policies that provide time off to care for children. It is likely that these two issues are prominent in the literature because a number of countries have implemented them and because, especially with regard to leave policies, evaluations of their impact have been undertaken both within countries and cross-nationally by a variety of researchers. Apart from these two areas, there is little international literature suggesting other policy options to support men’s participation in care. For example, the OECD’s Babies and Bosses Series (2007a) examines policies including tax and benefit systems, parental leave to care for children, flexible work arrangements, and childcare and out-of-school care support; however, with the exception of the discussion around encouraging men to use leave arrangements, the majority of their findings related to these areas are focused on facilitating the participation of women in paid work, rather than support for men in unpaid care.

Both leave policies and flexible work arrangements are important in relation to supporting men to increase their participation in care, but given that relatively few men do take leave to become full-time caregivers, the interplay between working arrangements and unpaid care is particularly important.

As both working arrangements and leave policies impact on the balance between paid and unpaid work undertaken by men and women, it is difficult to isolate their specific effects. However, both kinds of support have failed, as yet, to significantly change the participation of men in unpaid care. For example, while leave policies have been shown to increase the time men take off from work to care for young children, neither these nor flexible work arrangements have been shown to significantly address the ongoing gendered division of unpaid care for children. Given the relatively short time in which these supports have been available, it is perhaps not surprising that a fundamental shift has not occurred. This section of the paper reviews the evidence on the short- and long-term impacts of initiatives in these two areas.
4.1 Working arrangements that support men’s participation in care

Attempts to support men’s greater participation in unpaid care have centred on family-friendly flexible arrangements that, together with attempts to encourage men (and women) to use them, have the potential to allow men to organise their work in such a way that they can be more involved with their children or others they are caring for. These initiatives include a wide range of arrangements such as flexible start and finish times, working from home, annualised hours and being able to take time off for emergencies and make the time up at a later date.

A number of studies have shown that the presence of flexible work arrangements and fathers’ actual use of such arrangements are associated with less work-family conflict (for example, Allard, Haas and Hwang, 2007; Department of Labour, 2006). However, it is clear that men take up flexible work arrangements much less often than women, and when they do use such arrangements, they tend to be those that do not involve a reduction in working hours. This highlights the complexity of the relationship between culture and practice in this area.

Bittman et al (2004), in their comprehensive review of men’s use of flexible work arrangements in Australia, found that, amongst parents with children under the age of 12, fathers were far less likely than mothers to use flexible work arrangements to care for children, with 27 per cent of fathers doing so, compared with 68 per cent of mothers. The vast majority of men who reported using such arrangements used flexible start and finish times, with few using other arrangements such as part-time work or job sharing.

Singley and Hynes, in their 2005 study, found that even among full-time employed couples where both partners had access to, and made use of, workplace flexibility, mothers typically went further in incorporating changes into their daily work arrangements, while fathers were more likely to use such flexibility on an as-needed basis. They argue that one determinant of the use of such arrangements is workplace culture, which works “alongside gender-neutral work-family policies to differentially shape men’s and women’s behaviour” (Ibid:272).

The most recent Department of Labour work-life balance survey (2008) found that men were less likely to use work arrangements such as part-time work and study leave, and amongst employees without access to particular arrangements, men were less likely than women to indicate that they’d like to use arrangements such as part-time work, job sharing, sabbaticals and unpaid leave.

Many countries, including New Zealand, have enacted right-to-request policies that support employees in the process of requesting alternative ways of structuring work, and place an obligation on employers to consider such requests. While the right-to-request legislation is ostensibly gender neutral, Kilkey (2006) argues, in her history of work-family policy in the UK, that the downgrading of the right-to-request legislation from a right to flexible work has significant implications particularly for men. She argues that:
...both mothers and fathers were losers in the weakening of the proposal (for flex) from an automatic non-negotiable right to one which hinges on consent from and negotiation with an employer. Given evidence, however, that fathers are less likely than mothers to perceive that there is scope for negotiating more flexible working arrangements with their employers, the dilution of the proposal may have been worse for fathers... [a] survey of flexible working requests in the first few months of... the legislation revealed that requests from mothers outweighed those from fathers by a factor of almost four. Mothers were also more likely to have their requests accepted (Ibid:171).

The different take-up rates of these arrangements by men and women may contribute to the ongoing gendered division of unpaid care and labour force participation. Gerson and Jacobs (2001:221) argue that family-friendly policies can "threaten to re-create earlier forms of gender inequality" because policies target women and then penalise those who use them (Haas and Hwang, 2007). Similarly, Gornick and Meyers (2008:328) in their assessment of the work-family arrangements in six European countries, argue that the gender differences in the use of flexible work arrangements:
...could have deleterious effects on women’s advancement in the workplace if employers believe that it is costly to them when workers take up leave and other options and if they believe that women are much more likely than men to take up the available rights and services.

To the extent that these arrangements are gender neutral, men are also permitted to utilise them to assist with care responsibilities. However, as discussed above, labour market segregation (that, in turn, is perpetuated by women self-selecting into occupations where family-friendly working conditions are available) means that men are likely to be in better paying jobs characterised by work cultures that are unsympathetic to men’s care responsibilities, meaning that men may feel less able to use such arrangements even when they are theoretically available. The OECD (2007a) argue that the lesser use of workplace provisions, in turn, reinforces this gender segregation, and stresses the need to encourage men to take more advantage of such provisions. They argue (Ibid:59) that:
...the key to a more gender equitable employment outcome requires men to act upon the notion that work and family reconciliation is also their concern. As long as mothers rather than fathers reduce labour force participation in the presence of children, and make use of parental leave provisions, employers... perceive women as less committed to their career than men, and are therefore less likely to invest in female career opportunities. However, if fathers also take leave, reduce working hours or start using flextime arrangements when children are young, then in principle it becomes possible to ensure that both fathers and mothers have sufficient time to spend at work and with their children.

They also note the relationship between women’s higher take-up of family-friendly provisions, perceptions of lesser commitment to work, and gender segregation in the workforce:
...To some extent this is a vicious circle: since female workers have limited incentives to pursue a career if they perceive the likelihood of advancement is more limited than for men, they are indeed more likely to withdraw from the labour force, only to return, if at all, in jobs that are often low in job-content compared with their potential. (Ibid:21)

Gornick and Meyers (2008:344) further argue that:
Some of the Nordic countries report relatively high levels of occupational segregation, which are usually attributed to employers’ resistance to hiring or promoting women into more demanding positions. Although social insurance financing can lessen the costs of leave-taking for employers, they must still manage workers’ absences. Increasingly, critics of European policy models argue that generous work-family policies, in the end, both lower the “glass ceiling” for women and make it more impenetrable.

As such, as long as there are significant gender differences in the use of such arrangements, flexible work can act to reinforce women’s primary status as carers and secondary status in the labour market, by lowering their labour market experience and time devoted to paid work. As such, flexible work arrangements may undermine attempts to achieve a more equitable division of unpaid care. Stier and Lewin-Epstein (2007:239) examined the effect of work-family policies on households’ division of unpaid work in 25 countries and argue that “reduced-hours employment, generous paid-leave schemes, and public childcare arrangements permit women greater flexibility in coordinating employment with household tasks and relieve men of the responsibility for care work”. Similarly, Mandel and Semyonov (2005:965), in their review of earnings inequalities in 20 countries, argue that:
Because the gender division of labor within households continues to be highly unequal, policies that facilitate parental employment by reducing the conflicting demands of paid work and child care are directed in practice mainly at mothers. The implementation of such policies, in turn, lowers women’s work effort and encourages employers’ discrimination against women. Institutionalized options for parents to reduce working time or to take brief or prolonged absences from the labor market undoubtedly create a more flexible working environment for the individual parent. But insofar as it is mainly mothers who actually utilize these options, women are likely to suffer a collective economic penalty.

4.2 Leave policies to support men’s participation in care

Why focus on leave?
Policy level initiatives to support the greater participation of men in unpaid care have focused on parental leave policies, in part, because the birth of a child is a critical juncture where gendered inequalities in the division of paid and unpaid work, including care, become of major importance (see discussion above).

O’Brien et al (2007) show that, historically, there has been substantial debate about the likely effectiveness of various public policy proposals aimed at
increasing men’s involvement in the care and wellbeing of children, with most countries selecting leave as the key intervention. Such policies were based on the premise that, if men spent more time at home when children were young, either through reductions in working hours or leave following the birth of a child, this would result in them being more involved in their care in the future. For example, Tanaka and Waldfogel (2007:412) suggested that:

...such policies will promote fathers’ involvement with their children both by facilitating bonding and also by getting fathers involved early on, before mothers gain exclusive expertise about feeding, diaper changing and so on.

Similarly, Nepomnyaschy and Waldfogel (2007:429) noted that the argument in support of paternity leave was that:

...at least some fathers might be willing to be more involved in childcare tasks than they are currently, but are discouraged from those tasks because mothers spend more time with the child after the birth, and hence, become the experts on the child’s care.

While not examining leave, a 1998 longitudinal study in the US supports the idea that early involvement with children will affect men’s later participation in their care. Aldous et al (1998) found that early participation in childcare led to fathers’ continued involvement with their children when they were older, controlling for other factors. Fathers who were more active with their children at the time of the first wave of data collection also spent more time with their children 5 years later, when the second wave of data was collected. The authors thus argue that “once men are involved in looking after children, the pattern seems to continue over time” (Ibid:817). Similarly, the less frequently fathers cared for their infants or young children, the less they were involved with those children 5 years later. Unfortunately, the study does not control for other factors, such as fathers’ views about parenting, which may determine the level of their involvement with children.

Moss and O’Brien (2006) suggest that attention to leave for fathers has increased as countries respond to the growth of dual earner families, increasing awareness of work-life issues and growing expectations that men will be more actively involved with their children’s care. However, while there has been research on parental leave that explored the views of both mothers and fathers, there is little research on the provision and use of other domestic leave arrangements by gender, with research in this area having the potential to provide information on further strategies to support men’s caring.

**International leave policies and men’s take-up**

In their review of international research on fathering, Seward and Richter (2008:88) note that:

...employment leave of some type for fathers... has become one of the most popular means by which governments and employers worldwide try and enhance fathers’ involvement with their young children...
This section of the review considers recent changes to the policy settings of a selected group of countries. A number of other countries have recently made or proposed changes to their leave policies in order to support men’s greater participation in the care of their children. Moss (2008) notes that a number of countries have introduced incentives for fathers to take more leave, with these including additional bonus periods if fathers take a certain amount of basic leave (with this being the case in Estonia, Finland, Germany and Italy) or extra payments (including Sweden and Portugal).

However, within the countries where these changes have been made, the results have been less than ideal. Seward and Richter (2008:89) argue that:

Providing leaves for fathers has had mixed results, most of which are not very impressive. When both parents are eligible for leaves, mothers still take most of what is available. Initially, few fathers, if any, take leave and participation rates have increased very slowly. Scandinavian countries report the most success at getting fathers to take leave, but only after portions of parental leaves were made mandatory for fathers.

Similarly, in the introduction to an international review on leave policies, Moss (2008) reports that, when leave is a joint entitlement to be shared between partners, fathers’ use is low across all countries. For example, he reports that men make up less than 1 per cent of leave recipients in the Czech Republic, 2 per cent in Poland, 3 per cent in Austria and 5 per cent in Germany. In line with these figures, only 1 per cent of men surveyed for the New Zealand evaluation of paid parental leave reported using any of the shared entitlement (Department of Labour, 2007).

However, in countries where leave is both an individual entitlement for men, and is relatively well paid, men’s use is much higher. This is evident in the Nordic countries.

**Sweden**

The Nordic countries stand out for their generosity in the area of paid leave for men. Sweden is the most generous, offering 480 days of paid parental leave, of which 60 are ring-fenced for men. In addition, fathers can take 10 days paid paternity leave. The first 13 months of parental leave is paid at 80 per cent of usual earnings up to a threshold, with the next 3 months paid at a low flat rate and the remainder unpaid. In addition to ring-fencing leave for men, in 2008, Sweden has introduced a gender equality bonus, which provides the parent with the lower wage an additional tax reduction when the parent with the higher wage stays at home.\(^{38}\) As such, the bonus provides a financial incentive to couples to share parental leave more equally.

Almost all (90 per cent) of fathers of children born in 1998 took some parental leave, with the majority of fathers taking this leave when their children were 13–15 months old (Haas, 2008). By the end of 2005, fathers were taking just under

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\(^{38}\) It is unclear whether this initiative has become law, or whether it is still in process.
20 per cent of all leave days. Fathers also took a third of all leave to care for sick children.

**Norway**
Norway offers a total of 54 weeks paid parental leave, of which 6 (since 2006) are reserved for the father. Men can also take 2 weeks unpaid leave around the birth of the child (the ‘daddy days’. ) Brandth and Kvande (2008) note that there are currently proposals under discussion to increase the amount of leave taken by fathers, with proposals suggesting a tripartite split of leave or the division of leave such that men and women would each be entitled to one-quarter of the leave, with the remaining half available to be shared. While the debate is still underway, Brandth and Kvande suggest that it is likely change will be made in the near future.

In the years before the introduction of an individual entitlement to parental leave for men, less than 4 per cent of fathers took some parental leave. However, in 2003, 89 per cent of fathers took leave. Most men take only the father’s entitlements, with more than 70 per cent taking 5 or more weeks. Only 15 per cent of fathers take up any portion of the shared leave (Brandth and Kvande, 2008).

**Iceland**
Significant changes were made to entitlements for parental leave in Iceland in 2000, with these coming into full effect in 2003. Since then, parents are entitled to 3 months paid leave each, and 3 months to share, with these 9 months paid at 80 per cent of salary. As such, Iceland offers the longest individual paid entitlement to fathers.

Einarsdottir and Petursdottir (2008) report that, in 2005, 89 fathers took a period of leave for every 100 mothers taking leave, with fathers taking about a third of all days of leave taken by parents (an average of 95 days leave compared with 179 for mothers). About one in five fathers (19.2 per cent) used some of the parents’ shared entitlement.

**Finland**
Fathers in Finland are entitled to 18 days paternity leave, with a further 12 day ‘bonus’ for fathers who use the last 2 weeks of the portion of parental leave that is available for either parent. This time is paid at 70 per cent of annual earnings, up to a threshold, with a lower percentage payment for fathers who earn over the threshold. Fathers can also take a share of 158 days of parental leave, of which the first 30 days are paid at 75 per cent of earnings, again up to a threshold with a lower percentage for higher earners. Salmi, Lammi-Taskula and Takala (2008) note that a new system is being discussed that would offer 18 months of leave in a tripartite division; that is 6 months ring-fenced for each parent and 6 months to be shared.

In 2006, 70 per cent of fathers took paternity leave. The average length of the leave taken was 14 working days. However, only 9 per cent of fathers (n=5,059
fathers) took the new bonus leave period (i.e. they had also taken the last 2 weeks of the preceding parental leave).

**Slovenia**
In 2005, Slovenia’s new parental system was fully implemented. Since then, fathers are entitled to 90 days of paternity leave, 3 weeks of which are paid at full earnings up to a ceiling. The remaining days are paid at a low flat rate. In addition, fathers can share 37 weeks of parental leave, which are paid at full earnings up to a ceiling.

In 2003, the year paternity leave was introduced, 63 per cent of fathers took up to 15 days of paternity leave, with this increasing to 72 per cent in 2004. Research suggests that most fathers (91 per cent in 2004) do not take more than 15 days of paternity leave because their earnings are not fully compensated during the remaining entitlement. Only 2 per cent of fathers took parental leave in 2003, despite it being paid at 100 per cent of earnings up to a ceiling.

**Canada – Quebec**
Fathers in most of Canada are not entitled to any paternity leave, but can take a share of 37 weeks of parental leave, which is paid at 55 per cent of earnings up to a ceiling. However, in 2006, Quebec launched a separate parental leave benefit system. Under this programme, fathers are entitled to up to 5 weeks at 70 per cent of earnings, or 3 weeks at 75 per cent of earnings. They can then share either 55 weeks of parental leave paid at 70 per cent of income up to a ceiling for 25 weeks and 55 per cent for the remaining 30 weeks, or take a total of 40 weeks paid at 75 per cent of income.

On average, in 2005, 14.5 per cent of eligible Canadian fathers took up some parental leave, with this national figure rising to 20 per cent in 2006, mainly due to the impact of changes in Quebec. In 2005, 22 per cent of new fathers in Quebec took parental leave, with this rising dramatically to 48.4 per cent in 2006 when the new system was implemented.

**Spain**
In 2007, Spain implemented 15 days of paternity leave, paid at 100 per cent of earnings up to a ceiling. Fathers also have an individual entitlement of up to 3 years unpaid parental leave.

In 2005, fathers made up 4.5 per cent of the parents taking up parental leave. Early estimates of the impact of the new paternity leave system are that 45 per cent of fathers of newborns took up the leave in 2007 (Escobedo, 2008).

**Portugal**
Fathers are entitled to 5 days of paid paternity leave at 100 per cent of earnings, followed by 3 months of unpaid leave; however, fathers can also take 15 ‘daddy days’ paid at 100 per cent of their earnings, with no ceiling on payment, if they take them immediately after the fifth day of paternity leave or immediately after maternity leave.
Portugal is unique in that, in 2004, it introduced an obligatory 5 day paternity leave. However, the proportion of fathers who take this leave, while slowly rising, is far from 100 per cent. Wall and Leitao (2008) report that 37 per cent of fathers took paternity leave in 2004, rising to 39 per cent and 41 per cent in 2005 and 2006 respectively.\(^{39}\) A similar slow increase is evident in the use of the additional 15 days of paid leave for fathers, with 28 per cent of fathers taking this leave in 2004, rising to 33 per cent in 2006. There is no information available on men’s take-up of shared parental leave, but as leave is unpaid, usage is estimated to be very low.

As the above figures indicate, evaluations of parental leave policies on men’s participation in unpaid care work are not overwhelmingly promising, showing that, even while men take up leave that is ring-fenced solely for their use at high rates, women still use the vast majority of leave. Bruning and Plantenga (1999:208) note that, across countries:

> In spite of all the differences and in spite of all the dynamics, there remains one constant element: parental leave refers primarily to leave taken by mothers; the role of fathers is disappointing.

Moss (2008) points out that leave policies are used differentially not only between men and women. Leave usage also differs between parents with varying levels of education and income, and different kinds of employment, both individually, and in relation to their partners. As such, he highlights that the impact of leave policies is far from uniform.

Because of the differences in length of leave taken by men and women, a number of researchers have highlighted the unintended negative impacts on women’s labour force participation. For example, in their comparison of Nordic countries’ leave policies with those of 16 other Western countries, Gupta et al (2008:79) argue that:

> Certain negative boomerang effects from parental leave schemes arise, however, due to mothers taking on average much longer periods of leave than fathers... Particularly, the gender pay gap appears to have widened most at the top of the wage distribution as a result of these policies, which we term a ‘welfare state-based glass ceiling’.

**New Zealand**

As noted above, in New Zealand, if both are eligible, parents are theoretically able to share equally the (relatively short) period of leave available.

In the 2007 evaluation of parental leave in New Zealand, 82 per cent of fathers took some kind of leave around the time of the birth of their child. However, almost no fathers took paid parental leave, with only 1 per cent of the fathers interviewed taking any of the shared entitlement. Mothers who could have transferred some leave were asked if they considered doing so, and 72 per cent said they did not consider such a transfer. The main reasons given for this were: that it is more important for the mother to be bonding (67 per cent); more

\(^{39}\) It is not clear in the literature how the leave can be obligatory but subject to low take-up.
important for the mother to be breastfeeding (60 per cent); more important for
the mother to have a period of recovery from birth (51 per cent); and just under
half (44 per cent) stated that the money available to their partner would not be
enough. Those who were willing to transfer were more likely to be the main
income earner, to work full-time and to have been given some kind of benefit
from their employer such as space for breastfeeding or childcare facilities.

Equally, fathers were asked what would prevent them taking up paid parental
leave. The two strongest reasons were related to biological factors –
breastfeeding (79 per cent stated that this would influence them to a large
extent) and mother’s recovery from birth (75 per cent). The need to maintain
their income was also important for many, but not all, fathers.

If there are short periods of leave, and breastfeeding is a norm in the society,
then there are real barriers to men taking leave (Galtry and Callister, 2005). This
suggests that a potential support to encourage men to be more involved with
their newborn children would be to enable them to take leave concurrently with
the leave taken by the mother.

**Men’s leave taking and their involvement with their children**

Many countries have focused their attempts to increase men’s participation in
unpaid care by providing leave policies, on the grounds that this will encourage
men’s ongoing participation in care beyond the leave period. Tanaka and
Waldfogel (2007:412) note, however, that there is limited literature on the links
between fathers’ leave-taking and their involvement with their child.

Our review of the literature found a limited body of evidence for the positive
impact of leave on future engagement of fathers with their children. Haas and
Hwang (2005) found that the amount of leave taken by fathers had a modest
positive impact on the number of hours fathers with children under the age of 12
spent in childcare and the frequency with which they engaged in physical care
tasks such as preparing food and taking the child to the doctor. Those fathers
who had taken more than 90 days of leave were significantly more likely to
undertake these tasks and, in addition, were more likely to comfort, talk with and
put a child to bed.

In their later study of 365 fathers in Sweden, Haas and Hwang (2008) reported
that fathers who had taken more days of parental leave were significantly more
likely to report they sometimes had solo responsibility for children, spent more
time doing things for or with children on workdays and were more engaged in
childcare tasks including physical caregiving, as well as in activities that
constituted emotional caregiving. However, it was the amount of leave taken,
rather than the fact of taking any leave, that was important. Fathers who took
more days of leave reported significantly more satisfaction with contact with their
children. They concluded that their study suggested:

...that fathers simply taking leave, for any period of time, will have little
impact on men’s participation in childcare and relationships with children
after the leave is over. Encouraging fathers to take longer leaves holds
more promise in terms of bringing about more sharing of childcare in the home (Ibid:14).

Using a large sample of 9,592 children in the US, Tanaka and Waldfogel (2007) found that taking parental leave was related to fathers being more involved with the care of the child 8–12 months later. They examined the use of leave and fathers’ involvement in four specific activities and found that fathers who took any leave after the birth were 25 per cent more likely to change nappies and 19 per cent more likely to feed and to get up at night, when the child was aged 8–12 months.

While these studies have shown a strong correlation between length of leave and subsequent involvement in care, they have not been able to determine the causal direction of this relationship. It is possible that men who want to be more involved fathers both take more leave and are more involved with the care of their children as their children grow up.

For example, Nepomnyaschy and Waldfogel (2007) surveyed a large (n=4,638) sample of US fathers and examined the length of leave taken at the child’s birth and their involvement with the child when the child was 9 months old. They found that fathers who took longer leave were more involved in child care-taking activities 9 months after the birth, even after controlling for a range of father, mother and child characteristics. However, they note that:

...establishing a causal link between leave-taking and subsequent care-taking is challenging. While it may be the case that giving fathers the opportunity to take more leave leads them to be more involved later, it is also possible that both leave-taking and care-taking are driven by some other factor. Fathers who take leave may simply be more committed fathers, and this may be reflected both in their leave-taking and subsequent care-taking. In a similar vein, men who take leave may be less committed employees, and this may be reflected in both their taking leave and in being more involved in child care-taking subsequently... men who take leave, or take longer leave, may be a selected group who are less concerned about work and more willing to invest in family time, or more able to afford unpaid leave (Ibid:429).

A number of studies reviewed failed to find a link between parental leave and subsequent involvement with children. Seward, Yeatts, Zottarelli and Fletcher’s (2006) qualitative study failed to find a link between leave-taking and fathers’ spending time with children or taking responsibility for childcare, and noted that “...factor analyses and regression analyses on the same variables failed to find further support for the assertion that taking leave enhances fathers’ involvement with their children”. Similarly, Ekberg et al (2005:1), in their evaluation of the first Swedish `daddy month,’ reported that:

We find strong short term effects of incentives on male parental leave. However, we find no learning-by-doing, or specialization, effects: fathers in the treatment group do not have larger shares in the leave taken for care of sick children, which is our measure for household work.
In addition, a number of studies in Sweden show that neither workforce nor leave policies provided the magic bullet that allowed men and women to achieve the ideal balance between care and work. Van der Lippe, Jager and Kops (2006), in their cross-national comparison of work-family balance in European countries, found that, compared to seven other countries in the EU, men and women in Sweden experienced the least work-family balance, and as such, they concluded that family-friendly policies did not guarantee a better combination of work and care.

The case of Iceland also highlights that, even when there is a significant individual entitlement to parental leave for men, the details of policy design remain a crucial factor in determining the degree to which they can influence men’s involvement with the care of their children. Einarsdottir and Petursdottir (2008), in their evaluation of Iceland’s tripartite scheme, argue that the design of the policy, which allows leave to be taken in several short periods and by both parents concurrently, has encouraged:

...fathers to ‘pop’ in and out of employment, and not to assume primary responsibility for the care of their young child over a sustained period. Many fathers see leave as an opportunity to experience the child in different stages of development. They adopt the role of a secondary caregiver and plan their leave around their paid employment; this also leads to the leave being taken when it suits the timetable of the workplace (Moss, 2008:6).

Almost two-thirds (62 per cent) of fathers in their research divided their leave, while in 76 per cent of families, the mother and father were on leave together. Einarsdottir and Petursdottir (2008) thus conclude:

...women seem to be the ones shouldering the main responsibility for caring, as the take-up patterns seem to reveal, so they want longer leave. As the leave is designed now it does not encourage men to spend time alone with the child, so it does not guarantee the child time alone with the father (Ibid:88).

As such, across the literature, ring-fenced parental leave for men is judged as a necessary but far from sufficient condition to promote gender equality and shared responsibility for care.

**Impacts of leave on the overall division of care at the national level**

The literature cited above explored the relationship between men’s leave-taking and their subsequent involvement with their children, with a number of these studies concluding that men who take parental leave are more likely than men who do not take leave to engage in care for children after the leave period. However, a number of researchers have also examined the impact of leave policies on the overall gendered division of care at the national level.

Duvander et al (2005), in their analysis of the Swedish parental leave system, noted that, while Sweden has one of the most generous leave schemes, the scheme still has not had a significant impact in increasing the participation of men in unpaid care. They noted:
The flexibility of the Swedish system, with transferable leave rights, has the consequence that the lion’s share of parental leave days is still taken by mothers, which, among other things, makes it difficult for women to compete on equal terms with men in the labour market. Consequently, the gender-based division of parental leave may contribute to a preservation of traditional gender roles and inequalities. As the Swedish labour market is highly gender segregated, the cost of parenthood is not only unfairly divided between parents but also unfairly divided between the employers of men and women (Ibid:21).

Similarly, Gupta et al (2008:75) argued that, in Sweden:
...while the introduction and extension of the father quota had a significant effect on fathers’ use of paternal leave, the long-term effects on behaviour within the household, however, were minor.

Gislason, in his review of the impacts of Iceland’s tripartite division of parental leave, notes that regardless of the length of leave, mothers will use the majority of leave available to be shared, arguing that “the joint time becomes the mother’s time, and it does not appear to matter how long this time is...” (Gislason, 2007:16). Similarly, Kilkey (2006:168) argues that:

The experience of parental leave in some Nordic countries and Iceland... has been that only explicitly gendered policies, in the form of non-transferable (use it or lose it) father quotas... have the capacity (albeit limited) to engage fathers.

This suggests that, while having many other benefits, parental leave policies that are able to be allocated between partners at their discretion, are compensated at a low rate and are relatively long in duration are a questionable tool for advancing greater participation of men in care activities. Such policies, while delivering a range of positive impacts, may undermine gender equality by reinforcing women’s lesser participation in the labour force and cementing gendered and traditional inequalities in the patterns of paid and unpaid work.

However, the relationship between longer periods of leave for fathers and their later involvement with children implies that encouraging fathers to take a more equal period of leave holds promise as a strategy for increasing men’s participation in unpaid care. In Iceland, for example, Gislason (2007) reported evidence of different kinds of long-term impacts of men’s use of parental leave. He argued that, over time, more fathers are taking leave, the average number of days fathers take is increasing, fewer fathers are taking less than the minimum right and more fathers are sharing the joint entitlement. He also argues that there are some indications that the changes to parental leave policy have had a levelling effect on the status of men and women in the labour market, although cautions that “…these clues are, however, neither clear not decisive” (Ibid:30). The report also suggests that there is evidence of a positive impact of the leave scheme on fertility.
Haas and Hwang (2008:100) also note that “encouraging fathers to take longer leaves holds the most promise in terms of bringing about more sharing of childcare in the home.” They argue that:

The amount of parental leave days taken had positive effects on several aspects of fathers’ participation in childcare and on their satisfaction with contact with children… however, the full potential of Sweden’s parental leave policy for degendering the division of labour for childcare will not likely be met until fathers are strongly encouraged by social policy to take a more equal portion of parental leave...

**Cross-national comparisons of leave settings and men’s participation in care**

Cross-national examinations of the leave policies of European countries have showed a positive correlation between the “father-friendliness” of leave provisions and the amount of time fathers spend caring for their children.

Smith and Williams (2007) explored the correlation between time spent caring by fathers and paternal leave legislation in 14 Western European countries, using an index they created to measure the father-friendliness of leave policy settings. The index included: whether leave was a family or individual right; whether there was a specific ring-fenced provision for men; whether the leave was paid and, if so, at what level; whether part-time leave was allowed; what the eligibility criteria for taking leave were; whether emergency leave to care for dependents was available and, if so, whether it was paid; and whether there was government encouragement for men to take leave through awareness programmes. They found that there was a significant positive association between the father-friendliness of national legislation and paternal time spent in unpaid care. However, their results were sensitive to the inclusion of Denmark and Finland in the analysis, a finding that indicates that these two countries contributed greatly to the overall positive correlation.

Hook (2006) used time use data from 20 countries to examine the relationship between national context and men’s unpaid work. She found that, in countries where men were eligible to take parental leave, men living with children did 19 minutes more of unpaid work per day, or 2.2 hours more per week, than did men living with children in countries not offering parental leave for men or men not living with children.

Gornick and Meyer (2008:339) note, however, that “correlations between policies and outcomes cannot establish causation, which might run in the opposite direction”.

**4.3 Other policies to increase men’s participation in care**

*Women’s increased labour force participation*

Greater participation by women in paid work potentially allows men to increase their participation in unpaid care work. Baxter (2007) notes that many women are able reduce their hours of employment to accommodate care needs because
of the longer hours worked by their spouses, implying that the reverse of this arrangement may also be true.

A number of recent analyses have argued that supporting women’s labour force participation may influence men’s participation in unpaid work, with researchers reporting not only modest cross-national variation in the participation of men in unpaid care according to the proportion of women in the labour force, but also interaction effects between individual variables and contextual measures attributable to the policy environment. In her study of 20 countries, Hook (2006) found that women’s greater aggregate employment rate predicted men’s greater time spent in domestic tasks, regardless of an individual couple’s employment status. In line with this, Cooke (2007a) argues that policies to support women’s labour force participation not only alter women’s level of individual resources, but also women’s aggregate level of these resources, with this, in turn, altering the effect of individual resources on couple negotiations about the division of paid and unpaid work.

Breen and Cooke (2005), using data from 22 countries, contend that the larger the proportion of economically autonomous women in a society, the more likely men as a group will share domestic unpaid work. Cooke (2007a) argues that this is because, where policies enhance women’s economic autonomy, the proportion of women desiring a gendered division of labour declines, to the point that men believe any female partner will expect a more egalitarian division of domestic tasks. However, the proportion of economically autonomous women must be sufficiently high to not only change men’s beliefs about what a partner would expect in the domestic sphere, but also their willingness to act on those beliefs (Ibid).

**Reductions in working hours**

A number of researchers conclude that a reduction in working hours would assist men to take on greater levels of care, with a number arguing that regulatory support for this reduction is necessary. Himmelweit and Land (2007) argue that a necessary condition for men to share care is for workers to be able to work hours that are compatible with sharing caring responsibilities, which, in turn, requires a reduction in working hours. Similarly, Hook (2006:643) argues that:

Regulations that decrease standard work time, such as legislation and collective agreements stipulating regular and maximum working hours, hours of operation, overtime compensation, and vacation time, increase the breadwinner’s time available for unpaid work.

Research on the impact of working time regulations in France following the introduction of the 35-hour working week has supported this argument. Fagnani (2007) found that almost all the men who stated a positive impact of the 35-hour week on their family lives emphasised the fact that they spent more time with their children, even when they lived separately from the mother. Similarly, Fagnani and Letablier (2004) found that the new working time arrangements encouraged a new pattern of sharing paid and unpaid work between the parents of young children, as fathers were spending more time with their children.
4.4 The role of the state in supporting men as carers

Policy support

Sjoberg’s (2004:119) analysis of 13 industrialised nations illustrates how government policies affect the “ways in which individuals can pursue their private lives and how they look upon the ‘proper role’ of both women and men in society”. In line with this, evaluations of leave entitlements aimed at supporting the greater participation of men in care work have highlighted the role of government policy in changing attitudes about the role of men as carers. Regarding the use of parental leave, Moss (2008:111) argues that:

It is…striking that fathers’ use of leave does respond to policy changes. The average number of days leave taken by men in Iceland has more than doubled between 2001 and 2003, in line with the extension of father-only leave over this period. The proportion of Norwegian men taking some leave has increased from 4 per cent to 89 per cent since the introduction of the 1 month father’s quota. Similarly, the proportion of leave days taken by men in Sweden doubled from 1997 to 2004, with the introduction and then the extension of a father’s quota, though the doubling to 2 months had a less dramatic effect than the initial introduction of a quota. Another striking example of the effect of policy change has been the number of fathers in Portugal taking the recently introduced paid parental leave, while the proportion of fathers taking parental leave in Canada has more than trebled since the extension of leave from 10 to 35 weeks.

While the impacts of the increased take-up of such leave have not thus far been overwhelming, it is clear that the implementation of such policy by the state has played a role in establishing a norm validating men’s participation in care, and legitimating men’s use of leave from work to undertake care activities. As such, the implementation of such policies also plays a role within workplaces by both establishing a norm for men’s use of leave and reducing the penalties associated with doing so. Brandth and Kvande (2001:264) argue that:

Because the state intervenes and establishes a norm for how the paternity quota is to be organised, it also provides the necessary legitimacy for taking leave from work. The time-account scheme, on the other hand, being an optional, non-standard solution, leaves much to negotiations between the father and the job. The optional character of this scheme has not created a majority practice among fathers and established itself as a norm in the same way as the paternity quota. As long as it is based on individual choice, it is difficult for the individual employee to set the limits for work and to mark the borders between work and home/leave... if leave is collectively granted and collectively taken, the risks associated with taking it, are perceived to disappear and fathers are able to act on their wish to be more involved with their children... As long as taking up family friendly policies is an individual option, the employee risks becoming a ‘time deviant’...

Similarly, Haas and Hwang (2007:75) note that “…government policies can drive change within companies. They... do this by affecting men’s “sense of entitlement” to supportive work policies and practices”.

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In addition, policies that support men’s participation in care provide men with negotiating power in their individual workplace settings. Brandth and Kvande (2001) argue that “…the state acts as a normative third party for parents in their negotiations with the company” (Ibid:263) and that “…both men and women need the legitimisation that state legislation collectively gives in order to be able to reduce their working hours” (Ibid:264).

As such, Haas and Hwang (2008:100) contend that: “Social policy that offers fathers the chance to take paid leave to be home with children removes one structural/institutional constraint to their becoming engaged and equal parents…” However, policy and regulations can also have a more indirect effect on the workplace by changing what is normative. Haas (2003:91) argues that:

...as organisations become more aware of parents’ needs, learn how to adapt to mandated leave, and discover the benefits leave taking can have for employees’ personal development, the family responsibilities of all workers may receive more attention and organisations may choose to supplement the benefits offered by national legislation.

The work of Cabrera et al (2000) highlights that the impact of state supports for men’s participation in care needs to be considered as returning longer-term benefits. They contend that a more equal distribution of paid and unpaid work will, in turn, support the increased participation of men in care in the next generation. Their research found that men whose fathers were involved in raising them were, in turn, more involved with their own children, took more responsibility for them, showed more warmth and more closely monitored their behaviours and activities. They concluded that:

The next generation of boys and girls will be more likely to experience mothers who work full-time outside the home and fathers who cook dinner. Consequently, children are being reared with different expectations about their future roles and those of their future partners (Ibid:133).

**Institutional support**

A further issue for government relates to how issues of gender equity have been considered. Significant resources have been invested in examining and addressing gender equity for women, particularly with regard to their participation in paid work. The Ministry of Women’s Affairs provides institutional support for gender issues specific to women, while the National Advisory Council on the Employment of Women provides support for women’s participation in paid work.

The focus on equity for women has been necessary and undeniably valuable; however, it seems appropriate to highlight that there is currently no specific institutional support for gender issues for men, such as increasing men’s participation in care. The lack of such support in itself sends a message about the importance of men’s caring, a message that is reinforced in many settings. For example, the recently released Global Gender Gap Report 2007, which measures the gap between men and women in key economic, political and social areas, uses ratio measures that stop at “1”: that is, they do not measure gender inequality when men under-perform women.
In their preface to the proceedings of an international conference on men and gender equality, the Finnish Minister for Social Affairs and Health and the European Union’s Commissioner for Employment, Social Affairs and Equal Opportunities (Haatainen and Spidla, 2006:9) note:

Historically, gender equality policy has been considered an issue of women and for women. This is for obvious reasons as women were and still are the under-represented sex. Women’s organisations have worked throughout the years bringing gender equality at the top of the political agenda, making changes possible. For the empowerment of women and the realisation of gender equality we should not limit our focus to women and their position and situation in life and in society. We must also pay more attention to how gender equality policy and the promotion of gender equality are related to men. Taking men and boys into account is not contradictory to the empowerment of women. Quite the contrary, it creates gender equality policy that benefits both women and men and the society as a whole.

Alternative models for addressing issues of gender equity are evident in Finland and Austria. The Council for Gender Equality (or TANE) is one of Finland’s three equality authorities. Established in 1972, it is a permanent parliamentary body working under the Ministry of Social Affairs and Health and fulfilling an advisory role in state administration. Its task is to promote gender equality in society. TANE is a forum where politicians, authorities, researchers and NGOs collaborate to develop Finnish gender equality policy (Anttila, 2006).

A second alternative model is evident in the Austrian Unit for Men’s Policy, which was established in March 2001 in the Federal Ministry of Social Security and Generations. The Department's task is to lay the foundations for a nationwide men’s policy, with areas within scope including reconciliation of family life and work, men’s health, relationship and family issues (including problems related to divorce), as well as gender-sensitive education of boys (Berchtold, 2006). The unit released their first National Report on Men’s Policy in 2006, with this covering a broad range of issues including the consequences of divorce for men, and fatherhood as an identity. However, it is unclear whether the unit has been subject to any evaluations.

4.5 Education, income and decision-making in child-rearing couples: looking forward

Historically, it has been often been argued that men have had a comparative advantage in paid work. While some writers have brought biology into these arguments, an important determinant of this advantage has been that men have, in the past, had greater access to education, particularly tertiary education (for example, Becker, 1996). However, since the time that Becker was writing, there has been a major change in educational outcomes in almost all industrialised countries, including New Zealand (Callister, Newell, Perry and Scott, 2006). Across almost all broad levels of tertiary education, young women are better educated than young men. For example, in New Zealand, the 2006 Census shows that, in the 25–29 age group – a key couple-forming age group where decisions
are often being made about parenthood – there are considerably more well educated women than men. For bachelor degrees in this age group, there were 28,110 women as against 18,780 men; for masters, 3,156 women as against 2,952 men. Only in the area of no formal qualifications do men outnumber women (17,553 as against 13,698 women). These changes may have an influence on sharing of paid and unpaid work in households in the future. They may also influence family form, and more women in the future may have children on their own.

Education is one factor, but so too are the earnings from such education. As noted, a key factor seen as determining who might be a primary breadwinner and who might be a main caregiver is relative wage rates, that is, the pay gap between women and men. However, this gap has been changing over time, and the size of the gap changes quite significantly over a life-cycle. A number of studies indicate that, while many factors influence inequalities in wages, one important determinant of the pay gap is gendered roles adopted after having a child (for example, Budig and England, 2002).

How the changes in education and income earning potential will affect decisions about caregiving will be seen over the next couple of decades, but the changes should theoretically make it easier for women to be primary income earners in couples and thus make it easier to support their male partner in an expanded caregiving role.
5. IMPLICATIONS FOR NEW ZEALAND, CONCLUSIONS AND AREAS FOR FURTHER WORK

5.1 Implications for New Zealand – what is the goal?

This survey of the literature shows that men are already involved in providing unpaid care. While, on average, men spend significantly less time in unpaid care than do women, in some areas, there have been increases in time spent caring. The data also show much diversity within the averages: some men undertake a considerable amount of care, others relatively little. In addition, broad measures of care disguise quite complex gendered divisions of unpaid caring work.

Adding to the complexity, there have been major changes in the last few decades in paid work, in family structures, in educational attainment, in legislative frameworks and in attitudes. There have also been changes in perceptions of appropriate roles for men as carers (for example, it is now standard for fathers to attend the births of their children, something unheard of 60 years ago.) Some changes, such as more acceptance of equality between women and men, assist in creating more opportunities for sharing unpaid work; others, such as the growth of single mother-headed families, can create barriers to the sharing of care.

A key issue that arises when the literature on caring is considered is the overall goal when it comes to men’s and women's paid work and unpaid care. Are we wanting:
- equal opportunity for men and women to participate in care (i.e. removing barriers to choice, while recognising that outcomes may differ)?
- an increase in men’s participation in care (i.e. the goal being to get men to do more care, without necessarily striving for equality in care)?
- men and women undertaking an equal amount of care (in total and/or in specific areas of care)?

Some of these questions are embedded in the literature we considered, with some literature focusing on equal outcomes measures, while others focus more on equality of opportunity.

The choice of goal has significant implications for the strategies used to accomplish it. Achieving equality of outcomes is highly likely to require more aggressive or extreme strategies, such as subsidies or tax breaks for those who undertake paid care with higher rates for women than men, or subsidies/ tax breaks for women in paid work, while achieving equality in opportunity may best be achieved by softer touch social marketing strategies as well as the removal of the barriers detailed in this paper.

We also need to consider what sort of balance we are aiming for in paid and unpaid work. Do we want a society where much of the care is undertaken on an unpaid basis or is it better to push for even more care to become paid work? For example, if we think children will have better outcomes if they are in out-of-home childcare from early in their life than being at home with parents, this will influence thinking around the design of parental leave. Equally, if we think older
people should ‘age in place’ where possible rather than being in retirement homes, then this will affect the balance of paid and unpaid care. In addition, we need to consider other goals of society. For example, if we support exclusive breastfeeding for up to 2 years, how does this affect aims for parents to share a short, or even relatively long, period of paid parental leave?

### 5.2 Conclusions

Overall, the survey of the literature shows that there are a significant number of barriers to men’s greater participation in care. These include workplace cultures and practices such as long working hours, policy settings that reinforce traditional divisions of paid and unpaid work, cultural norms and ideologies about appropriate roles for men and women, and the applications of family and criminal law. All of these undermine the ability, and possibly the desire, of men to participate in care work. There are also a vast number of more subtle and minor barriers, which together form a mutually reinforcing set of conditions that act to impede men’s participation in unpaid care.

Much of the literature on care focuses on the care of children. To encourage men to participate more in such care, a key focus of governments internationally has been on parental leave, with the Nordic countries implementing the most extensive provisions. The history of the progressive implementation of leave schemes to support men’s participation in unpaid care shows that there was initially significant resistance in some Nordic countries to the notion of the ‘daddy months’ but that the implementation of the policy changed attitudes around the division of unpaid work.

Some evaluations show that ring-fenced parental leave entitlements for men increase their participation in care, even when the leave period is over. However, even where leave entitlements are the most generous, when the division of such entitlements are left to individual couples, men take up only their sole entitlement to leave, and thus, the overall division of care remains largely unchanged. New Zealand’s parental leave evaluation found a similar pattern, with women using the vast majority of entitlements, and both men and women reporting that it was more important for mothers to use the full leave entitlement.

What are the lessons for New Zealand? The literature suggests that there is no silver bullet that will address men’s lesser participation in care and that, even in the Nordic countries, entrenched gendered patterns of care remain. However, the literature also suggests efforts to remove barriers to men’s participation in care could reap rewards.

The review of the literature also highlighted that men often receive mixed messages about their appropriate role in the care of children and other family members. Awareness-raising campaigns encourage men to be more involved with their children, while simultaneously, there has been a decline in the number of men in paid care roles. There are also competing messages within the academic literature as researchers engage over debate as to whether fathers should encourage their children to engage in risk-taking play or whether they should be more nurturing.
Because of these messages, and the other structural and cultural barriers that impede men’s greater participation in care, it is perhaps not surprising that men are significantly less involved in the care of children and other family members than women, particularly when it is remembered that the issue of gender equality in care has arisen only in the last 50 years. In contrast, traditional roles have a significantly longer history! However, significant change in the distribution of care is unlikely without government support, either in removing barriers to choice, incentivising care by men, or both.

International research indicates that there is a role for policy in setting norms about men’s involvement in care. A policy package that includes generous ring-fenced leave entitlements for men and incentives for partners to divide shared leave entitlements more equitably may further this change; however, care is needed around the language and messaging of any government work in the area. In line with this, the literature highlights the need for recognition of competing policy priorities, with the result that family-friendly leave legislation may further reinforce barriers to the participation of men in unpaid care.

Changes to working arrangements and working hours are potentially more powerful in facilitating men’s participation in care; however, research internationally indicates that men are significantly less likely to take up such arrangements, even when they are available. As such, to realise the potential of these supports would require a significant cultural shift, both within the workplace and more broadly.

Another policy issue relates to the mix of care that is unpaid and carried out in the home and that which is carried out in institutional settings such as childcare centres, after-school care and residential or paid home care for the elderly. ‘Professionalising’ such care reduces the total amount of unpaid care needed to be shared between women and men and presents potentially an easier gender equity target. However, professionalisation of care brings with it major issues of gendered occupational segregation within the paid care sector.

A further issue for government is that, while there is specific institutional support for gender issues specific to women (such as the work of the Ministry of Women’s Affairs) and for women’s participation in paid work (such as the National Advisory Council on the Employment of Women), there is currently no specific institutional support for increasing men’s participation in care or for gender issues specific to men. The lack of such support in itself sends a message about the importance of men’s caring – a message that is reinforced in many settings.

Some important social and demographic drivers may already be in place that seem likely to help change the distribution of care. There are now considerably more well-educated young women than men, and this change in qualifications and income earning may provide incentives to encourage men’s greater participation in unpaid care and women’s increased labour force participation.
In conclusion, this review suggests that there may be significant benefits for men, women, children and the economy in increasing men’s participation in care; however, the strategies to provide this support are complex and will require a multi-faceted and sometimes sensitive approach from a number of directions.

### 5.3 Areas for further work

As indicated earlier, the literature on men as carers has been expanding worldwide. Yet despite all this new literature, this review has highlighted a number of gaps in our understanding of the barriers and supports to men’s greater participation in care, particularly with regard to the New Zealand context. Part of the reason for the gaps is the recognition of the increasing diversity of men’s lives. Even just in relation to fathers, there is now an interest in gay fathers, military fathers, separated fathers, fathers with disabilities, full-time fathers and fathers who work long hours. Each group could easily be the subject of further research. There is also an increasing recognition that cultural context matters. For example, while we may learn something useful from studies of black fathers in US prisons, there will also be factors that limit the applicability of those results to New Zealand.

A key area where further work is needed is the analysis of the larger New Zealand official datasets. In a number of areas discussed in this paper, data are available, but have not been analysed. One example of this is the trend in the number of men who are not in the labour force and state their main activity is looking after children; work is also needed to determine why, despite the growth in non-employment of prime-aged men and the growth of men looking after children, overall, fewer men than might have been expected have left the labour force to become full-time caregivers. A further example cited in this paper relates to 2006 Census analysis of the working hours of fathers with young children. In addition, in the 1999 time use survey, some couple level data were collected but never used.

A number of datasets will become available in the next few years, including data from re-runs of the childcare and time use surveys. Attention to the research questions that shape the data collected in these is necessary to ensure that these instruments maximise the opportunity to collect data relevant to both women and men as carers. Full utilisation of the data these surveys will provide may also require specific funding streams.

Major benefits could also be gained if New Zealand deposited data with some of the major international institutes, including the Multinational Time Use Survey (Essex) and Luxembourg Income Survey. The lack of participation in cross-national datasets such as these significantly limits the ability to compare New Zealand data with data gathered in other countries.

Another key area where further work is needed centres on gathering information on men’s preferences for the division of paid work and unpaid care. There is little evidence analysing the drivers of couple-level decisions about the divisions of work and care, and the degree to which current arrangements reflect the preferences of both men and women. Men’s views on a number of important
issues of relevance to this paper are not routinely collected, for example, we know little internationally about men’s fertility preferences.

While there has been research on parental leave that explored the views of both mothers and fathers, there is little research on the provision and use of other domestic leave arrangements by gender, with research in this area having the potential to provide information on further strategies to support men’s caring.

In addition, further investigation is needed on the impact on parenting of residing away from children, including the impact of imprisonment. For example, there is little New Zealand evidence on the impact of imprisonment on men’s parenting and limited data on differences in this area by ethnicity.

Finally, as the bulk of this paper indicates, research on men as carers for other relatives or friends is significantly more limited. The ageing population, coupled with the current proportions of older men providing care to their spouses, suggests that more work in this area is essential.
APPENDIX 1: METHODOLOGY

The methodology for this review was a literature search using a number of databases, including Sociological Abstracts and PsychInfo, and the Sage and Proquest databases. We also accessed the Sloan Work-Family database.

Using key terms, we also searched literature using Google Scholar, which gave the advantage of broadening the review beyond discipline-specific databases and beyond academic journals (to include conference proceedings and government reports, such as the evaluations of leave policies in European countries).

Following the identification of a number of key studies, we continued to work iteratively, tracing sources backwards using a bibliographic method. At the conclusion of the data search, we provided the list of sources to the Department of Labour for their approval.

A variety of sources are referenced in this review. We report the results of both small qualitative and multi-national quantitative studies, as well as some opinion pieces by leading scholars in this field. This was necessary as there were some areas covered in the review where little larger-scale research is available (an example being in the area of men providing care to people other than their own children.) In addition, we wanted to ensure a mix of robust quantitative studies for cross-national perspectives, as well as more in-depth qualitative studies that provide information on family experiences. However, with each of the citations included and particularly with the smaller qualitative studies, we critically examined the methods used and eliminated results where we believed methodologies or measures were not robust.

Other selection criteria for inclusion in this review included the source of the article (for example, whether the research was published in a well respected and peer-reviewed journal) and the reputation of the author. We also included references that were extensively cited (to ensure key documents or studies were included).

The review mostly covers research published in the last 10 years, with a focus on the newest findings. However, in order to comment on changes in this area, we do cite a number of older references.
BIBLIOGRAPHY


