

Social Policy Report

Giving Child and Youth Development Knowledge Away

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Parental Leave Policies: An Essential Ingredient in Early Childhood Education and Care Policies

Sheila B. Kamerman

Summary

Parental leaves are employment-related policies that were first enacted as maternity policies more than a century ago to protect the physical health of working women at the time of childbirth. Child rearing, parental, and paternity leaves were developed more recently, in response to the needs of working women (and parents), but also out of concern for child well-being. A European Union (EU) directive mandating a paid 14 week maternity leave was adopted as a health and safety measure in 1992 and a directive mandating a three-month parental leave was enacted in 1998.

- The major trend in the 1980s and 1990s has been to extend the leave policy to create a real alternative to out-of-home-infant care and to make it a stronger instrument of gender equity.
- Job-protected leaves for childbirth have become the policy norm in almost all industrialized countries, paid for through sickness (temporary disability) benefits, unemployment or family allowance systems, or as a separate social insurance benefit.
- Cross-nationally these policies vary in eligibility criteria, leave duration, benefit level, and take-up. Europe is creating a new standard, with parental leaves becoming increasingly normative and the leave increasingly able to substitute for out-of-home care if the parents wish.
- The United States is alone among the advanced industrialized countries in the briefness of its statutory leave and among the very few countries with an unpaid leave.
- The critical policy difference cross-nationally is philosophical, and has to do with the extent to which the policy is designed to
 - support family work and child rearing and to create an incentive for women to leave the labor force when children are very young; or
 - facilitate women's work outside the home and help reconcile work and family life, by protecting and promoting the well-being of children while their parent(s) are in the labor force.
- Policies covering about a year of fully job-protected leave and targeted on parents with strong prior labor force attachment, with benefits covering close to full wage replacements, and with a guaranteed place for a child in good quality, affordable, out-of-home care appear to be achieving both support for "parental choice" and support for child well-being.
- Policies providing more extensive leaves, with low level benefits, limited job protection, and with insufficient places for toddlers in care, seem to be creating an incentive for women (in particular, wives) to leave the workforce and remain at home. A key issue is the duration of the leave and the level of the benefit.
- Research suggests that there have been no negative consequences of the policies for women or for employers where short and intermediate term leaves are concerned; but there may be negative consequences for women who take extended leaves (e.g. three years) in particular, if they take multiple sequential leaves.
- The research on consequences for children is much more limited but there do appear to have been some positive impacts. As a result, child well-being is increasingly being discussed as an important component of the policy, and deserves more attention by researchers.

Social Policy Report

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From the Editor

Since the last issue of *Social Policy Report*, I have moved to the Psychology Department at Fordham University. Fordham's Developmental Program is an Applied Developmental Program and this was one of the major reasons for my move. My work at Fordham reflects similar goals to those of *SPR*, to promote the application of developmental science so that the social work we do for children and families is the best it can be and to demonstrate the importance of developmental science to the well-being of children and families.

In our last issue, I expressed the appreciation of the Society to Nancy Thomas for her years of service in editing *Social Policy Report*. I may have misled readers a bit in acknowledging Nancy without reference to the history that preceded her. *Social Policy Report* was founded by Lindsay Chase Lansdale, now at Northwestern University, and Barbara Everett, now in Mendocino, California, when they directed the Washington D.C. office of SRCD. The Society owes a similar debt of gratitude to Lindsay and Barbara. Their years in D. C. were active ones. The Congressional Science Fellowships were running; the "social policy" committee (now Committee on Child Development, Public Policy and Public Information) had been formed. The addition of the *Report* was key, and it is to Lindsay and Barbara that we must turn with thanks for the existence of *SPR* today. We are also pleased that those active times in regard to policy have returned for the Society with a new Congressional Science Fellows Program (with initial funding from the William T. Grant Foundation) and a new Washington staff person in the form of Lauren Fasig.

In this issue of *SPR*, Sheila Kammerman, a pioneer in international children's policy reviews the status of family support policies, focusing mainly on parental leave. In reviewing a variety of countries' current policies, it is clear that the U.S. is an outlier in its lack of supportive policies for families. Both industrialized and developing countries recognize the importance of supporting families. Jeanne Brooks-Gunn and I hope that this issue will highlight the U.S.'s unusual position in this regard and perhaps provide some momentum for change. At a minimum, it should address the importance of research in documenting the impact of such policies on children and families.

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Parental Leave Policies: An Essential Ingredient in Early Childhood Education and Care Policies

Sheila B. Kamerman

Infant care — care for children in the first year of life — and to some extent toddler care — care for children aged 1-2 years of age — constitute a key issue in the current international discussion of early childhood education and care (ECEC). Public discussion of this issue, internationally, has been driven — and still is — by rising rates of maternal employment. In addition, in the U.S., it is driven by the policy change that occurred in 1996 when the Personal Responsibility and Work Opportunities Reconciliation Act established Temporary Assistance to Needy Families (TANF) as a replacement for Aid to Families With Dependent Children (AFDC), and completed a three-decade transition from providing financial support for poor mothers of young children to remain at home, to one of expecting them to seek and accept employment from the time their babies are three months of age. (Only 12 states exempt poor mothers from the work requirement until the infant's first birthday.) So general trends in female labor force participation internationally have made care of the under 3s a “front burner” issue in child and family policy debates; and social policy mandates have raised it even higher on the agenda of the U.S. public and professional debate.

In 1998-99, an astonishing 58 percent of all women with infants (children under age 1) were in the labor force in the U. S. regardless of whether the mothers were single or married. Fifty-nine percent of infants in two-parent families and 65 percent of those in female-headed families had mothers in the labor force. (Bureau of Labor Statistics, 2000). This is in stark contrast to earlier patterns. For example, in 1970, only 27 percent of the mothers of infants (and 26 percent of married mothers) were in the workforce, and about 46 percent in 1985. It is this stunning change in patterns of parenting over the last 30 years, and how children are being reared, that has made infant care such a pressing issue today.

The policy task now is one of confronting reality and acknowledging diverse preferences. If almost 60 percent of mothers of infants are in the labor force in the U.S. and a significant portion of those mothers are working full time, how can we assure these babies of adequate care? How can we promote the positive development of very young children whose mothers are in the labor force? Group programs may be an appropriate, essential, and effective component of an ECEC policy and program package yet still may not be

satisfactory as the *sole* form of care for babies or the *sole* choice for parents.

About 25 years ago, as labor force participation rates of women with young children began to rise in several European countries, infant and toddler care — supply, quality, affordability, costs, and financing — emerged as a critical child and family policy issue in Europe (Kamerman, 1980; Kamerman & Kahn, 1981). As late as the mid 1980s, in a study of child care in the U.S. (Kahn & Kamerman, 1987), we reported that “No national data are available on child care places for infants and toddlers. Data on group facilities serving these very young children are limited, and data on family day care arrangements, the primary source of out-of-home care for infants and toddlers, are soft at best...” (p.6). In a 1990 study, Hofferth, Brayfield, Deich and Holcomb (1991) found that although 51 percent of mothers of infants were in the labor force, about 34 percent of their children were cared for in centers or family day care homes (FDC) and 38 percent by parents. By the mid 1990s the percentage in centers or FDC homes had increased to about 39 percent and exclusive parental care declined to 27 percent (Phillips & Adams, in press). Given the rates of maternal employment among mothers of infants and the reports from the field, it would seem that shortages have remained in the supply of infant and toddler care right up to the present.

Much of the policy debate in the U.S. and elsewhere in the West regarding ECEC has been framed by a preference for a policy supporting “parental choice.” Similarly, much of the evidence regarding parental choice is found in parental behavior — What kind of ECEC do parents use? However, inferring preference from behavior is accurate only when parents have real options to choose from. When it comes to infant care in the U.S. parents do not have real “choice.” However, in some other countries they do.

As early as 1976, it was pointed out in a report prepared for the Federal Department of Health Education, and Welfare (DHEW) and the Organization for Economic Cooperation and Development (OECD) on child care (Kamerman, 1976) that maternity (and parental and child rearing) leaves were an important component of child care policy and often determined when out-of-home ECEC programs were needed in other countries. In a series of subsequent research studies (Kahn & Kamerman, 1987; Kamerman, 1988, in press; Kamerman & Kahn, 1978, 1981, 1991, 1995; Kamerman, Kahn, & Kingston, 1983) and in testimony before Congress (*Children's Well Being*, 1990; *testimony of Sheila Kamerman*, 1984, 1985, *testimony of Sheila Kamerman and Alfred Kahn*, 1988), this theme was repeated again and again.

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There may not yet be full recognition of the link between these two policy systems (ECEC services and parental leave policies) in the U.S., but child development professionals, child policy analysts, and a growing number of child advocates now recognize it. It is this conviction regarding the importance of parental leave as a component of ECEC policy that provides the context for this article.

In what follows, I will define and describe briefly, the different types of leave policies that exist in the advanced industrialized countries — those countries that are usually referred to as the “OECD countries” (Organization for Economic Cooperation and Development; see Appendix). Second, I will describe the international developments, including the historical context in which these policies were developed and the patterns of leave provision in the OECD countries. Third, I will provide several country illustrations and explain how their leave policies are linked with other ECEC policies and programs, and how they have been transformed in some countries from a policy to protect women’s and children’s health to one that facilitates employment, and then increasingly, to one designed to foster child well-being. Fourth, I will summarize the U.S. policy and describe how it developed. I will conclude with some comments about the significance of these policies, the dilemmas they raise, and the implications for the U.S.

DEFINING THE TERMS

Parental leave policies include several different types of leaves that permit women, or men and women, to take time off from work at the time of childbirth, adoption, or other family needs. The specific types of leaves include

- *Maternity leaves:* Job-protected leaves from employment for employed women at the time they are due to give birth and following childbirth (or adoption in some countries). In some countries the pre-birth leave is compulsory as is a 6-10 week leave following birth. In some other countries beneficiaries may combine pre- with post-birth leave.
- *Paternity leaves:* Job-protected leaves from employment for fathers, for many of the same purposes, but especially for reasons of gender equity. They are usually much briefer than maternity leaves, function as supplements to such leaves, and are especially important when a second child is born and the first child requires care while mother and newborn may need help.
- *Parental leaves:* These are gender-neutral, job-protected leaves from employment which usually follow

maternity leaves and permit either men or women to take advantage of the leave policy and share it or choose which of them will use it. A portion of these leaves is usually reserved for women, to ensure a period of physical convalescence and recovery after childbirth. Recently, in some countries, some portion of the parental leave is reserved for fathers, on a “use it or lose it” basis, to create an incentive for fathers to play a more active parenting role. In some countries, these supplementary leaves are unpaid.

- *Child Rearing leaves:* These are leaves from employment, which developed in some countries as a supplement to maternity leaves or as a variation on parental leaves. Longer than maternity leaves, sometimes not limited to parents with a prior work attachment, and paid at a much lower level, the policy is often described as a kind of “mother’s wage.” In some countries the cash benefit may be the equivalent of the government subsidy for out-of-home ECEC and used either to supplement family income while one parent is at home or to purchase private care.
- *Family leaves* which cover reasons other than the arrival of a new baby and can permit time off for the care of an ill child or other family members, or time to accompany a child to school for the first time, or to visit a child’s school.

These statutory leaves, provided for by law to employed parents (although sometimes, in some countries, they cover the unemployed and those with no labor force attachment as well) protect the jobs of the individuals who take the leave, until they return to work. Leaves provided as a result of collective bargaining agreements or voluntarily by employers may supplement the statutory provision and raise the benefit level and/or extend its duration. Although the leaves may be paid or unpaid, the vast majority of countries provide for a *paid* leave, replacing some portion of prior wages up to a ceiling. Among the OECD countries, only South Korea and Switzerland have no national statutory provision (and Switzerland does have coverage at the canton or “state” level); and only the U.S., Australia, and New Zealand have no paid leave (See Table 1). It is generally recognized that unless paid, most working mothers/parents cannot take advantage of the leave, since their families’ standard of living depends on their wages. In some countries, the basic paid leave is supplemented by an additional, (“second tier”) more extensive leave — paid at a lower rate — or an unpaid leave. For example, Germany provides an unpaid child rearing leave that permits a parent to take off a third year after childbirth,

Table 1.0
Maternity, Paternity, and Parental Leaves in the OECD Countries 1997-1999

Country	Duration of Leave	Percentage of Wage Replaced	Other (Paternity leave, Lone Parent, and additional parental leaves)
Australia	1 year parental	Unpaid	
Austria	16 weeks - maternity; 2 years - parental	100% Partial	
Belgium	15 weeks - maternity; 3 months parental for each parent	75-80%; low flat rate benefit	Paternity, 3 days
Canada	15 weeks maternity; additional 2 weeks; Additional parental leave for 10 weeks	55% unpaid 55 %	
Czech Republic	28 weeks maternity	69%	
Denmark	28 weeks, including maternity (+2 weeks paternity)	60% 60%	Parental leave for 12 months at 90% of Unemployment Insurance Benefit (UIB) rate.
Finland	18 weeks maternity + 26 weeks parental	70%	Parental/childrearing leave until child is age 3, paid at flat rate.
France	16 weeks maternity for first 2 children including compulsory 6 weeks before birth; more time for subsequent and multiple births. Post-birth leave applies to adoption as well.	100% for maternity and paternity leaves; flat rate for parental leave.	Paternity, 3 days; Parental leave with 2 or more children up to child's 3 rd birthday, at flat rate, income-tested.
Germany	14 weeks - maternity + 3 years - parental/child rearing leave	100% Flat rate/Income tested – 2 years; Unpaid – 1 year	
Greece	16 weeks maternity; 3.5 months parental leave for each parent.	50% unpaid	
Hungary	24 weeks maternity; parental/childrearing leave up to child's 3 rd birthday	100% income-tested, flat rate	
Iceland	6 months, all except first month is parental leave	Flat rate + dependent benefit	
Ireland	14 weeks - maternity including up to 4 weeks before birth	70%	14 weeks unpaid parental leave; both maternity and parental leave cover adoption; 3 days paid family or emergency leave
Italy	5 months - maternity, 2 before birth; Additional 6 months parental leave	80% 30 %	
Japan	14 weeks (6 pre and 8 post birth); Additional year up to child's first birthday	60% unpaid	

Continued on next page

Table 1.0 continued
Maternity, Paternity, and Parental Leaves in the OECD Countries 1997-1999

Country	Duration of Leave	Percentage of Wage Replaced	Other (Paternity leave, Lone Parent, and additional parental leaves)
Korea-South	No statutory leave	—	
Luxembourg	16 weeks - maternity	100%	
Mexico	12 weeks - maternity	100%	
Netherlands	16 weeks - maternity; + 6 months parental leave per parent	100% Unempl'd Mo. at lower rate. unpaid	
New Zealand	52 weeks parental leave, including 14 week maternity leave	unpaid	2 weeks paternity leave, unpaid. An income-tested maternity leave for poor single mothers.
Norway	52 weeks parental leave (or 42 weeks at 100%), including maternity; Child rearing leave up to age 2	80% flat rate	Paternity leave, 4 weeks, use it or lose it.
Poland	16 weeks maternity leave for first child; 18 for subsequent births; 26 weeks for multiple births Additional 24 month leave	100% flat rate	Additional 12 months for single parent.
Portugal	6 months - maternity; Additional 24 months - parental	100% unpaid	
Spain	16 weeks - maternity; Additional parental leave until child is 3.	100% unpaid	2 days paternity leave at 100%
Sweden	1 year parental leave (incl. maternity) + 3 months + 3 months	80% flat-rate Unpaid	Maternity leave may begin 60 days prior to expected delivery and ends 6 weeks after birth. Parental leave - 18 months - can be used until child's 8 th birthday; + 6 months for each child if multiple births.
Switzerland	16 weeks - maternity	Varies by Canton	
Turkey	12 weeks - maternity	66 2/3%	
United Kingdom	18 weeks maternity; 13 weeks parental leave	6 weeks at 90% 12 weeks at flat rate unpaid	Can be taken up to child's 5 th birthday
United States	12 weeks family leave, includes maternity	Unpaid	

Source: Kamerman, S.B.

after 14 weeks paid at full wages and two years paid at a modest flat rate. In Sweden, the final three months of the 18-month parental leave is unpaid, supplementing one year paid at 80 percent of prior wages and three months at a low flat rate. The leave policy is usually part of employment policy while the cash benefit replacing wages foregone is usually paid for through the social insurance (social security) system — linked to sickness (temporary disability) benefits primarily but sometimes to unemployment benefits (as in Canada), or free-standing parent benefits (as in Sweden).

INTERNATIONAL DEVELOPMENTS IN PARENTAL LEAVE POLICIES

History

Paid *maternity leaves* were first established as part of the invention and enactment of social insurance by Bismarck in the Germany of the 1880s. The first national social insurance law was enacted in 1883, providing for health insurance, paid sick leave, and paid maternity leaves. France followed soon after (Koven & Michel, 1993). In 1919 the International Labor Organization, (ILO, 1980,1985) adopted its first convention dealing with maternity protection, covering women working in industry and commerce, and provided that they be entitled to a maternity leave of 12 weeks in two equal parts preceding and following childbirth, with the part following birth being compulsory; and that while on leave women should receive a cash benefit that would be at least two-thirds of prior earnings. This convention was revised and extended further in 1952. Two significant innovations began at the end of the 1960s and the beginning of the 1970s: the development of paid child rearing leaves in the eastern and central European countries and the development of paid parental leaves in the Nordic countries.

In reviewing the history of maternity, paternity, and parental leave policies, the 1970s appear to have been a watershed: Labor force participation rates of women began to rise dramatically in many of the advanced industrialized countries. The trend in the OECD countries turned clearly toward longer and more generous maternity leaves; and the movement toward parental leaves was launched. And there emerged a growing recognition that these leaves constituted an important component of child care policies, in particular policies regarding infant care.

A European Union (EU) directive mandating a paid 14 week maternity leave was adopted as a health and safety measure in 1992 (European Commission, 1994) and a directive mandating a three-month parental leave was enacted in 1998. It launched new parental leave policies in several EU countries.

The ILO Convention on Maternity Protection (1999, No. 103, 1952) as revised was adopted in June 2000,¹ strengthening protection over previous ILO instruments in many areas and broadening the scope of coverage. The recommended length of maternity leave is 14 weeks, including “a period of six weeks compulsory leave after childbirth, unless otherwise agreed at the national level by the government and the representative organizations of employers and workers.” It also says “additional leave shall be provided before or after the maternity leave period in the case of illness, complications or risk of complications arising out of pregnancy or childbirth.”

The new instrument says that cash benefits shall be provided “at a level which ensures that the woman can maintain herself and her child in proper conditions of health and with a suitable standard of living,” that the benefits should be provided through public funds, with no individual employer being responsible for the cost of the benefit, unless national law specifies otherwise. It also provides for job protection for working women while on leave.

This is now the new world standard. Worldwide, 128 countries of the 172 responding to the International Social Security Association in 1999 provided at least some paid and job-protected maternity leave.² Sixteen weeks is the average basic paid leave, typically including 6-8 weeks before and after childbirth. In some countries, this leave is mandatory and in others, voluntary. In most of the countries providing a paid leave, it is a maternity leave. In almost half, the cash benefit replaces the full wage (or the maximum covered under social insurance). Some countries also provide a lump sum “birth allowance,” or a nursing allowance, or an in-kind childbirth “package” with clothing, pharmaceutical items, etc. Most benefits are funded and paid through the same system as sickness benefits (paid sick leave); and in 95 of the countries both health and medical care as well as maternity leaves and benefits are provided. In short, paid maternity leaves at the time of childbirth (and increasingly adoption as well) have become standard around the world, and on average are significantly longer than the twelve-week, unpaid family leave available in the U.S. (see

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below) Moreover, in other countries, these leaves are in addition to paid sick leaves when workers are ill and paid vacations (while in the U.S. employers can, under the law, require that employees taking family leave first use any paid sick or vacation leave they are entitled to).

The Patterns of Leave Provision in the OECD Countries

The standard for the European Union (EU) or the OECD countries goes well beyond the ILO convention. Among the 29 OECD countries, by and large, the most advanced industrialized countries, the average childbirth-related leave (maternity, paternity, and parental leaves) is 44 weeks — 10 months, with additional time provided in some countries for leaves to take care of an ill child. The average duration of the paid leave is 36 weeks, typically including 14-16 weeks of paid maternity leave, supplemented by a parental or child rearing leave. In some cases both the pre-and post-birth “maternity” component are mandatory, while in others the two can be added together and used after childbirth. In all but the U.S., health care or health insurance is available to all women at the time of childbirth.

Eight countries provide a *paid paternity leave*: Austria (6 months); Belgium (3 days); Denmark (10 days); Spain (2 days); France (3 days); Norway (2 weeks); Finland (1 week); and Sweden (2 weeks). Three of these — Denmark Norway, and Sweden — have recently extended their paid parental leaves (see below) and mandated that at least one month of this addition be targeted on fathers; if they do not take it, it is “lost.”

Family leaves to care for an ill child or family member are beginning to be established in Europe and a brief unpaid family leave exists in the U.S. as well.

Twenty-one countries provide a *supplementary parental leave*, of which 13 are paid, seven until the baby is 1 1/2 — 3 years old. In all these countries, the policy covers adoption as well. The only difference in the policies is the adoption leave is limited to the post-childbirth period and counted either from the day the child arrives in the parents’ home, or the day parents leave to collect the child, if from another

country. The 6 longest leaves (2-3 years) tend to be described as “*child rearing*” as well as parental leaves and include Finland, Germany, and Norway — and Austria is discussing such a policy. The major focus in Finland and Norway is to support parental choice by giving parents a cash benefit that can be used either to supplement income or to purchase care, at parents’ option.

Family leaves to care for an ill child or family member are beginning to be established in Europe and a brief unpaid family leave exists in the U.S. as well (see below). A EU directive has mandated such leaves. Medical evidence and documentation must be provided regarding the child or family member’s illness. Sweden also provides paid time off to visit a child’s school (and Greece provides unpaid time off for this purpose.)

In more than half the OECD countries (16), the *cash benefit* provided while on leave replaces between 70 percent of prior wages to the full wage (or the maximum covered under social insurance). In another 7 countries the benefit replaces between 50 and 70 percent of the wage. Only in the UK and Iceland is the overall benefit less than this. Typically, when the parental (or child rearing) leave is separate from the maternity leave, the benefit level is lower than the maternity benefit. On the other hand, paternity benefits tend to be fully paid, and parallel benefits for civil servants in many countries tend to fully replace wages as well. Except in Canada and the Nordic countries, the benefit is not included in taxable income.

In almost all countries, a prior work history is the major *qualifying criterion* for the leave and benefit. Except for Germany’s child rearing leave which is available to almost all parents, Sweden and Norway, where a small minimum benefit is provided to any woman covered under health insurance (and housewives can be covered), and Denmark, where unemployed mothers can be covered by a modest benefit for the extended parental leave, eligibility for these benefits is restricted to women who have been employed for at least some minimum time before childbirth. A woman’s work history, and the length of time she has been employed, may affect the level of the benefit she receives, and the availability of the benefit creates either a work incentive or disincentive, depending on how it is designed. Just about all these benefits — whether maternity, paternity, parental, or family leaves — are universal, that is they are available to all working women regardless of income. The only exceptions are New Zealand, which provides an income-tested maternity leave benefit to poor single mothers only, Germany, where the income ceiling for its child rearing supplementary benefit is such that about 80 percent of all new parents qualify, and France, where the benefit covering the supplementary parental leave is income-tested.

Many countries now define *adoptive mothers* — and *parents* — as eligible for the benefits as well as biological mothers/parents, and this is clearly a growing trend, in the OECD countries. The rationale is that new parents, whether at the time of birth or adoption, require time to adapt to a new role and a new child — as do the children.

Coverage is extensive in almost all countries (Kammerman & Kahn, 1995; Kamerman, 2000). Virtually all employed women who give birth are covered, and almost all take up the entitlement to a paid leave — although some, especially highly educated, highly paid women, may not take the full entitlement to a long leave. In several countries women who are covered by collective bargaining agreements, or women (or men) who are civil servants, are likely to have more generous benefits (both longer and at higher levels). Data regarding take-up of the right to an unpaid leave are not readily available in most countries.

Coverage for fathers is extensive as well, in those countries providing paternity or parental leaves. Take up is surprisingly high with regard to *paternity* leaves, with more than half of the qualified fathers taking the leave in Denmark, Finland, and Norway and more than 90 percent in Sweden. In part, take-up is high for paternity leaves because they are of very short duration (a few days up to two weeks) and follow immediately after childbirth or have been established in those countries where female labor force participation rates are high and gender equity is an explicit goal (the Nordic countries). In contrast, however, fathers' use of the longer *parental* leave time remains quite low. Thus, for example, only about 1 percent of fathers in Germany took advantage of the right to the child rearing leave, less than 5 percent used the parental leave in Denmark and Finland. Sweden is unique here in that more than half of the eligible fathers in the mid 1990s took some parental leave in their child's first year of life, up from 2 percent when the policy was first established in 1974 and more than double the figure for the early 1980s. But the actual portion of possible time that fathers used is quite low (about 11 percent), except for time to care for an ill child. Here, almost as many fathers take time off as mothers. Those fathers who are most likely to use the parental leave are those who are civil servants (they usually get their full wage while on leave), or white collar workers, who are older, more highly educated, or have partners who are highly educated and have high salaries.

In short, all the countries in the European Union and most of the OECD countries have supplemented or modi-

fied their maternity leave policies and made them parental leaves; and most have extended them to make them longer. In effect, Europe is creating a new standard, with parental leaves becoming increasingly normative and the leave increasingly able to substitute for out-of-home infant care — and even toddler care — if parents wish. Finally, family leaves, for reasons other than childbirth or adoption, are emerging in Europe, but only slowly, largely to permit the care of an ill child or family member — and for very brief periods of time.

Financing, Costs, and Impacts

In almost all the countries, although the specific benefit system may vary, the cash benefit is part of the social insurance or social security system. Benefits are *financed* in whatever way social insurance is funded in the country, as either a contributory or a non-contributory benefit. Where it is a contributory benefit, it is usually the employer and the government who bear the burden, although in several countries the employee contributes directly.

Most benefits are paid through the sickness (or temporary disability) benefit system but in Canada (for both the maternity and parental leave), Austria, and Denmark (for the second tier benefit) it is the unemployment insurance system that funds and delivers the benefit.

In a few countries, the benefit is paid by the employer, who is required by law to provide the leave and pay the benefit. Thus, for example, in Germany, the basic maternity leave is paid at 100 percent of wages, with employers required to “top off” the statutory benefit to cover employees' full wages. And in Italy, most working women receive their full wage despite the fact that the government benefit replaces only 30 percent of the second tier benefit, because they are covered by collective bargaining agreements.

Gornick and Meyers (1999) found that family leave policies experienced extraordinary growth between 1980 and the mid 1990s, increasing in 16 of the 19 OECD countries in their study. They state that “Investments in family leave claimed a *larger* share of the family policy pie in most countries by the middle 1990s than they did in 1980” (p. 24, emphasis in original). On average, the share of family policy spending devoted to family leave grew by one-third during these years, from 15-20 percent. Spending on leave policies not only increased, but rose as a share of social spending generally and of per capita GDP as well.

All the countries in the European Union and most of the OECD countries have supplemented or modified their maternity leave policies and made them parental leaves.

Core and Koutsogeorgopoulou (1995) underscore the modest cost of these benefits. They write in their report of parental leave policies in the OECD countries, that if the costs of maternity, paternity, and parental benefits were added together, they would constitute only a small portion of GDP. They exceed one percent in only Finland and Sweden and reach 2 percent only in Sweden. They argue that percentages are rising in most OECD countries because of the rising numbers of beneficiaries and the longer duration of benefits. They would have risen even faster during the 1990s, were unemployment rates not so high, constraining eligibility for employment-related benefits. They also point out that actual costs are lower than the total of direct expenditures would suggest, since part of the costs are offset by savings in other systems, for example, unemployment and child care. Earlier, maternal and child health benefits were documented as the result of the basic leave.

Now, also on the benefit side, is the fact that these leaves stimulate higher rates of female labor force participation and that government revenue rises as more women enter the labor force and contribute through the payment of income taxes. Other benefits, which are harder to quantify or monetize, are the positive consequences for workers trying to reconcile work and family life.

The *impacts* of these policies on women, children, families are difficult to document. One comparative study of the economic consequences of parental leave policies in Europe found that parental leave is associated with increases in women's employment; but if the leaves are extended, they are associated with reductions in their relative wages (Ruhm, 1998) and with stereotypical roles for women (Moss & Deven, 1999).

Most studies of the impact of maternity and parental leave policies, thus far, have focused primarily on the consequences for women: for maternal employment or for mother's wages over time, etc. Few have paid attention to child impacts. However, another study by Ruhm (1998, May) investigates whether rights to paid parental leave improve child health as measured by birth weights and infant or child mortality. Ruhm found that "parental leave has favorable and possibly cost-effective impacts on pediatric health" (p. 27). The most likely reason, according to Ruhm, is that leaves provide parents with additional time to invest in their young children. More generous leave policies appeared to reduce infant and young child mortality. "In particular, there is a much stronger negative relationship between leave durations and post-neonatal mortality or fatalities between the first and fifth birthday than for perinatal mortality, neonatal deaths, or the incidence of low birth weight. The evidence further suggests that parental leave may be a cost-effective method of bettering child health."³

Still another standard for assessing the impact of leave policies is to analyze the policy implications and impacts of these policies. Most importantly, the duration of the leaves, the benefit levels, and the proportion of parents (especially mothers) eligible for the benefit and covered by it — are likely to have consequences for ECEC services. As a consequence, these policies need to be seen as a component of ECEC policies. This is revealed most dramatically in the policies of the Nordic countries (in particular, Denmark, Finland, Norway, Sweden), where the very young children of working parents are all guaranteed a place in a subsidized, good quality ECEC program from the age of 1. The announcement of this guarantee followed the development of parental leave policies that provided for one or more years. The current assumption in these countries is that infants will be home with a parent on leave. In contrast, most countries with brief leaves and high female labor force participation rates (e.g., Britain and France, for example) are under great pressure to expand programs for the under 3s (and those with low female labor force participation or high female unemployment rates or limited resources are left to debate whether the need for expansion is just ahead, or whether they can wait).

A FEW COUNTRY ILLUSTRATIONS

In all the country cases described below, women and their children have full health care or health insurance that covers pre-natal care, pregnancy-related care, hospitalization, and post-natal and pediatric care — in addition to job-protection, benefit, and seniority protection.

The Swedish Parental Leave and Parent Insurance policy is the exemplar for advocates of parental leaves — and of gender equity. It is comprehensive, generous, and flexible. What is more, it was only modestly cut during the tough economic times of the mid-1990s and has even been enhanced recently. The Swedish parent insurance benefit provides an 18-month, job-protected parental leave including 14 weeks of maternity leave, with up to 6 weeks before birth and two weeks of paternity leave after childbirth. An additional one month leave is now available, but for fathers only; if fathers do not take at least the one month, the right to the leave is lost. The first year of leave is paid at 80 percent of wages up to a ceiling (down from 90 percent in the early 1990s) and 100 percent for civil servants. Another three months is paid at a low flat rate, and the final three months are unpaid, but still job-protected. In addition, parents of children under age 8 have the right to work 75 percent of normal working time, but they are paid only at that rate, once they have used up their parental leave benefit. The leave can be prorated over a more extended period (until the child

is age 8) if desired. It can be shared between the parents and the cash benefit that is provided through the social insurance system can be used to cover full or part-time work. Mothers who are not in the labor force still qualify for a minimum benefit. All eligible mothers take advantage of the leave. More than 75 percent of eligible fathers took some part of the leave in 1994, but this amounted to only 11.4 percent of all parental leave taken. Nonetheless, on average, fathers were on leave for 44 days (Swedish Information Service, 1996).

In addition to the right of working parents to take paid time off to care for an ill child under age 12, employed grandparents now also have the right to take time off to care for an ill grandchild, if such an arrangement is preferred. Finally, all children of working parents and students are guaranteed a place in subsidized care from the age of one and parents have the right to paid time off to visit their child's school or accompany a child on his/her first day at school.

Finland provides an unusual maternity, parental, and child-rearing leave policy package, combined with child care services, that includes an 18-week maternity leave beginning 30-50 days before expected birth, followed by a 26-week parental leave, and an additional paternity leave. The leaves may be extended in the case of multiple or complex births. These leaves are paid for by a benefit that replaces 70 percent of prior wages. In addition, Finland provides a child rearing leave paid at a low flat rate, until a child is age 3 which can be used by either parent home on a full-time or part-time basis from work, or to pay for a non-subsidized place in a child care facility or to pay for in-home care. A final component of this package is that parents are guaranteed a place in a subsidized child care program (a) if they do not use this child rearing (home care) allowance for their under-3-year old or (b) from the time their child is age 3. Parents are guaranteed the right to work part-time as well; and they have the right to take time off with pay, to care for an ill child at home.

Germany, by far the largest country in the EU, also provides a child rearing leave. Germany provides a 14-week maternity leave for working mothers (six weeks before and eight after birth), with a cash benefit that is "topped off" by their employers to fully replace wages. In addition, Germany provides a child rearing (parental) leave until a child is three years old, whether or not parents are currently employed but on condition that one parent remains at home or only works part time (and receives a pro-rated benefit). The benefit is

provided at a flat rate for the first two years, and is worth about \$350 a month (it was worth more but has not been adjusted in value as the mark has declined, nor since first established in 1986). It is income tested, but the income ceiling is set sufficiently high that about 80 percent of new parents can qualify for it. Despite its being a "parental" benefit, only about 1 percent of eligible fathers take advantage of it while almost all mothers do. But given its modest level, it is used overwhelmingly by married women at-home with employed husbands; it is not sufficient to support a single mother unless she has other income. In effect it is a policy targeted on traditional families.

Sickness benefits can be used to cover up to five days paid family leave to care for an ill child under 8, at home.

Austria provides a 16 week, mandatory leave, for working mothers (8 weeks before and 8 after birth), with a cash benefit that fully replaces wages. In addition, Austria provides a two year job-protected leave paid for 18 months at a relatively low level, through the unemployment insurance system. The last 6 months are paid only if the leave is taken by the father (or the other parent). In

The Swedish Parental Leave and Parent Insurance policy is the exemplar for advocates of parental leaves — and of gender equity.

addition, there is currently a proposal being debated regarding a kind of child-rearing allowance, with parents having the option of using the cash benefit to purchase care (in-home or out-of-home) or to support an at-home role for a parent. (In the past, the two-year leave and benefit was limited to lone mothers but is now available to all working mothers; and the proposal includes making the benefit available to at-home mothers as well as employed mothers.)

Spain is an example of a relatively poor country that nonetheless provides a sixteen week paid maternity leave (18 weeks in the case of multiple births) at childbirth, with up to 6 weeks permitted before birth, if preferred, at 100 percent of wages. A supplementary job-protected but unpaid parental leave is available until a child is 3 and parents with a child under age 6 (or a disabled child) have the right to work part time.

Italy provides a five month maternity leave. Up to two months can be taken before birth and three after. The leave is covered by a cash benefit which replaces 80 percent of prior wages. A supplementary six-month parental leave is provided also, with a cash benefit replacing 30 percent of prior wages. In the case of a disabled child, the supplementary paid leave can be extended until the child is 3. Most employers "top off" the benefit so that in effect most working mothers have a 9-month paid leave.

Canada is the only Anglo-American country that provides both a paid maternity and paid parental leave. It is unusual, also, in that like Austria and Denmark, Canada uses its unemployment insurance system to provide the cash benefit that covers this leave. The Canadian maternity leave lasts for 17 weeks, and a cash benefit replaces 55 percent of prior wages for 15 of these weeks. In addition, Canada provides a supplementary ten-week parental leave paid at the same rate, to qualified working parents. (Those who are unemployed would receive unemployment benefits covering the same period; in effect, the equivalent of the maternity and parental benefits.) There are proposals now to extend the duration of the leave.

THE U.S. FAMILY LEAVE POLICY

The background and origin of maternity policies for working women in the U.S. date from statewide and later federal protective legislation (Kamerman, Kahn, & Kingston, 1983). The first state law was passed in Wisconsin in 1867 restricting the hours of employment for women to no more than ten hours a day because of the presumed negative consequences of longer hours for women's childbearing abilities. The first federal action regarding protection for women was a landmark ruling of the Supreme Court in 1908, with a similar argument.

The second action occurred 70 years later in 1978, when the Pregnancy Disability amendment to Title VII of the Civil Rights Act was passed, adding gender and sex discrimination to health protection as a policy rationale for a post-childbirth leave. The legislation expanded the definition of sex discrimination to include discrimination based on pregnancy, childbirth or related medical conditions and required employers to treat pregnancy and childbirth like other causes of disability under employee benefit plans such as health insurance, disability insurance, or sick leave plans.

For Americans, the fight to enact the Family and Medical Leave Act (FMLA) began in the 1970s and was not successful until 1993. By then, "maternity" protection was no longer the focus; instead it was "disability" protection, which by definition now included pregnancy and childbirth. Legislation was introduced in Congress, first, in 1985, and then repeatedly over the next several years. It was passed by Congress in 1990 and again in 1991, and vetoed each time by the then President Bush. It was finally enacted and signed into law by President Clinton in 1993.

The U.S. FMLA, administered by the Wage and Hour Division of the U.S. Department of Labor, took effect on

August 5, 1993 (National Partnership; Ruhm, 1997; Waldfogel, 1999a, 1999b). The act requires employers with 50 or more employees to provide up to 12 weeks unpaid, job-protected leave each year to eligible employees to care for a newborn, newly-adopted or foster child, a child, spouse, or parent with a serious health condition, or for a serious health condition of the employee, including maternity-related disability. Workers in the private sector are eligible to take leave if they have worked for a covered employer for at least one year and for at least 1,250 hours during that year, and if there are at least 50 employees working for their employer within a 75-mile radius of their worksite. Workers in the public sector are covered by the FMLA without regard to the number of employees. Employers must continue health insurance coverage if they provided it before the leave but they may require employees to repay the health insurance premiums paid by the employer during the leave if the employee does not return to work at the end of the leave. Employees may be required to use accrued sick leave or vacation time to cover some or all of the leave. Employers may deny

leave to an employee within the highest paid 10 percent of its work force (a "key" employee), if letting the worker take leave would create "substantial and grievous injury" to the firm. Employers must be notified at least 30 days in advance with regard to leaves taken for births, adoptions, and foster care.

What was achieved was a modest policy, far less generous in every way than the prevailing policies in the other advanced industrialized countries. Only about 55 percent of the workforce is covered by the FMLA in contrast to coverage for almost all working parents in other countries. About 11 percent of private sector worksites in the U.S. are covered by the FMLA including about 60 percent of the country's private sector employees. Most of those covered had been or would have been even without this legislation, if only on a voluntary basis (Kamerman, Kahn, & Kingston, 1983). Workers in the five states that provide short term (temporary) disability insurance benefits — almost one-quarter of the workforce — were covered for pregnancy and maternity leaves since the 1978 legislation;³ and 13 states had already enacted some form of maternity, parental, or family leave by the time the FMLA became law.

The results of the FMLA in the U.S. suggest that the costs to employers are modest. Thus far there has been no impact on women's labor force participation. Women did take longer leaves following childbirth, but a significant portion of the female workforce did not take a leave or took only a very brief leave; and women who were ineligible for

The results of the FMLA in the U.S. suggest that the costs to employers are modest.

the leave were more likely to be poor, Black, and single mothers. (Bookman, 1998; Waldfogel 1999a, 1999b). The FMLA, some would argue, is a symbolic gesture that has had some small positive impact, in particular for fathers (Waldfogel, 1999a). There is, once again now, an effort at enhancing this policy by making it a paid leave (at least in some states) through the use of unemployment insurance funds, expanding the numbers of employees who are covered by it, and extending the duration of the leave. It will depend on the next president and Congress to accomplish this.

Despite this modest achievement and the growing pressure from the rising numbers of working women who work while pregnant and continue to work after they have babies, the U.S. policy exists in dramatic contrast to the policies that exist around the world and especially in our peer countries.

CONCLUSIONS

Parental leaves are employment-related policies that were first enacted as maternity policies more than a century ago to protect the physical health of working women at the time of childbirth. Linked to provisions for sick leaves, maternity leaves were sustained as a relatively stable policy throughout the first half of the twentieth century on the assumption that relieving women of the pressures of the workplace for a brief time before and after birth while protecting their economic situation, would protect and promote the physical well-being of women and their babies.

Pregnancy and maternity are increasingly viewed now as societal as well as individual risks requiring health protection, employment protection and security, and protection against temporary loss of income. Paid and job-protected maternity and parental leaves from employment at the time of childbirth have become the norm in almost all industrialized countries (and in many developing countries as well). The leaves are part of employment policy while the cash benefits are provided largely through the social insurance systems. They are paid for, usually, through sickness (temporary disability) benefits but in a few countries, through unemployment or family allowance systems, or as a separate social insurance benefit.

Begun in most countries out of concern for maternal and child physical health, maternal and child protection remain an important component of current leave policies. Beginning in the 1960s, however, economic and employment security as well as emotional and psychological well-being increasingly emerged as central to maternity policies. The major innovation in the late 1960s was the development of child rearing leaves, and in the 1970s, parental leaves. Pa-

ternity leaves were also established in the 1970s, but have never received much attention or significance until the “use it or lose” it policy now being introduced in several countries.

The major trend in the 1980s and 1990s has been to extend the leave policy so as to make it a real alternative to out-of-home-infant care.

The major trend in the 1980s and 1990s has been to extend the leave policy so as to make it a real alternative to out-of-home-infant care; and in the Nordic countries, to make it a stronger instrument of gender equity and a device for helping workers reconcile work and family life by requiring that fathers take at least a specified minimum part of the leave. Still another trend has been to make these benefits an increasingly visible component of national child and family policy.

Coverage is extensive and take-up is high among women everywhere that the leave is paid and the benefit level is adequate; but take-up remains modest for fathers everywhere except in Sweden.

The specifics of these policies, cross-nationally, remain diverse. There are variations in eligibility criteria, leave duration, benefit level, take-up. But the basic goals have largely converged over time.

The original drive toward a maternity leave policy was not motivated by concern for the needs of children but rather by the needs of mothers. The drive toward a parental leave policy, however, did add concern with child well-being along with gender equity. Parental leave policies have come to be recognized as a major component of infant and toddler care policies as well as, “family-friendly” employment policies, and those income transfer policies that protect the economic situation of families with children. Gender equity remains a goal even if largely unachieved, except modestly in one country; but it is clearly being incorporated in the policies of a growing number of countries in the context of involving fathers more in parenting.

The major policy difference cross-nationally, however, is philosophical, and is a critical one. It has to do with the extent to which the policy is designed (1) to support family work and child rearing and to create an incentive for women to leave the labor force when children are very young; or (2)

to facilitate women's work outside the home and help reconcile work and family life, by protecting and promoting the well-being of children while their parent(s) are in the labor force. The countries with leave policies covering about a year of fully job-protected leave targeted on parents with strong prior labor force attachment, with benefits covering full or close to full wage replacements, and with a guaranteed place for a child in good quality, affordable, out-of-home care even before the end of the leave, appear to be achieving both support for "parental choice" and support for child well-being. The countries that provide more extensive leaves, with low level benefits, limited job protection, and with insufficient places for toddlers in care, seem to be creating an incentive for women (in particular, wives) to leave the workforce and remain at home. A key issue is the duration of the leave and the level of the benefit.

Thus far, the research has focused largely on the consequences for women, and to a lesser extent for employers. That literature suggests that there have been no negative consequences for women or for employers where short and intermediate term leaves are concerned; but there may be negative consequences for women who take extended leaves (e.g., three years) in particular, if they take multiple leaves. The research on consequences for children is much more limited but there do appear to have been some positive impacts. As a result, child well-being is increasingly being discussed as an important component of the policy, and warrants more attention by researchers.

Parental leaves are modest social policies on the budget side but they are an essential part of any country's child and family policy and an essential component of a country's ECEC policy. Clearly, no industrialized country today should be without such provision.

Notes

¹ See URL for the International Labor Organization: ILO. int.: <http://www.ilo.org/public/english/bureau/inf/pr/2000/28.htm>

² For more information about global developments see: Kamerman, S. B. (2000). From maternity to parental leave policies: Women's health, employment, and child and family well being. *Journal of the Medical Women's Association*, 55, 98-99. See also, Social Security Administration. (1999). *Social security programs throughout the world — 1999*. Washington, DC: Government Printing Office. For more information about the European Union countries, see Moss, P. & Deven, F. (Eds.). (1999). *Parental leave policies: Progress or pitfall?* The Hauge/Brussels: NIDI/CBGS Publications.

³ These states are: California, Hawaii, New Jersey, New York, and Rhode Island.

Appendix

OECD COUNTRIES — 2000

Australia
Austria
Belgium
Canada
Czech republic
Denmark
Finland
France
Germany
Greece
Hungary
Iceland
Ireland
Italy
Japan
Korea
Luxembourg
Mexico
Netherlands
New Zealand
Norway
Poland
Portugal
Spain
Sweden
Switzerland
Turkey
United Kingdom
United States

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