

Social Quality in Work and Care

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Executive Summary and Policy Implications

Whilst a great deal is written about patterns of work and care across Europe (and the different deliverables in this project have contributed to this literature) our concern here is to look at what implications there are for the quality of life of European citizens, and more specifically for parents who have the daily task of managing complex arrangements in different environments. In this final paper from the “Workcare” project, we look at quality of life using measures of life satisfaction, but we also develop a new way of looking at the quality of society – the social quality model. This model was developed by a group of social scientists concerned to measure not just the quality of life of individuals (through subjective well-being) but to look at the quality of the society as a whole by bringing together a range of indicators which were theoretically coherent. The relationship between the various elements of the social quality model are generally represented by four interrelated dimensions: socio-economic security, social cohesion, social integration and social empowerment. The dimensions stretch between global processes and biographical processes on one axis and between systems and communities on the other.

Although there were a number of publications relating to the social quality model, it has not been satisfactorily operationalised in comparative perspective. One reason for this is that it is not clear which indicators are the most appropriate and some projects have developed

hundreds of indicators for each dimension (see Literature Review, Deliverable 1 for a more extended critique). The first paper therefore considers the general arguments for linking quality of life and social quality (Chapter 1).

Our approach, by contrast, is to take just a few indicators for each dimension. In doing so, we are using a “realist” theoretical perspective, one that assumes that these indicators can give us insight into an underlying reality even if they appear to be measuring something else. Therefore it is not necessary to use more than a few indicators to measure each dimension, and it does not matter if different indicators are used on different occasions. In fact, as we shall show in this report, a few well chosen indicators can explain a great deal of the variance.

In order to bring together the quality of life with social quality measures, we use subjective well being as a dependent variable because this gives an indication of whether the quality of society can also improve levels of individual satisfaction. We show that in fact this is the case: a good society is also good for individuals in the sense that it can make them “happier”.

The model is tested using the European Quality of Life Survey carried out by the European Foundation for the Improvement of Living and Working Conditions in Dublin. The Foundation carried out surveys of the quality of life in all European countries (including candidate countries) in

2003 and then again in 2007. This represents a unique survey source because the survey is designed explicitly to measure the quality of life and to feed into policy discussions. However, we would expect the findings to be replicated in other surveys as well.

Given the two data points, the second chapter is a comparison of the two surveys to see if the social quality model fits across all countries and all time points. In this paper we look at each dimension of the social quality model and see what effect it has on life satisfaction as the dependent variable by adding each quadrant in cumulatively. Indeed, although more of the variance is explained in 2003 than in 2007, we find that the model is consistent across time and place, irrespective of differences in subjective well being. That means that whether subjective well being is high or low in a given society, the evidence of a good society as measured by social quality, leads to enhanced individual quality of life.

The third chapter focuses specifically upon parents. It considers how far the social quality model affects different groups of parents and how this might relate to policy regimes and cultures of work and care in different European regions. It finds that employed fathers have the highest levels of social quality in all regions, but that the extent to which employment affects mothers depends upon the cultures of work and care found in different regimes. In regimes where there is an expectation for women to work full time, employment or the lack of it affects women in similar ways to men (for example in the Scandinavian countries). However, in those countries where women are encouraged to have a more intermittent relationship with

the labour market, mothers have similar levels of social quality to that of employed women.

In the fourth chapter we turn to the qualitative interviews to look at how parents with young children who are working full time manage work and care. We find that this is a struggle across all countries, irrespective of the policies in place. However, in countries where there are more comprehensive childcare policies for younger children (below age 5), there are more options available to parents and in countries where these facilities are not available (such as Italy and Portugal) there is a greater reliance on kin.

The four papers taken together illustrate the utility of the social quality model across different countries and across time and point towards policy implications for all countries.

Policy Implications

The social quality model indicates a clear range of policies for improving the quality of life of all citizens across Europe as well as parents with children.

1. Policies to ensure socio-economic security

These policies include ensuring work for all men and women; social security for those between jobs or not able to work; support for families on low incomes or at risk of poverty;

2. Policies to ensure social cohesion

Good governance of economy and society; developing levels of trust; combating crime; child care policies; gender and other equality policies

3. Policies to ensure social integration

Activation policies for the unemployed; anti-poverty policies; policies for integration of younger and older workers;

4. Policies to ensure empowerment.

Improving health and education.
Enabling mobility

5. Policies to enable the integration of work and care.

Flexible, comprehensive childcare provision; enabling the re-entry of women and men into work after childcare leave; providing paternal leave schemes that realistically allow men to access them (well resourced and/or mandatory); combating gender stereotypes to involve men in caring; make sure that people can negotiate their hours of work if they want to.

Chapter 1: Theorising Social Quality and Quality of Life

Claire Wallace and Pamela Abbott

Introduction

In this paper we discuss social quality as a sociologically grounded theoretical concept in contrast to the psychological concept of subjective life satisfaction. While the latter is concerned with the feelings of individuals (how happy and/or satisfied they are) social quality is concerned with the nature of society and the establishment of social systems that promote the well-being of their citizens. It offers a complex methodological and analytical framework making it possible to assess society as a specific formation of relationships and processes (Herrmann and van der Maesen 2008). It therefore provides a transparent and useable tool for developing social policy. As Romano Prodi has stated in relation to the quality of life:

.. it places social issues at the very core of the concept of quality. It promotes an approach that goes beyond production, economic growth, employment and social protection and gives self-fulfillment for individual citizens a major role to play in the formation of collective identities. (Prodi 2001)

We argue that social quality enables the development of a more theoretically informed analysis of life satisfaction by recognising that subjective satisfaction is both an outcome of the social system and a factor in its functioning. Subjective satisfaction is a key indicator of the quality of the social system and provides the basis for understanding what makes a livable society (Veenhoven 2008). People are embodied social beings, located in a

given time and place, active in meeting their own needs in that context, and they need to be empowered to do so. While there are good arguments for social policy being informed by subjective as well as objective evidence – it is important to know what citizens want as well as to understand what they need (Veenhoven 2009) it is important to consider not just what is but what can be.

The origins of Social quality

The Social quality approach arose from an initiative launched under the Dutch Presidency of the European Union in 1997 by a network of social scientists. The aim was to counteract the neo-liberal and economic tendencies within European integration and to put forward an alternative vision of a social Europe based on the EU goals of enhancing social cohesion and combating social exclusion. The aim of the Social quality initiative was to develop a theoretically consistent model which could provide a basis for policies and which could be empirically grounded (Beck *et al.* 2001). It emerged from a critique of an economic as opposed to a social construction of quality of life (Phillips 2006)

Social quality is defined by the authors of this initiative as “the extent to which citizens are able to participate in the social and economic life of their communities under conditions which enhance their well-being and individual potential” (Beck *et al.* 2001: 6-7). Its advocates were concerned to challenge what they saw as the narrowly economic focus of European Social Policy with its emphasis on employment as the key to social inclusion, economic growth and competitiveness and argue for a social

policy that sustained a liveable society for all (Herrmann and van der Maesen 2008). They argued for economic policies that provide for independence, labour market policies that opened the way for participation, social policies to for securing individual dignity and fostering social solidarity and empowerment by shaping the space for action.

Subjective Well-being

The subjective well-being approach is concerned with the individual as a whole person in his or her life circumstances - how they feel about their life circumstances, how they feel about themselves taking everything into account. There is a long history of (mainly social psychological) research on life satisfaction or subjective quality of life using life satisfaction and happiness as the main dependent variables (Diener and Suh,1997). In the most sophisticated quality of life approaches the indicators are well developed and the methodology used to select them rigorously defined. However, the indicators are not derived from theory and they presuppose existing social relations and structures – they are concerned with describing what is there already based upon the idea that objective and subjective factors reinforce one another. They are not concerned with opportunity structures available to individuals and what is achievable.

The Life Satisfaction approach asks people directly about their satisfaction/happiness with their actual life circumstances, either generically or for specific domains. The research has been concerned with analysing people's reports of 'happiness' (which is generally seen as an indicator of emotion or mood) and 'general satisfaction with life' (which is

generally taken as an indicator of people's cognitive evaluation of their circumstances). Subjective well-being has been shown to be an internally consistent and relatively stable construct and not just the reflection of immediate affect (but not so stable as to suggest that the scales measure purely an invariant trait of persons). There is evidence that it does indeed reflect surrounding circumstances with levels of happiness and satisfaction correlating with social and economic circumstances within societies (Bohnke 2005; Veenhoven 2008, 2009).

It is now widely recognised that subjective well-being is influenced by factors beyond economic security even in the poorest societies (see e.g. Clark 2002) and that we must take account of the extent to which physical, psychological and social needs are met. Empirical studies of the correlates of subjective well-being show that both between and within countries the key determinants of subjective well-being are material living standards, confidence in government and trust (Veenhoven 2008). In poorer countries fulfilling basic needs is most important for meeting life satisfaction with having a livable income being the most important influence on well-being, although being healthy, having social support having confidence in government and general trust, and feeling in control of ones life also influence general satisfaction and happiness (Abbott 2007; Abbott and Sapsford 2006; Abbott and Wallace 2007). As societies become more affluent, factors other than economic circumstances start to become more important, just as in the case of job satisfaction, there is a move from having a job with a good income to looking for more intrinsic rewards such

as having an interesting job or one with career prospects (Wallace *et al.*, 2007). In the EU 27 there are marked differences between countries in subjective well-being with a North-South divide in the EU 15 and a marked East-West divide between the EU 15 and the former communist states that are now members. However, in all EU countries, the impact of economic factors is mediated by other factors, notably social support, health and trust (Bohnke 2005).

Societal Well-being and Individual Well-being

Well-being is fundamentally concerned with the welfare of individuals and societies. It is important to distinguish between societal well-being and individual well-being although the two are inextricably linked. The former provides the context in which individuals are able to flourish and grow – the capability structure. We need to consider the opportunities that society provides for individuals to build their capabilities, the resources that are available for individuals to utilize in securing their welfare. Well-being is subjective – it is our understanding of our condition – but it is discursively constituted through social interactions and cultural meanings. The quality of society influences social engagement and the higher the quality of a society the more options people have to plan and make arrangements for the future (Gallie and Paugam 2002). There is a strong relationship between economic performance and the quality of governance in a society and individuals perception of the quality of their society. Individuals' perception of the quality of their society is also influenced by their own social status and living conditions (Bohnke 2005). Therefore, agency and the ability to

build capabilities is dependent on social and geographical location as well as individuals perceptions of the opportunities available to them which are in turn influenced by their position in the societal opportunity structures.

From Quality of Life to Social Quality

The Social quality approach does focus on the individual, but as an active subject living in developing social conditions. 'The Social' is seen as the outcome of the dialectical relationship between the formation of collective identities and the self-realisation of the human subject. The 'social space' is realised in and between four constitutive factors – socio-economic security, social cohesion, social inclusion and social empowerment. The approach reflects the condition of human subjects as social (not only individual) subjects, it prioritises the analysis of the processes leading to the acting capacities of social beings, it analyses the self-realisation of these acting subjects and it is oriented to the formation of collective identities. In other words, it is concerned with the dialectical and recursive relationship between agency and structure and provides a vision for the future about how the Social quality of a society can and should be improved. It provides the essential link between need, action and policies. The Social quality approach combines economic and social development. It measures the extent to which the quality of daily life provides for an acceptable standard of living, taking account of the structural features of societies and their institutions as assessed by reference to their impact on citizens. Hence, it incorporates a mixture of structural and individual-level factors.

The social quality model is explicitly ideological in that it takes the existence of western welfare states and liberal norms for granted:

..underlying the four conditional factors is the process which, via the constant tension between self-realisation and the formation of collective identities, people become competent actors in the field of Social quality. Essential in this process are the rule of law, human rights and social justice, social recognition/respect, social responsiveness and the individual's capacity to participate. (Van der Maesen *et al* 2005).

It challenges both economic and narrowly individualistic models and recognises that self-actualisation is a social process – an outcome of the dialectical relationship between agency and structure. It combines aspects of the quality of life and quality of society approaches and is explicitly concerned with the quality of social relationships (Van der Maesen *et al* 2005). Social quality defines the space within which citizens are able to participate in the social and economic life of their communities under conditions which enhance their well-being and individual potential. It requires the empowerment of individuals, the provision of economic security and other resources, the ability to participate in social life and a shared set of norms and values.

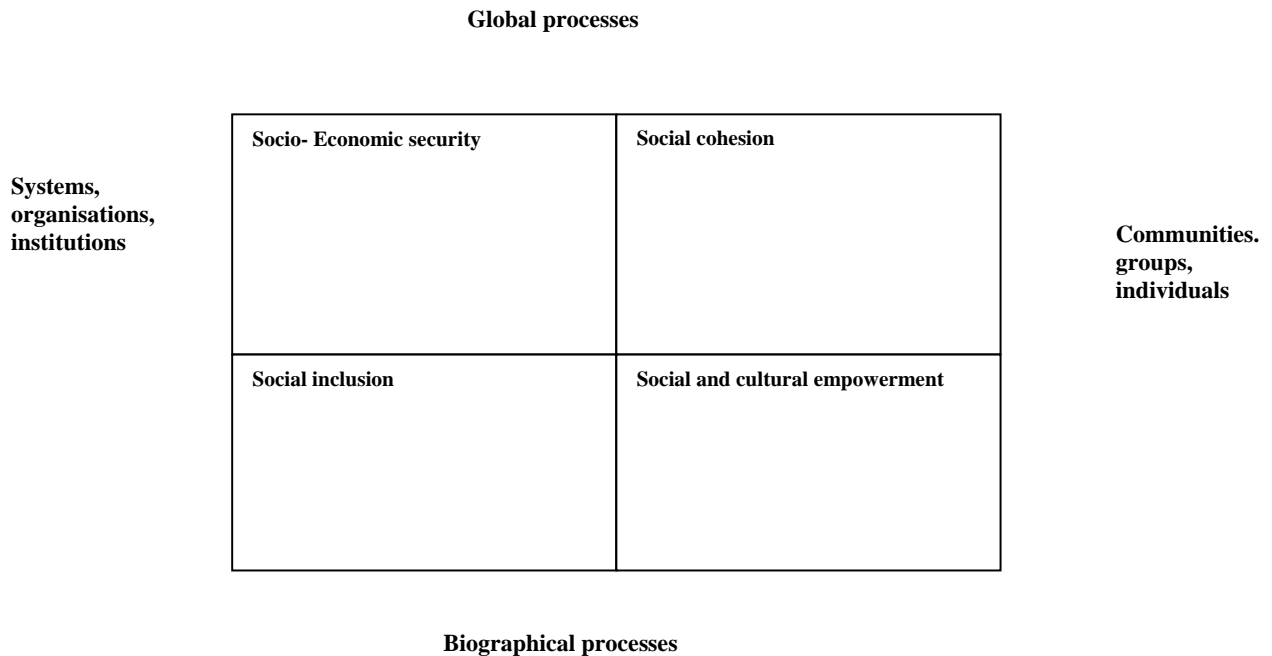
Modern democratic societies .. [need] real opportunities for citizens to address their concerns, to develop their own visions and to enable

themselves to contribute to an equitable and fair society (Beck *et al* 2001: 246)

Social quality identifies four domains or areas. Firstly, economic security ensuring personal security, based on a norm of social justice. Secondly, social cohesion ensuring social recognition and providing the basis for solidarity. Thirdly, social inclusion ensuring social responsiveness and equity. Fourthly, social empowerment enabling individuals to develop their capabilities and feel they have control over their own lives and the capacity to act. (Figure 1). These are expressed as four quadrants which are the product of the relationship between global processes and biographical processes on the one hand and that between systems and institutions and between communities (Gesellschaft and Gemeinschaft) on the other. The up-down axis of the quadrant represents the relationship between the micro and the macro, the individual and the structural. The left-right axis of the social quality quadrant represents the relationship between system and community, between system integration and social integration in the words of David Lockwood (Lockwood, 1999).

A key difference between the quality of life approach and the social quality approach is the role of individual actors as agents. This necessitates considering both objective and subjective indicators of well-being – relating objective welfare conditions to subjective perceptions of life satisfaction, happiness and well-being including the important distinction between functioning and capabilities (i.e. what an individual is able to do and what an individual chooses to do) (Sen 1993).

Figure 1: The Social Quality Model



In terms of socio-economic security, clearly people need resources over time to be able to cope with daily life, enjoy a dignified lifestyle and take advantage of the opportunities available to citizens. It is about more than having employment that pays a decent wage; it is about economic security across the life course and having access to health and welfare services including education.

Social cohesion is the glue that binds a society together and creates trust. It provides the rule of law essential for social participation. Social integration and interaction are not possible without shared norms and values and trust in social and economic institutions as well as other groups and individuals.

Social cohesion concerns the processes that create, defend or demolish social

networks and the social infrastructures underpinning these networks. An adequate level of social cohesion is one which enables citizens 'to exist as real human subjects, as social beings'. (Beck *et al* 1997: 284)

Social inclusion in modern societies is the degree to which people are and feel integrated in institutions, organisations and social systems. It includes intimate relationships with kin and friends as well as membership of looser networks. It is thus a complex concept and requires recognising the need for pluralistic social cohesiveness/multi-inclusiveness (Phillips 2005; Walker and Wigfield 2003) in order to facilitate the inclusion of individuals and communities. It means promoting

equality of opportunity and respecting difference in order to enable all to reach their potential.

Social empowerment requires both that the objective conditions exist and that individuals have the ability to make use of the opportunities available to them. Empowerment is both a conditional factor for socioeconomic security, social cohesion and social integration and an outcome of their existence. There are three dimensions to empowerment – access, participation and control.

‘Empowerment’ means to enable people to control the personal, communal and social environment to foster their own development over the environment as well as accessing the environment to enrich their socio-personal life (Herrmann 2004: 28)

The Social quality model is then concerned to specify the conditions for an inclusive, socially cohesive society that empowers citizens who can enjoy a decent standard of living. It specifies both the conditions for well-being and the conditions for building and sustaining societies that are able to ensure the well-being of their members.

Social Quality and Quality of Life

Social quality represents an advance on quality of life because it is more theoretically grounded, because it looks at the social and not just the individual and because it includes new dimensions of agency by allowing for social and cultural empowerment. One

question might be: which of these quadrants is the most important? In fact social quality emphasises all parts of the quadrant because it is concerned with the space that this covers. It also enables us to theoretically derive indicators to correlate with subjective life satisfaction both providing a sound basis for selecting indicators and testing the extent to which subjective satisfaction is influenced by the four constituent elements of the model, the indicators being measures of the underlying concepts of economic security, social cohesion, social integration and empowerment. Ultimately they are measures of a society with social and systems integration enabling individuals to take control over their lives in a social context (Wallace and Abbott 2009). Subjective satisfaction is the ultimate test of the social system and a liveable society. We must recognise that we are dealing with real people and their daily lives. The ways individuals experience the quality of their society will vary over time and space. The quality of a society varies for individuals living in it depending on their social, economic and cultural location within in it. The social quality of societies similarly varies.

We have demonstrated that life satisfaction in the in contexts as varied as the Commonwealth of Independent States and London is influenced by economic security, social cohesion, social integration and empowerment (Abbott 2007, Abbott and Sapsford 2006, Abbott 2007, Abbott and Wallace 2009a, 2009b). More recently we have derived a model from social quality and used it to examine influences on life satisfaction in the EU 27. Using the 2003 and 2007 European Quality of Life Survey (EQLS) we have demonstrated that our model is stable over time and space.

Subjective quality of life is influenced by economic security, social cohesion, social integration and empowerment. For the EU 27 we are able to explain over 40 percent of the variance in subjective satisfaction as we show in the next chapter. While economic security contributes most to the variance, social cohesion, social integration and empowerment all make strong and significant contributions to the variance explained. People are dissatisfied if they are not able to enjoy a decent standard of living, do not have confidence in the government and lack general trust, lack social support and feel lonely and feel unable to take control over their own lives and though poor health and lack of education lack the capacity to do so.

Social Quality, Quality of life and Social Policy

Well-being approaches clearly have significant policy relevance. They demonstrate that both social and individual well-being is influenced by more than economic factors. Policies designed both to support the social and economic development of a society as well as to enable the flourishing of individuals must take account of factors other than, on the one hand growth in GDP and on the other, income maintenance. Whilst it is evident that those in the poorest economic circumstances are most influenced by their material situation in evaluating their well-being it is also clear that social integration, social cohesion and the degree of freedom they have to act to secure their well-being all influence the subjective evaluation of their well-being. In other words the quality of a society as well as individuals position within that society influences well-being.

Combining, as we have the social quality approach with measuring what is important in determining individual life satisfaction, we can consider what social policy needs to encompass if it is both to meet individual needs and underpin the development of competitive, dynamic societies. With respect to the policy context, we need to gain a more holistic and accurate profile of what is important to people – the subjective understandings of citizens themselves. In other words, to understand the lived experience of citizens we need to relate agency to structure, ultimately the articulation between needs and capabilities (Nussbaum 2000; Doyle and Gough 1991; Gough 2002).

The nature of well-being has to be considered in the context of the institutions, processes and policies that affect it. All real welfare regimes show a mix of market, state and family/community provision, but they differ in the proportions of the mix and, more importantly, in the rhetoric or discourse in which views about welfare provision are expressed. Our understanding of people's needs and aspirations is constrained by our knowledge/understanding of what is possible. What we want or need in order to 'have a good life' is limited by what we think we know or understand to be possible. Wants may exceed objectively structural needs, but conversely they may fall short of what is objectively possible.

Social quality provides the basis for a meta- theory for developing public policy and for its implementation. Societal policy determines social quality. The policy context shapes social quality by providing socio-economic security or social inclusion, for example or by providing the basis for social and cultural empowerment.

However, it is also shaped by social quality in the way that different human and social needs are fed back into the policy process. A public policy informed by Social quality provides the basis for general integration, policies to ensure societal cohesion and social integration and policies designed to socially empower all members of the society.

Conclusions

In this paper we have argued that social quality is a better concept than quality of life for developing social theory. Both perspectives go beyond

economic measures of well being, but Social quality embodies a social as well as an individual dimension for understanding subjective and objective well-being. Furthermore, social quality brings in the aspect of agency the role of human capability in understanding quality of life. Social quality also helps us to bring together subjective and objective criteria for measuring the quality of society. In our research we have found this model to be a robust one, which works both in European societies in general but also in individual, very different societies as subsequent chapters will show.

*Chapter 2: Comparing social quality 27 EU
Countries in time: 2003 and 2007*

Pamela Abbott and Claire Wallace

Introduction

In this paper we use social quality as a sociologically grounded theoretical concept to develop a *Model of Life Satisfaction* as a measure of the quality of a society, building on our previous work where we demonstrated that social quality can be used to derive indicators for explaining variation in subjective satisfaction (Abbott 2007; Abbott and Sapsford 2006). We validate the model against subjective satisfaction as this is the key indicator of peoples preferred way of life, the quality of the social system and provides the basis for understanding what makes a livable society (Land *et al* 2006; Richardson *et al* 2008; Veenhoven 1999). We do this for the 27 EU countries using data from the 2003 and 2007 European Quality of Life Surveys enabling us to test the stability of the model across time and space. We conclude by arguing that subjective (self -assessed) satisfaction is a good single indicator of the liveability of a society. We agree with Veenhoven (2008) that subjective satisfaction is something that should be of interest to sociologists as it is clearly socially determined and is strongly influenced by the position of individuals and groups in the opportunity structure of a society (e.g. Bohnke 2005, 2008). As sociologists we are interested in the social influences on life satisfaction or subjective well-being and this is where the social quality model can make an important contribution (Mills 1954). Ultimately the challenge is to understand what type of society can maximize citizens' welfare in order for them to develop their own capabilities (Wallace and Abbott 2009, Sen 1993).

For the purposes of this analysis we take a number of indicators as being

indicative of the four main aspects of social quality: socio-economic security, social cohesion, social inclusion and social empowerment. Whilst these indicators are not exhaustive, they can give an idea of the relative weight of the four domains. We are concerned to understand how robust the model is across time and across different European regions, and we have therefore compared the 2003 and the 2007 European Quality of Life Surveys and we have looked at the influence of countries on the model. If the model is robust across time and space, we can say that this is a good way of measuring social quality.

The dependent variable is subjective well-being, because as we have argued above, it is a good indicator of how effective the model is in delivering the conditions of a good society. There are wide variations in subjective well-being across European countries as we show in Table 1. We can see that in both 2003 and 2007 the Nordic countries have the highest levels of subjective well-being, whilst the Eastern and Southern countries have the lowest. This is consistent with findings from other surveys too (Haller and Hadler 2006). In this paper we want to test whether the social quality and life satisfaction are determined by the same factors in all societies or whether it differs between countries and across time.

Table 1 Life Satisfaction in EU countries 2003 and 2007

Country	Satisfaction 2003		Rank	Satisfaction 2007		Rank	Differences Means 2003 - 2007	Change in Rank
	Mean	SD		Mean	SD			
Austria	7.75	1.788	4	6.84	2.162	15	-0.91	-11
Belgium	7.43	1.652	8=	7.51	1.739	8	+0.08	=
Bulgaria	4.42	2.315	27	4.90	2.013	27	+0.48	=
Cyprus	7.19	2.108	14	7.05	2.217	14	-0.14	=
Czech Repub	6.41	2.103	18	6.52	2.121	18	+0.11	=
Denmark	8.40	1.555	1	8.47	1.715	1	+0.07	=
Estonia	5.81	2.023	23	6.65	1.950	17	+0.84	+6
Finland	8.09	1.524	2	8.17	1.359	3	+0.08	-1
France	6.90	1.639	15	7.25	1.717	10	+0.35	+5
Germany	7.28	1.927	11=	7.09	2.287	13	-0.19	-2
UK	7.35	1.900	10	7.27	2.039	9	-0.08	+1
Greece	6.74	2.237	17	6.51	2.069	21	-0.23	-4
Hungary	5.89	2.187	21	5.51	2.250	26	-0.38	-5
Ireland	7.67	1.743	5	7.59	1.892	6	-0.08	+1
Italy	7.20	1.616	13	6.48	1.823	21	-0.72	-8
Latvia	5.48	2.125	24	6.03	2.154	24	+0.55	=
Lithuania	5.33	2.154	25	6.20	2.124	23	+0.97	+2
Luxembourg	7.66	1.928	6	7.96	1.819	4	+0.30	+2
Malta	7.28	1.973	11=	7.54	1.972	7	+0.26	+4
Netherlands	7.53	1.263	7	7.87	1.235	5	+0.33	+2
Poland	6.18	2.20	19	6.79	2.079	16	+0.61	+3
Romania	6.11	2.281	20	6.46	2.058	22	+0.35	-2
Slovakia	5.59	2.363	24	6.56	2.041	18	+0.97	+6
Slovenia	7.01	1.964	14	7.15	1.952	12	+0.14	+2
Spain	7.43	1.756	8=	7.23	1.760	11	-0.20	-3
Sweden	7.81	1.710	3	8.35	1.630	2	+0.54	+1
Portugal	5.87	2.217	22	6.12	1.998	25	+0.25	-3
Mean EU 27	6.75	2.217		7.36	6.386			
Mean FCC	5.77	2.290		6.31	2.164		+0.53	
Mean EU 15	7.40	1.857		7.42	3.529		+0.02	

Methods

The 2003 and 2007 European Quality of Life Surveys serve as the data bases for the empirical analysis. In the 2003 a 27 country survey was carried out covering the then EU countries plus what was then the candidate countries. In 2007 the survey covered 31 countries, the 27 EU member states, three candidate countries and Norway. In 2003 the questionnaire was fielded by Intomart GFK and in 2007 by TNS Opinion, these organisations having responsibility for assigning national institutes to draw random samples and conduct the interviews in each country. In both years the survey collected comparable information on household and family composition, working conditions, social position, income and standard of living, time use and work-

life balance, housing conditions, political participation, social support and social networks, health and subjective well-being. Some changes were made to the questionnaire between waves, with additional questions being asked in 2007.

In 2003 around a 1,000 people aged 18 years and over were interviewed face-to-face in each country, except in the smaller countries of Luxembourg, Malta, Estonia, Cyprus and Slovenia (600 respondents). In 2007 about a 1,000 people in each country were interviewed except in the larger countries with 1,500 people being interviewed in France, Italy, Poland and the UK and 2,000 in Germany. In 2003 the national response rate varied widely between 30 percent in Spain and a questionable 90 percent in

Germany and in 2007 the overall response rate was 58 percent but with a wide variation from just over 33 percent in the UK to 88 percent in Romania. In both years the data was carefully checked and in the course of the data processing, recoded variables, breakdown variables, indices and macro variables were added and the data weighted (for more detail on methodology see Anderson et al 2009). In this paper we use the data for the 27 EU member states in 2007 (some of which were Candidate Countries in 2003).

In constructing the model we have selected as indicators variables from a rich data set as indicative of the underlying constructs we are measuring. Undoubtedly we could have explained more of the variance if we had included additional indicators but this would have made the model more difficult to interpret and was not necessary for our purpose here. We were also using data that had not been specifically collected for our purpose so that for example, there were no good indicators of social capital, something which would have been an important indicator of social integration.

In order to test our main hypothesis that social quality improved in the region between 2003 and 2007 we carried out a series of OLS regressions with subjective satisfaction as the independent variable, controlling for age and gender for 2003 and 2007. We entered the variables in four blocks: economic security; social cohesion; social integration, and; conditions for empowerment. Finally, using Sweden as the reference, we tested our model to see it held for all the countries. We tested the model for multicollinearity and found it to be satisfactory as the tolerance of no variable was below 0.4

(Tarling 2009). The levels of single order correlations between the dependent and independent variable were also tested and found to be acceptable.

We should note that there were a number of changes in the questionnaire between 2003 and 2007 and this makes the comparison of some individual variables impossible but does not impact on our ability to construct comparable models. In 2003 there was not a question in trust in government but we were able to compute a scale from two questions: trust in the government to deliver state pensions and trust in the government to deliver social benefits. The response options for the question on self evaluation of health were changed between 2003 and 2007 but this does not impair the validity of the cross-society comparison.

The Dependent Variable

The dependent variable in the regression analysis was the satisfaction scale – ‘All things considered how satisfied would you say you are with your life these days?’ – coded 1 (least satisfied to 10 most satisfied). General satisfaction has been shown to be a relatively stable cognitive construct that is a good indicator of individuals overall satisfaction with life although it increased in the region between 2003 and 2007 (Table 1). This was mainly due to an increase in Eastern and Central European countries with economic growth, increased political stability and civic society developing in these countries (Abbott and Wallace 2009a).

Modelling the Quality of Society

To construct our model we use a number of variables as indicators of the underlying constructs we were interested in.

For economic security we used:

The income of the household in Euros;

A deprivation index constructed from a series of question concerning the ability to buy essential goods and services as a measure of relative deprivation coded from “can afford all if want to cannot afford any” of the following items could be afforded: keeping the home adequately warm; paying for a weeks holiday away from home; replacing worn-out furniture; a meal with meat, chicken or fish every second day; buying new cloths and having friends or family for a drink or meal at least once a month (CA 2003 0.859, 2007 0.843).

Inability to afford to buy basic food as a measurer of absolute poverty. Coded 1 yes, 2 no ;

Assessment of adequacy of the income of the household as a more subjective measurer of relative deprivation. Coded on a six point scale from *very easily* to with *great difficulty*.

For social cohesion we used:

General trust – a measurer which together with trust in government has been shown to be a good indicator of social cohesion (Phillips 2006);

Trust in government using the Trust in Government Scale (2003) which was computed from the answers to the extent of trust in state pension system; trust in state social security system (CA 2003 0.782).

Perception of social conflict. The Conflict Scale was computed from the answers to whether or not tension exists between, poor and rich, management and workers, men and

women, and different racial and ethnic groups (CA 2003 0.722, 2007 0.755).

For social integration we used

The answers to a series of questions on social support (when ill, need advice, feel depressed, urgently need to borrow money) entered as dummies coded 0 no support/1 support;

The answers to a series of questions on frequency of contact with friends and relatives dichotomised to frequent contact (once a week or more) other

.As we were interested in social integration we coded those without relatives as other. Coded 0 no frequent contact/ 1 frequent contact;

Married/living with a partner. Coded no 0, yes 1;

Vote in elections as an indicator of identification with the society Coded no 0, yes 1. ;

Membership of a political party/trade union as the only measure in the data set for formal social capital available in both years Coded no 0, yes 1.

The extent to which the respondent felt left out of society as a subjective indicator of social integration coded on a four point scale from completely agrees , feels left out to disagrees completely.

For the conditions for social empowerment we used;

Highest level of education as an indicator of cultural capital;

Self evaluation of health which has been shown to be a reasonably good measurer of health status. Coded from in good health to in poor health;

The extent to which respondents feels that “life has become so complicated that you can’t find you way” coded on a four point scale from completely agree to completely disagree.

Multiple Regression Analysis

We used the enter method as we wanted to validate the model. In 2003

the model explained 45.9 percent of the variance and in 2007 40 percent which is a substantial amount and indicates that our Model is a good measure of life satisfaction.

In both years the strongest contributions to the variance explained were made by economic variables, although not so much by household income as by indicators of subjective economic security as measured by the Deprivation Scale and the ability to make ends meet.

Also very important were the conditions of empowerment, particularly whether the respondent felt life was too complicated for them to control events as well as their self-perceived health status.

Table 2 : Explaining General Satisfaction 2003 in EU and Candidate Countries

Variables	Model 5		
	B	Beta	SE
Constant	7.044		.351
Age	.001	.011	.001
Gender	.201	.047**	.029
Economic			
HH Income	.000	.007	.000
Deprivation Scale	-.209	-.183**	.011
Make ends meet	-.305	-.195**	.015
Food	.121	.020*	.046
Social Cohesion			
General trust	.157	.168**	.007
Trust Government	-.098	-.076**	.009
Conflict Scale	.001	.001	.007
Social Integration			
Support ill	.004	.000	.114
Support advice	.015	.001	.095
Support depressed	.056	.005	.086
Support money	.071	.011	.046
Married	.250	.057**	.030
Contact parents	.012	.010	.009
Contact children	.017	-.016	.008
Contact friends	.045	.023**	.013
Relatives/friends letter etc.	.102	.019*	.039
Feel left out	.324	.125**	.019
Vote	-.083	-.015	.038
Meeting TU etc	-.054	-.009	.040
Empowerment			
Life complicated	.295	.141**	.016
Health	-.262	-.139**	.015
Education	-.154	-.048**	.023
Adjusted R ²	.459		

*p<0.01 ** p<0.001

Of the social cohesion indicators, generalised trust was very important in explaining life satisfaction and whilst trust in government was not so important in 2003, its importance had grown by 2007.

The social integration indicators were less important, although feeling left out of society was important both in 2003 and in 2007

Gender made a significant contribution to the variance explained in both years but the betas were very low. Age made a significant contribution in 2007 but again the beta was very low. This suggests that the Model is a general one in terms of age and gender (Tables 2 and 3) and is stable across time.

Table 3 : Explaining General Satisfaction 2007 EU countries

Variables	Model 5		
	B	Beta	SE
Constant	6.411		.258
Age	.006	.048**	.001
Gender	.116	.028**	.026
Economic			
HH Income	.000	-.010	.000
Deprivation Scale	-.169	-.136**	.010
Make ends meet	-.291	-.183**	.013
Food	.164	.024**	.047
Social Cohesion			
General trust	.088	.102**	.006
Trust Government	.097	.118**	.006
Conflict Scale	.015	.019*	.005
Social Integration			
Support ill	-.516	-.031**	.108
Support advice	-.049	-.004	.082
Support depressed	-.113	-.011	.067
Support money	-.198	-.032**	.039
Married	.302	.070**	.028
Contact parents	-.005	-.001	.030
Contact children	.001	.000	.029
Contact friends	.009	.002	.033
Relatives/friends letter etc.	.176	.027**	.041
Feel left out	.248	.119**	.015
Vote	-.041	-.015	.017
Meeting TU etc	.006	.001	.040
Empowerment			
Life complicated	.262	.146**	.013
Health	-.297	-.136**	.015
Education	-.038	-.010	.024
Adjusted R ²	.400		

*p<0.01 ** p<0.001

Table 4 : Country differences in subjective satisfaction (OLS regression) 2003 EU and candidate countries

Variables	B	Beta	SE
Constant	6.331		.356
Age	.002	.014	.001
Gender	.210	.049**	.028
Economic			
HH Income	.000	-.010	.000
Deprivation Scale	-.162	-.141**	.012
Make ends meet	-.301	-.192**	.015
Food	.238	.039**	.047
Social Cohesion			
General trust	.140	.150**	.007
Trust Government	-.082	-.064**	.010
Conflict Scale	.011	.012	.007
Social Integration			
Support ill	-.024	-.001	.113
Support advice	.016	.001	.094
Support depressed	.114	.010	.085
Support money	.075	.012	.046
Married	.287	.065**	.030
Contact parents	.011	.009	.009
Contact children	-.001	-.001	.008
Contact friends	.061	.032**	.013
Relatives/friends letter etc.	.092	.017*	.039
Feel left out	.307	.122**	.019
Vote	-.082	-.015	.038
Meeting TU etc	.004	.001	.040
Empowerment			
Life complicated	.291	.140**	.017
Health	-.247	-.131**	.015
Education	-.110	.034**	.025
Countries			
Belgium	-.101	-.009	.089
Denmark	.053	.006	.085
Germany	-.334	-.034**	.085
Greece	.067	.006	.100
Spain	-.033	.003	.092
France	-.355	-.036**	.086
Ireland	-.270	-.018	.113
Italy	-.247	-.023*	.092
Luxembourg	-.190	-.011	.124
Netherlands	-.174	-.017	.089
Austria	-.086	-.009	.083
Portugal	-.785	-.072**	.095
Finland	.123	.013	.083
Great Britain	-.198	-.016	.097
Cyprus	-.115	-.007	.119
Czech Republic	-.498	-.041**	.099
Estonia	-.365	-.025**	.114
Hungary	-.742	-.068**	.095
Latvia	-.526	-.044**	.102
Lithuania	-.564	-.045**	.045
Malta	-.288	-.017	.123
Poland	.168	.013	.104
Slovakia	-.796	-.075**	.092
Slovenia	-.259	-.020	.103
Bulgaria	-1.150	.098**	.103
Romania	-.049	-.005	.092
Adjusted R ²	.479		

*p<.001 **p<.001 Reference country is Sweden

Table 5 : Country differences in subjective satisfaction (OLS regression) 2007 wider EU

Variables	B	Beta	SE
Constant	-13.793		3.064
Age	.005	.043**	.001
Gender	.109	.026**	.026
Economic			
HH Income	.000	-.014	.000
Deprivation Scale	-.145	-.117**	.011
Make ends meet	-.255	-.161**	.013
Food	.262	.038**	.047
Social Cohesion			
General trust	.071	.082**	.006
Trust Government	.079	.096**	.006
Conflict Scale	.013	.017*	.005
Social Integration			
Support ill	-.451	-.027**	.106
Support advice	-.098	-.008	.081
Support depressed	-.160	-.016	.065
Support money	-.169	-.028**	.039
Married	.279	.065**	.027
Contact parents	.014	.003	.030
Contact children	.037	.009	.029
Contact friends	.074	.014	.033
Relatives/friends letter etc.	.141	.022**	.041
Feel left out	.265	.127	.015
Vote	-.019	-.007	.017
Meeting TU etc	.009	.001	.039
Empowerment			
Life complicated	.264	.147**	.013
Health	-.293	-.134**	.016
Education	-.076	-.021*	.025
Countries			
Belgium	-.064	-.006	.084
Denmark	-.197	-.020	.081
Germany	.619	.080**	.073
Greece	.758	.073**	.080
Spain	.622	.046**	.099
France	.221	.025*	.077
Ireland	.140	.009	.107
Italy	.569	.044**	.097
Luxembourg	.096	.007	.097
Netherlands	.203	.020	.081
Austria	.737	-.061**	.092
Portugal	1.117	.074**	.108
Finland	-.118	-.012	.082
Great Britain	-.187	.016	.084
Cyprus	.063	.006	.092
Czech Republic	.506	.049**	.086
Estonia	.545	.047**	.091
Hungary	1.111	-.100**	.090
Latvia	.605	.046**	.099
Lithuania	.425	.036**	.092
Malta	-.063	-.005	.097
Poland	-.019	-.002	.087
Slovakia	.455	.043**	.087
Slovenia	.236	.021*	.088
Bulgaria	1.140	.083**	.105
Romania	.187	.016	.093
Adjusted R ²	.425		

*p<.001 **p<.001 Reference country is Sweden

We then tested the model to see if it was a general one for all the countries by entering the countries as dummy variables with Sweden as the control. The variance explained increased significantly in both years but by a relatively small amount. In 2003 it increased by two percent to 47.9 percent and in 2007 by 2.5 percent to 42.5 percent (Tables: 4 and 4). A number of the countries contributed to the variance explained significantly but the Betas were generally very low. Of note is that Bulgaria is more satisfied and Hungary less satisfied than would be predicted by the model in both years and the Betas are stronger but still relatively low. We therefore conclude that the model is a general one and is stable across countries as well as across time.

Conclusions

In this paper we have argued that social quality, a model derived from sociological theory, can be used to derive indicators for modelling the good society and is a good indicator of individual life satisfaction. We selected indicators for each quadrant of the model and demonstrated that our model is stable over time and for the 27 countries of the EU (between 2003 and 2007) despite significant variations in life satisfaction between countries. This suggests that although the levels of life satisfaction may be different, the factors that determine it (selected to represent the social quality model), are stable across time and place. This means that in all countries, people need to have economic security, social cohesion, social integration and to be empowered to control their lives in order to be satisfied with their lives. However, in some countries, these factors are more prevalent than in others and therefore there are more people with higher levels of

satisfaction, which pushes up the country mean as a whole.

Social quality is delivered by governments ensuring that their populations have an adequate income across the life course to enjoy a decent standard of living, to provide a legal framework that ensures an orderly life based on shared norms and values providing the basis for social integration and the conditions for empowerment. The implication is that the policies that are needed to deliver social quality and to raise levels of life satisfaction are quite consistent in all European countries and can be identified.

The next step is to use the indicators that were significant in our model to construct a multi-dimensional Index of social quality that will enable us to compare the social quality of European societies. This is to what we turn in the next chapter.

Chapter 3: Social quality for Parents: 2007

Pamela Abbott and Claire Wallace

Introduction

In this paper we construct a multi-dimensional index of social quality using indicators derived from the EU Living Conditions and Quality of Life survey carried out across the region in 2007. We select indicators for the four domains of the social quality model and then combine the indicators for the four domains to construct a single index. This enables us both to determine what makes a society liveable, or at least tolerable, and how the ability of societies to deliver social quality varies across the countries of the EU. In combination with the findings from the Workcare research project (Wallace and Abbott 2009b) and especially the findings from the qualitative research (Abbott *et al* 2009; Trifiletti *et al* 2009) it enables us to make policy recommendations to support parents. Our specific focus in this paper is on parents with dependent children.¹

Whilst the social quality model looks at different dimensions of the quality of society (see Chapter 1) it can be validated by considering how much it contributes to subjective well-being as a measure of the quality of life at an individual level. We would expect societies with high social quality to have high levels of life satisfaction, and we have demonstrated this in the previous chapter. Hence, we would expect people to be dissatisfied if they are not able to enjoy a decent standard of living, do not have confidence in the government and lack general trust, lack social support and feel lonely and feel unable to take control over their own lives – or though poor health and lack of education lack the capacity to do so. The model holds irrespective of the overall level of satisfaction in a country – the influences on satisfaction remain the same (See Chapter 2).

¹ The main focus of the Workcare project was on families with young children but in this paper we have included all families with at least one child less than 16 years. The qualitative case studies for example involved families with at least one child under 12 years.

Comparing European Societies

The EU now encompasses 27 countries across a broad geographical and as Table 1 shows the social and economic situation of the countries is very different. With GDP per capita varying from a low of 9,032 US\$PPP in Bulgaria to a (excluding Luxembourg) high of 33,973 US\$PPP in Denmark. The Northern European countries have the highest GDPs and the countries of Eastern Europe the lowest. Portugal and Greece have GDPs comparable to those of Cyprus and Malta and the more developed of the Central European Countries, Slovenia and the Czech Republic (Table 1). The UNDP Human Development Index follows a similar pattern with the Scandinavian countries having the highest indexes and Bulgaria and Romania the lowest. Economic inequalities, as measured by the Gini Index and the ratio of the richest to poorest 20 percent do not follow the same pattern. The most equal countries are the Scandinavian ones together with some Central European ones. The most unequal are the UK and Ireland, the Southern European Countries together with Latvia, Lithuania, Estonia and Poland. Spending on social services including health and education also varies widely not only in terms of absolute amounts but also in terms of GDP with the poorer countries of East and central Europe not only spending less in absolute terms but also as a proportion of GDP. At one extreme Sweden spends just under a third of its GDP on social protection while Latvia spends only just over 10 percent of GDP on social protection.

Poverty levels also vary with between 10 and 23 percent of households across the and are lowest in the Czech Republic and the Netherlands and highest in Latvia (Lelkes and Zolyomi 2008). Children are at especial risk of living in poverty with lone parent households having very high levels of poverty. Work rich households (those in which both partners are in employment) have a low risk of being in poverty. However, the poverty risk for

children can be reduced by social transfers and Figari *et al* (2009) found for the 21 EU countries they considered social transfers did reduce child poverty. The risk of being in poverty even after taking account of child contingent payments varied from a high of nearly 28 percent in Portugal to a low of just over six percent in Denmark. In three countries over a quarter of children are at risk of poverty (Portugal, Ireland, Italy); in four countries between a fifth and a quarter (Spain, Poland, Greece, Hungary); in four countries between 16 and 20 percent (UK, Slovenia, Estonia, Germany); in three countries between 10 and 15 percent (Luxembourg, Netherlands and Finland, and; in five countries less than ten percent (Austria, France, Belgium, Sweden and Denmark.

Health is a key indicator of the well-being of a society and of individuals. Poor

health negatively impacts on the ability of people to be productive, increases the dependent population and increases the cost of providing health care. Life expectancy and disability adjusted life expectancy are good indicators of the health of a nation. Using life expectancy and disability adjusted life expectancy we can see that on average men have a shorter life expectancy than women but women live more years in less than good health than men. The general pattern is for the health to be better in the countries of Western and southern Europe and poorer in those of Central and Eastern Europe. A man in Estonia, for example, can expect to live on average for 12.8 years than one in Sweden while a woman in Romania can expect on average to live for 8.2 years less than a Spanish woman and for 10.2 years less in good health.

Table 1: Key Indicators (2007 or most recent year)

Country	HD Index *	GDP per capita PPPUS\$ *	Ratio richest 20% to poorest 20%**	Gini Index*	Public Expen Ed % GDP*	Public Expen Health % GDP*	% of GDP Social Protection***	Expenditure per capita PPS (EU = 100) Social Protection**	Life Expec Men**	Life Expe Women*	DALE M**	DALE W**
Austria	0.948	33,700	4.4	29.1	5.5	7.8	28.8	136	76.5	82.2	69.3	73.5
Belgium	0.946	32,119	4.9	33.0	6.1	6.9	29.7	136	75.8	81.8	68.9	73.3
Bulgaria	0.824	9,032	4.4	29.2	4.2	4.6	16.1	21	69.2	76.4	62.5	66.8
Cyprus	0.903	22,699			6.3	18.2	16.3		76.6	81.5	66.7	68.5
Cz Repub	0.891	20,538	3.5	25.4	4.4	6.5	19.1	54	72.7	79.1	65.9	70.9
Denmark	0.949	33,973	4.3	24.7	8.5	7.1	30.1	140	75.5	80.1	68.6	71.1
Estonia	0.860	15,478	6.4	35.8	5.3	4.0	12.5	29	65.5	76.8	59.2	69
Finland	0.952	32,153	3.8	26.9	6.5	5.7	26.7	112	75.6	82.0	68.7	73.5
France	0.952	30,386	5.6	32.7	5.9	8.2	31.5	132	76.6	83.7	69.3	74.7
Germany	0.935	29,461	4.3	28.3	4.6	8.2	29.4	124	76.2	81.8	69.6	74
UK	0.946	33,238	7.2	36.0	5.4	7.0	26.8	118	76.7	81.2	69.1	72.1
Greece	0.926	23,381	6.2	34.3	4.3	4.2	24.2	84	76.7	80.9	69.1	72.9
Hungary	0.874	17,887	3.8	26.9	5.5	5.7	21.9	52	68.8	77.0	61.5	68.2
Ireland	0.959	38,505	5.6	34.3	4.8	5.7	18.2	96	76.0	80.9	66.1	71.5
Italy	0.941	28,529	6.5	36.0	4.7	6.5	26.4	102	77.2	83.2	70.7	74.7
Latvia	0.855	13,646	6.8	37.7	5.3	4.0	12.4	23	66.5	77.3	58.0	67.5
Lithuania	0.862	14,494	6.3	36.0	5.2	4.9	13.2	26	66.9	78.0	58.9	67.7
Luxembourg	0.944	60,228			3.6	7.2	21.9	213	75.4	81.4	69.3	73.7
Malta	0.878	19,189			4.5	7.0	18.3	51	76.8	81.1	69.7	72.3
Netherlands	0.953	32,684	5.1	30.9	5.4	5.7	28.2	136	76.9	81.4	69.7	72.6
Poland	0.870	13,847	5.6	34.5	5.4	4.3	19.6	37	71.0	79.4	63.1	68.5
Romania	0.813	9,060	4.9	31.0		3.4	14.2	18	68.4	75.6	61.0	65.2
Slovakia	0.863	15,871	4.0	25.8	4.3	5.3	16.9	37	70.3	78.2	63.0	69.4
Slovenia	0.917	22,273	3.9	28.4	6.0	6.6	23.4	75	73.6	81.1	66.6	72.3
Spain	0.949	27,169	6.0	34.7	4.3	5.7	20.8	78	77.2	83.8	69.9	75.3
Sweden	0.956	32,525	4.0	25.0	7.4	7.7	32	140	78.3	82.7	71.9	74.8
Portugal	0.897	20,410	8.0	38.5	5.7	7.0	24.7	66	74.5	80.9	66.7	76.7

Source *UNDP 2008, **WHO Europe Data Base, ***Eurostat 2008

Table 2 : Gender Gap 2008

Country	Gender Gap Index	Rank in EU 27	Economic participation and opportunity Score	Rank in EU 27	Labour Force Participation female to male ratio	Wage equality for similar work female to male ratio	Estimated Earnings (PPP US\$) Female to male ratio	Legislators Senior Officials and Managers Female to Male Ratio	Professional and Technical Workers Female to Male Ratio
Austria	0.715	13	0.587	=24	0.83	0.48	0.46	0.40	0.93
Belgium	0.716	12	0.652	17	0.80	0.60	0.55	0.46	0.96
Bulgaria	0.708	14	0.698	9	0.83	0.64	0.65	0.46	1.61
Cyprus	0.669	26	0.610	23	0.81	0.60	0.60	0.18	0.84
Cz Repub	0.677	23	0.637	20	0.84	0.57	0.51	0.41	1.11
Denmark	0.754	3	0.712	5	0.90	0.65	0.73	0.33	1.14
Estonia	0.708	15	0.700	7=	0.88	0.62	0.62	0.51	2.16
Finland	0.820	1	0.741	4	0.95	0.68	0.71	0.42	1.20
France	0.734	9	0.663	16	0.85	0.50	0.64	0.59	0.89
Germany	0.739	7	0.688	12	0.86	0.57	0.58	0.61	1.00
UK	0.737	8	0.692	11	0.85	0.62	0.66	0.53	0.89
Greece	0.673	25	0.631	21	0.72	0.63	0.55	0.36	0.96
Hungary	0.687	19	0.669	14	0.81	0.51	0.64	0.59	1.55
Ireland	0.752	4	0.681	13	0.79	0.71	0.53	0.44	1.10
Italy	0.679	22	0.587	=24	0.69	0.54	0.47	0.49	0.88
Latvia	0.740	5=	0.746	2	0.88	0.65	0.65	0.70	1.78
Lithuania	0.722	11	0.742	3	0.92	0.60	0.69	0.68	2.45
Luxembourg	0.680	21	0.613	22	0.75	0.67	0.51	0.45	-----
Malta	0.663	27	0.560	27	0.55	0.72	0.50	0.23	0.69
Netherlands	0.740	5=	0.667	15	0.83	0.60	0.64	0.35	1.00
Poland	0.695	17	0.642	18	0.84	0.39	0.60	0.55	1.56
Romania	0.676	24	0.700	7=	0.81	0.65	0.69	0.43	1.33
Slovakia	0.682	20	0.638	19	0.82	0.54	0.58	0.39	1.38
Slovenia	0.694	18	0.708	6	0.89	0.65	0.61	0.49	1.27
Spain	0.728	10	0.577	26	0.72	0.46	0.50	0.46	0.92
Sweden	0.814	2	0.784	1	0.95	0.73	0.81	0.48	1.04
Portugal	0.705	16	0.696	10	0.86	0.65	0.59	0.49	1.04

Source: Hausmann *et al* 2

A gender gap also persists in Europe including an economic one (Table 2). The gender gap in economic participation and opportunity is the one most likely to impact on women's opportunity to combine work and care when they have children. The lowest gender gap in economic participation is found in the Scandinavian countries together with Latvia, Lithuania and Slovenia. The largest gender gap in economic participation is found in the Southern European countries and Austria. Everywhere women earn less than men even when they are doing work of equal value. Sweden stands out as having the highest wage equality for work of similar value – although even here the ratio of female to male is only 73 percent. The lowest is in Spain where it is 46. It is only in Sweden that the estimated average female earnings exceed three quarters of those of men and in six whilst in Austria, Czech Republic, Italy, Luxembourg, Malta and Spain it is 50 percent or less. Women are also underrepresented as in positions of political leadership (with the exception of the Scandinavian countries) and this is likely to impact negatively on whether matters of concern to women and children are put on the politician agenda (Hausmann 2008). Issues such as parental leave and child care often being dismissed by male dominated legislatures as moral rather than political ones.

Combining work and Care in Europe

EU Policy is concerned to encourage as many people as possible, women as well as men, to be in the workforce combined with a commitment to gender equality (Lisbon Strategy later reinforced in the Renewed Social Agenda adopted by the European Commission in July 2009). In addition, there is a professed concern

to promote a high quality of life for the whole population. Concerns about an aging population and the low fertility rate have led to discussion about how to maintain high rates of employment with family building. The Renewed Social Agenda is based upon three goals: creating opportunities, providing access and demonstrating solidarity. It explicitly highlights the importance of reconciling private and professional life by improving parental leave arrangements, introducing new forms of leave and strengthening protection for pregnant women. This raises questions about how these policy objectives can be achieved? How do we enable families with young children to combine work and care, to promote equality of opportunity for mothers and fathers and enable all members of the family to enjoy a high quality of life?

There are different patterns across Europe, for families combining work and care. For example, some countries are more likely to have dual earners, others male breadwinners (Lewis 1992; Pfau-Effinger 2005; Haas, Steiber et al. 2006). It is also the case that neither parent could be working, especially in countries with high unemployment. Patterns tends to be related to welfare regimes and women are still predominantly responsible for domestic labour and house hold time organisation (Abbott *et al* 2009). Families in southern Europe and the former communist states are the under greatest time pressure due to lack of welfare services with the extended family often acting as a buffer (Saraceno 2008). Intergenerational support with childcare and domestic labour is an important non-market economic transfer in many of these countries (Smith and Stenning 2006). Fertility rates are generally lowest in societies where government support for combining work and care are lowest

(Bohnke 2005) and highly educated women have fewer children than they say they would ideally like (Fahey 2008). Women still remain responsible for the bulk of care work in the home and their earning potential remains below that of men with a marked gender gap persisting in economic participation and opportunity (see Table 2, Abbott *et al* 2009)

The Workcare project (Wallace and Abbott 2009b) found that the most comprehensive and successful childcare policies were to be found in those countries where children were regarded as the responsibility of society as a whole rather than a private matter for families (and these are more likely to be found in the Nordic countries). Increasingly there is an cross European trend for dual earner families to be seen as the norm by parents, irrespective of the dominant social attitudes prevailing and the extent to which public policies and work places are family friendly. However, policies are often gender blind and do not take account of the gendering of supply side factors especially the greater demands placed on women to undertake non-remunerated work in the domestic sphere and the impact on employment progression of time out of the labour market. All EU countries have legal provision for maternity leave, paternity leave and parental leave. However the length of leave for mothers and fathers varies considerably as does the level of remuneration. Paternity leave tends only to be taken up when it is non-transferable and provides a high level of compensation. It is under-utilised, despite the professed wishes of fathers to spend more time with their children. Countries with the greatest degree of public childcare support are the ones which have the greatest continuity of employment for men and women over

time. In countries with extended childcare leave it is often difficult for women to re-enter the workforce after taking child care leave. There is a shortage in many European countries of good quality affordable child care especially for children under three years. Pre-school and school provision for children over three years is often for short hours and does not meet the needs of parents when both are in paid employment. In the absence of affordable childcare it is generally women who take time out of the labour market to care and take on part time, insecure employment to enable caring commitments to be fulfilled. This is a result of a number of factors including ideologies of care, normative expectations, the attitudes of employers and the gender pay gap. This has life time consequences for women's economic security and opportunities to have a career.

One finding to emerge from our project is that across Europe, family life is seen as a priority and regarded as important in securing a high quality of a life with a norm of involved fatherhood. Fathers are concerned about their children and spend time with them (O'Reilly, Roche, Nazio and MacInnes 2009). They say that they want to be more involved but are not always able to do so. This is often related to the long hours fathers have to work to support their families, to their higher earnings compared with their wives and to employer and societal attitudes not being supportive of fathers caring for their children. However, the general pattern is for fathers to be involved in child care tasks, even if they still do less of the day-to-day tasks than do mothers (Abbott *et al* 2009; Trifiletti *et al* 2009). Across Europe kin and friends provide support and grandparents provide an important resource in

emergencies, although in those countries with good provision of affordable childcare there is a less reliance on kin. Kin are an important resource for enabling parents to make choices; the unavailability of kin makes it more difficult for parents to combine paid employment with care. Parents' preference is for quality care by professionals that takes account of the changing needs of children as they grow older (Abbott *et al* 2009; Trifiletti *et al* 2009) .

Data

The 2007 European Quality of Life Survey serves as the data base for the empirical analysis. In this paper we use the data for the 27 member states of the EU a total of 30,626 respondents. The survey covered 31 countries, the 27 EU member states, three candidate countries and Norway. The questionnaire was fielded by TNS Opinion, who had responsibility for assigning national institutes to draw random samples and conduct the interviews in each country. The survey collected information on household and family composition, working conditions, social position, income and standard of living, time use and work-life balance, housing conditions, political participation, social support and social networks, health and subjective well-being. About a 1,000 people in each country were interviewed except in the larger countries with 1,500 people being interviewed in France, Italy, Poland and the UK and 2,000 in Germany. The overall response rate was 58 percent but with a wide variation from just over 33 percent in the UK to 88 percent in Romania. The data was carefully checked and in the course of the data processing, recoded variables breakdown variables, indices and macro variables were added and the

data weighted (for more detail on methodology see Anderson *et al* 2009).

Methods

In the paper we first consider the extent to which the elements that make up social quality vary between the countries in general and for parents with dependent children by constructing an Index of Social quality. To do this we construct a social quality model which we 'validate' by subjective satisfaction as the ultimate outcome indicator of individual well-being (Land *et al* 2006; Richardson *et al* 2008). We have previously tested the model for stability using the 2003 and 2007 European Quality of Life data set (Abbott and Wallace 2009a). We then create a standardised index using selected indicators. The stages of our analysis are:

A series of OLS regression with subjective satisfaction as the dependent variable with the initially selected indicators for each quadrant of the model.

An OLS regression using the enter method using all the variables that were significant in the regressions on each quadrant controlling for age and gender in one step;

A re-run of the regression analysis used at stage 2 controlling for parent;

A re-run of the regression analysis used at stage 2 controlling for country.

The construction of the Index of social quality using the variables that contributed significantly to the regression at stage 2 . To do this we recoded all the variables so that they went from poor to high quality, then normalised the variables using the Z statistic and then computed the index which we normalised using the Z statistic.

Finally an analysis of variance was carried out to consider how social quality varies across Europe controlling for country, for men and women, parents and non- parents, for those in employment and not, and for different age groups.

In constructing the model we have selected as indicators variables from a rich data set as indicative of the underlying constructs we are measuring. We were also using data that had not been specifically collected for our purpose and there were no good indicators of bridging social capital, something which is an important indicator of social integration. We tested the model for multicollinearity and found it to be satisfactory as the tolerance of no variable was below 0.4. The levels of single order correlations between the dependent and independent variable were also tested and found to be acceptable. Scales were computed using Principal Components Analysis with Varimax Rotation and Chronbach's Alpha's calculated for each scale.

We computed three scales to use in our analysis, Conflict, Deprivation and Mental Health (based upon the one used by the World Health Organisation) and housing (the scales were r-coded after being computed so that the lowest value was one on the Mental Health and Conflict scales and zero on the Deprivation Scale to make interpretation easier) (see Table 3 below):

The conflict scale was computed from the answers to whether or not tension exists between, poor and rich, management and workers, men and women, and different racial and ethnic groups (CA 0.745).

The Deprivation Scale was computed from whether or not the following items could be afforded: keeping the

home adequately warm; paying for a weeks holiday away from home; replacing worn-out furniture; a meal with meat, chicken or fish every second day; buying new cloths and having friends or family for a drink or meal at least once a month (CA 0.827). The Mental Health Scale was computed from the experiencing of the following symptoms over the past two weeks: all the time, most of the time, more than half the time, less than half the time, some of the time or at no time – 'felt cheerful and in good spirit', felt calm and relaxed, felt active and vigorous', 'wake up feeling fresh and rested', daily life filled with things of interest (0.875).

The housing scale was computed from the answers to :do you have lack of an indoor flushing toilet, do you have lack of a bath or shower, coded yes/no (CA 0.847)

The Dependent Variable

The dependent variable in the regression analysis was the satisfaction scale – 'All things considered how satisfied would you say you are with your life these Days?' – coded 1 (least satisfied to 10 most satisfied).

Social Quality Model

The variables used as indicators for the Initial Social quality Model were:

Economic Security:

Deprivation Scale – a computed scale from 0 able to afford none to 6 can afford all items;

Housing Scale – a computed scale from 0 neither to 3 both;

Is your household able to make ends meet, coded on a 6 point scale from very easily to with great difficulty;

Household run out of money to pay food during last 12 months, coded yes/no;

Household income in Euros PPP.
Societal Cohesion:
Most people can be trusted – a 10 point scale from low to high;
Trust the Government - a 10 point scale from low to high;
Conflict Scale – an 11 point computed scale from high to low conflict.
Social Integration:
Attended a meeting of a trade union/political party/ political action group in last year;
Voted in last national election coded did not vote/voted;
Feel left out of society, coded on a five point scale coded from strongly agree to strongly disagree;
Marital Status coded not married/married;
Face to face contact with children, parents and friends/neighbours living outside household, coded less than once a week/at least once a week;

Non face-to-face contact with children, parents, friends/neighbours living outside household, coded less than once a week/at least once a week;
Support when ill, advice, depressed, need money urgently, coded no/yes;
Employed, coded no/yes.
Conditions for Empowerment:
Mental Health Scale – a computed scale coded from 1 to 26 with 1 being the poorest mental health and 26 the best;
Life so complicated cannot find way coded on a five point scale coded from strongly agree to strongly disagree;
Health coded on a five point scale from very good to very bad;
Level of Education (lower secondary or less, upper secondary, post secondary non-higher, higher education).

Table 3

Country										
Means	Mental Health Scale		Conflict Scale		Deprivation Scale		Trust Government		Trust People in General	
Range	1 -26 Poor to good		1 -11 High to low		0 -6 Afford none to afford all		1 -10 Low to high		1 - 10 Low to high	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Austria	16.01	4.72	5.88	2.14	5.4	1.29	5.69	2.2	4.8	2.39
Belgium	17.37	4.78	5.59	2.02	5.33	1.28	5.01	2.26	5.57	2.22
Bulgaria	14.62	5.63	6.86	2.18	2.9	2.03	3.31	2.3	4.04	2.13
Cyprus	14.78	5.95	6.88	2.06	4.42	1.63	5.69	2.79	2.51	2.05
Czech Re	16.16	4.63	5.45	2.20	4.76	1.65	3.62	2.39	4.51	2.4
Denmark	18.00	4.65	7.21	1.91	5.66	0.93	6.62	2.22	7.0	2.31
Estonia	15.16	4.92	5.87	1.89	4.52	1.65	5.61	2.53	5.23	2.39
Finland	17.22	3.84	6.18	1.77	5.6	0.89	6.56	2.09	7.0	1.9
France	16.49	4.91	4.96	2.02	5.34	1.67	5.12	2.26	5.49	1.9
Germany	17.75	4.53	5.35	2.16	5.16	1.44	4.81	2.44	4.82	2.42
UK	16.1	5.3	5.75	2.09	5.36	1.28	4.29	2.41	5.29	2.36
Greece	15.66	5.51	5.63	2.54	4.30	1.88	4.79	2.77	4.15	2.37
Hungary	16.41	4.96	4.13	2.14	3.58	1.88	3.41	2.44	4.63	2.28
Ireland	17.67	4.79	6.45	2.29	5.48	1.94	4.79	2.56	5.77	2.39
Italy	15.58	4.78	5.27	2.27	5.27	1.36	3.84	2.16	4.95	1.93
Latvia	14.6	5.32	6.63	2.2	3.86	1.89	3.26	2.34	4.13	2.45
Lithuania	14.88	5.32	5.64	2.21	3.64	1.94	3.91	2.49	4.31	2.46
Luxembourg	16.98	5.17	5.3	2.4	5.7	0.79	6.09	2.32	5.84	2.02
Malta	14.18	5.22	6.61	2.39	4.35	1.67	5.5	2.78	4.91	2.4
Netherlands	17.77	4.27	5.6	1.58	5.69	0.9	5.88	1.83	6.53	1.91
Poland	15.43	5.72	5.85	2.1	4.01	1.93	3.53	2.26	4.77	2.24
Romania	14.09	5.97	5.65	2.75	3.34	2.08	4.32	2.49	5.54	2.1
Slovakia	15.28	5.11	6.12	2.22	3.96	1.96	4.91	2.49	4.98	2.35
Slovenia	15.74	4.88	5.14	2.0	5.11	1.45	4.14	2.43	5.18	2.47
Spain	17.17	4.87	5.66	2.61	5.33	1.18	5.39	2.15	5.74	2.16
Sweden	17.76	4.62	6.02	1.67	5.73	0.82	5.72	2.43	6.78	2.30
Portugal	15.61	6.11	6.34	2.53	4.69	1.61	4.27	2.14	4.25	2.09
Mean EU 27	16.14	5.19	5.79	3.8	4.81	1.7	4.78	2.56	5.12	2.43
CA Computed Scales	0.875		0.745		0.827					

Total number of respondents 30626

Table 4

Country							
Percentage	Good /Very good Health	Finances manage fairly easily/easily/very easily	Employed	Parent Child under 16 years	Married	Help Available Ill	Help Available Borrow Money
	%	%	%	%	%	%	%
Austria	68.6	72.7	57.6	28.8	61.0	98.2	88.5
Belgium	64.7	66.3	47.5	29.0	65.7	97.9	83.2
Bulgaria	41.7	16.0	46.0	23.0	66.4	95.7	76.3
Cyprus	65.2	43.4	46.9	24.2	74.3	98.5	89.0
Czech Re	60.2	51.0	55.4	21.8	65.0	98.5	85.8
Denmark	66.3	85.9	48.9	22.1	59.5	98.8	84.7
Estonia	39.2	49.2	47.1	17.1	49.5	96.3	76.2
Finland	61.7	79.5	46.5	24.2	64.8	99.2	90.6
France	70.3	62.8	47.9	29	65.5	98.1	83.1
Germany	65.1	72.5	46.4	22.0	62.4	97.5	82.4
UK	64.5	77.8	45.3	22.9	56.3	97.2	81.1
Greece	72.2	33.4	44.1	21.7	58.0	97.9	94.3
Hungary	47.6	25.2	38.9	21.4	54.9	97.7	68.9
Ireland	80.7	76.4	50.0	27.7	53.3	98.0	87.7
Italy	73.8	57.3	54.6	26.0	58.6	97.4	87.7
Latvia	39.4	36.7	61.4	23.4	50.0	95.9	77.0
Lithuania	35.0	36.3	45.5	19.2	52.2	97.5	86.2
Luxembourg	64.5	84.6	46.0	27.2	68.9	98.0	87.5
Malta	58.7	63.9	44.5	25.2	63.5	99.0	88.2
Netherlands	66.1	86.7	59.7	30.2	67.8	97.9	81.4
Poland	53.8	46.7	39.9	25.3	63.3	97.4	79.3
Romania	50.9	28.4	44.4	19.9	64.6	98.0	77.3
Slovakia	55.6	50.0	50.8	19.3	59.5	99.3	83.9
Slovenia	55.3	58.9	39.9	14.6	57.9	99.1	93.7
Spain	72.8	58.6	44.6	19.8	62.7	97.4	84.5
Sweden	65.7	86.0	62.4	29.6	70.3	99.2	92.9
Portugal	53.5	65.4	51.3	20.3	59.4	95.4	68.6
EU 27	60.9	58.6	48.2	23.4	61.3	97.8	83.6

Total number of respondents 30626

Index of Social Quality

The variables that were used to compute the Index of Social quality were the variables that were significant at the 99.9 percent level when the regression analysis was carried out for the whole model (see also Tables 4 and 5):

Economic Security:

- Deprivation Scale;
- Is your household able to make ends meet, coded on a 6 point scale from very easily to with great difficulty;
- Housing Scale.

Societal Cohesion:

- Most people can be trusted;
- Trust the Government;
- Conflict Scale;

Social Integration:

- Feel left out of society, coded on a five point scale coded from strongly agree to strongly disagree
- Marital Status coded not married/married
- Support when ill, coded no/yes
- Support, need money urgently, coded no/yes

Conditions for Empowerment:

- Mental Health Scale
- Life so complicated cannot find way coded on a five point scale coded from strongly agree to strongly disagree
- Self reported health status coded on a five point scale from very good to very bad

Findings Satisfaction and social quality in Europe

Levels of satisfaction with life vary widely across Europe (Table 5) with a North – South and West- East slope. The highest levels of satisfaction are found in northern Europe with the

highest in Scandinavia and the lowest levels in East and Central Europe with Bulgaria having noticeable the lowest. Portugal, Greece and Italy have much lower levels of satisfaction than the other EU 15 countries; amongst the lowest in Europe (although Italy's level is somewhat lower than might be expected from other surveys as is Austria's). Slovenia at Rank 12 (mean 7.15) has a level of general satisfaction that places it with the North Western European countries. Parents are generally slightly more satisfied, even after controlling for age, with the notable exception of those in Denmark, UK, Ireland and Portugal where they are generally less satisfied. However the differences are relatively small.

We first did a regression for each quadrant of the Social quality model (Table 6).

The economic security indicators explained just over 28 percent of the variance with all the variables being significant at the 99.9 percent level. The largest contribution to the variance explained was made by the inability to make ends meet followed by the deprivation scale, inability to afford food and poor housing made modest but significant contributions to the variance explained. Income made a significant but weak contribution. This suggests, in line with other research findings (e.g. Bohnke 2005), that satisfaction does not increase in a linear relationship with income but rather that there is a point beyond which increases in income do not led to increases in general satisfaction. What seems to be important for satisfaction is having an adequate income for an acceptable standard of living

Table 5: Satisfaction European Union 2007

Country	Satisfaction		Rank	<65 +No Kids		Rank	<65 + Kids<16 yrs		Rank
	Mean	SD		Mean	SD		Mean	SD	
Austria	6.84	2.162	15	6.78	2.155	15	7.05	2.171	16
Belgium	7.51	1.739	8	7.49	1.71	7	7.55	1.810	7
Bulgaria	4.90	2.013	27	4.74	2.00	27	5.45	1.962	26
Cyprus	7.05	2.217	14	6.96	2.229	14	7.32	2.162	11
Czech Republic	6.52	2.121	18	6.48	2.12	18	6.68	2.121	=21
Denmark	8.47	1.715	1	8.53	1.72	1	8.26	1.684	3
Estonia	6.65	1.950	17	6.60	1.986	17	6.89	1.753	17
Finland	8.17	1.359	3	8.12	1.393	3	8.33	1.235	2
France	7.25	1.717	10	7.20	1.730	10	7.37	1.680	10
Germany	7.09	2.287	13	7.04	2.297	13	7.24	2.245	13
UK	7.27	2.039	9	7.31	2.037	9	7.16	2.046	14
Greece	6.51	2.069	21	6.42	2.078	22	6.82	2.010	18
Hungary	5.51	2.250	26	5.48	2.239	26	5.61	2.294	25
Ireland	7.59	1.892	6	7.63	1.095	6	7.49	1.856	8
Italy	6.48	1.823	21	6.44	1.824	20	6.60	1.816	23
Latvia	6.03	2.154	24	5.97	2.156	25	6.24	2.138	24
Lithuania	6.20	2.124	23	6.08	2.154	23	6.68	1.963	=21
Luxembourg	7.96	1.819	4	7.94	1.856	4	8.0	1.717	4
Malta	7.54	1.972	7	7.48	2.035	8	7.70	1.764	6
Netherlands	7.87	1.235	5	7.82	1.264	5	7.98	1.160	5
Poland	6.79	2.079	16	6.69	2.133	16	7.10	1.881	15
Romania	6.46	2.058	22	6.40	2.059	21	6.70	2.039	20
Slovakia	6.56	2.041	18	6.50	2.057	19	6.81	1.958	19
Slovenia	7.15	1.952	12	7.12	1.966	12	7.29	1.864	12
Spain	7.23	1.760	11	7.18	1.739	11	7.42	1.834	9
Sweden	8.35	1.630	2	8.28	1.706	2	8.53	1.422	1
Portugal	6.12	1.998	25	6.00	1.844	24	5.0	2.001	27
Mean EU 27	7.36	6.386		6.92	2.134		7.20	2.008	

Total number of respondents 30626

All three of the societal cohesion variables made a significant contribution together explaining just over 14 percent of the variance. General trust in people and trust in government contributed equally and strongly. The Conflict Scale made a modest but significant contribution.

The social integration indicators together explained 18.3 percent of the variance. In terms of social integration feeling left out made by far the greatest contribution with being able to borrow money and being married making noticeable contributions. Support when ill, being in contact with children and parents, voting and attending

meetings of trade unions/political parties were all significant at the 99.9 percent level but made very modest contributions to the variance explained.

The four indicators for conditions for empowerment together explained 28 percent of the variance, the same as the economic indicators. The Mental Health Scale and life being too complicated made the largest contribution with health making a smaller but noticeable one. Education was significant at the 99.9 percent level but only made a very modest contribution to the variance explained.

Table 6:

Economic Security

	B	Beta	SE
Constant	2.034		.134
HH Income	3.278E-5	.041**	.000
Deprivation Scale	.288	.236**	.010
Make ends meet	.455	.284**	.013
Food	.320	.047**	.046
Housing	.162	.063**	.017
R2 .282			
Total number of respondents 30626			

Societal Cohesion

	B	Beta	SE
Constant	4.793		.041
General trust	.189	.220**	.005
Trust Government	.180	.220**	.005
Conflict Scale	.066	.072**	.005
R2 .143			
Total number of respondents 30626			

Conditions for empowerment

	B	Beta	SE
Constant	2.015		.057
Mental Health	.115	.282**	.002
Life complicated	.545	.302**	.010
Health	.230	.104**	.012
Education	.136	.037**	.019
R2 .281			
Total number of respondents 30626			

Social Integration

	B	Beta	SE
Constant	2.437		.175
Support ill	.614	.042**	.081
Support advice	.157	.013*	.067
Help depressed	.094	.010	.054
Support money	.578	.101**	.032
Married	.403	.093**	.024
Contact parents	-.096	-.021**	.030
Contact children	-.137	-.032**	.030
Contact friends	.077	.014*	.029
Communication parent	.183	.042**	.030
Communication kids	.104	.025**	.030
Communication friends	.102	.004	.133
Feel left out	.730	.345**	.011
Vote	.282	.055**	.027
Meeting TU etc	-.183	-.027**	.036
Employed	.032	.008	.024
R2	.183		

Total number of respondents 30626

** P < 0.001 *P < 0.01

We then carried out a regression including all the variables that were significant for each quadrant. We also controlled for age and gender (Table 7). The total variance explained was 44.3 percent which suggests that we have a model with strong explanatory powers. Age was not significant at the 99 percent level and although gender was at the 99.9 percent level the Beta was very low. The significant variables at the 99.9 percent level (the cut off point we set for inclusion in the Index of Social quality) were: the deprivation scale; not being able to make ends meet; housing deprivation; trust in

other people; trust in government; the conflict scale; support when ill, able to borrow money; married; feeling included ; the mental health scale; life being too complicated, and; health (see above). The conditions for empowerment variables made the largest contribution, followed by the economic variables, followed by the societal cohesion variables with the inclusion variables making the smallest contribution. Not being able to afford to buy food and voting made a significant contributions at the 99 percent level but the Betas were very low.

Table7: Subjective satisfaction (OLS regression) 2007

Variables	Model			Controlling for Parent			Controlling for Country		
	B	Beta	SE	B	Beta	SE	B	Beta	SE
Constant	5.878		.343	5.870		.342	16.931		1.893
Age	.002	.016	.001	.003	.024*	.001	.003	.021	.015
Gender	.152	.036**	.026	.138	.033**	.026	.139	.033**	.025
Economic									
HH Income	0.000	-.003	.000	0.000	-.002	.000	0.000	-.008	.000
Deprivation Scale	.152	.122**	.010	.153	.123**	.010	-.125	-.101**	.010
Make ends meet	.244	.153**	.013	.248	.156**	.013	-.210	-.132**	.013
Food	.139	.020*	.045	.142	.020*	.045	.246	.035**	.045
Housing	.091	.034**	.017	.092	.035**	.017	.098	.037**	.017
Societal Cohesion									
General trust	.078	.091**	.006	.078	.090**	.006	.064	.074**	.006
Trust Government	.096	.116**	.005	.095	.115**	.005	.076	.092**	.005
Conflict Scale	.021	.022**	.006	.021	.023**	.006	.009	.010	.006
Social Integration									
Support ill	.059	.032**	.010	.052	.032**	.010	.461	.028**	.103
Support advice	.059	.005	.080	.059	.005	.080	.101	.008	.079
Support money	.191	.031**	.039	.191	.031**	.039	.160	.026**	.038
Married	.307	.071**	.027	.259	.060**	.028	.253	.058**	.027
Contact parents	.021	.005	.034	.028	.006	.034	-.006	-.001	.034
Contact children	.010	.002	.034	.003	.001	.034	.049	.011	.034
Contact friends	.023	.004	.033	.028	.006	.033	.082	.015	.032
Communication parent	.001	.000	.034	.010	.002	.034	-.007	-.002	.034
Communication kids	.071	.017	.036	.092	.022*	.036	.065	.015	.036
Feel left out	.224	.107**	.015	.223	.107**	.015	.240	.115**	.015
Vote	.113	.021*	.034	.114	.021*	.034	.068	.013	.033
Meeting TU etc	.009	.001	.039	.007	.001	.039	.008	.001	.039
Empowerment									
Mental Health	.081	.194**	.003	.081	.195**	.003	-.086	-.207**	.003
Life complicated	.226	.126**	.013	.225	.125**	.013	.227	.126**	.013
Health	-.151	.069**	.016	.056	.015	.024	-.130	-.059**	.016
Education	.050	.014	.024	.146	.067**	.016	-.088	-.024**	.025
Parent				.87	.039**	.033	.0122	.025**	.032
Countries									
Belgium							-.122	.025	.032
Denmark							-.117	-.012	.069
Germany							.762	.097**	.058
Greece							.728	.069**	.071
Spain							.680	.050**	.085
France							.301	.034**	.062
Ireland							.184	.012	.095
Italy							.577	.044**	.084
Luxembourg							.156	.012	.088
Netherlands							.302	.030**	.069
Austria							.707	.057**	.079
Portugal							1.114	.074**	.094
Finland							-.035	-.013	.069
Great Britain							.205	.020	.070
Cyprus							.066	.006	.091
Czech Republic							.496	.048**	.085
Estonia							.533	.048**	.087
Hungary							1.0103	.119**	.076
Latvia							.580	.046**	.096
Lithuania							.452	.039**	.090
Malta							-.073	-.005	.096
Poland							-.016	-.001	.086
Slovakia							.475	.044**	.086
Slovenia							.195	.017	.087
Bulgaria							1.182	.089**	.102
Romania							.185	.016	.092
R ² Adjusted	.433			.434			.459		

Sweden = Reference country

** p < 0.001 *p < 0.01

Total number of respondents 30626

We then carried out the regression putting in parent as a dummy variable. The variance explained did not change indicating that the model applies to parents as well as nonparents equally. Finally we entered the countries as dummy variables with Sweden as the reference country. The variance explained increased significantly to just under than 46 percent and while some of the countries made a significant contribution the Betas were very modest although slightly stronger for Hungary and Bulgaria where general satisfaction would seem to be somewhat lower than would be predicted by the model. We therefore concluded that our model was a general one.

Variations in Social Quality in Europe

We computed the Index of social quality using the thirteen indicators that were

significant at the 99.9 percent level in our regression analysis (see above). We then used analysis of variance to look at difference in social quality across Europe for men and women, different age groups, those in employment versus non-employed and parents versus non- parents. We carried out the factor analysis for men and women together and then men and women separately and finally for parents (Tables 8 and 9 and 10). We found a number of significant interactions between the independent variables. Of interest in terms of looking at social quality for parents are the significant interactions where the independent variables include country and parent. We would note that there is a significant interaction for gender and country as well as for country and being a parent; country, gender and being a parent; country, parent and being employed (but only for women), and; country, parent, being employed and age (but only for women).

Table 8: ANNOVA Social Quality Index All

Variable	F	Significance
Corrected Model	23.014	**
Intercept	17.237	**
Country	22.085	**
Gender	1.389	NS
Parent child <16 years	0.073	NS
Employed	134.782	**
Age	6.167	**
Country * Gender	2.521	**
Country * Parent child <16 years	1.758	*
Country * Employed	2.286	**
Country * Age	2.104	**
Gender * Parent child <16 years	0.328	NS
Gender * Employed	5.461	*
Gender * Age	5.741	**
Parent child <16 years * Employed	0.207	NS
Parent child <16 years * Age	12.748	**
Employed * Age	6.664	**
Country * Gender * Parent child <16 years	1.805	*
Country * Gender * Employed	1.041	NS
Country * Gender * Age	1.121	NS
Country * Parent child <16 years * Employed	1.719	*
Country * Parent child <16 years * Age	1.101	NS
Country * Employed * Age	1.448	*
Gender * Parent child <16 years * Employed	0.001	NS
Gender * Parent child <16 years * Age	1.631	NS
Parent child <16 years * Employed * Age	5.656	**
Country * Gender * Parent child <16 years * Employed	1.352	NS
Country * Gender * Parent child <16 years * Age	1.282	NS
Country * Gender * Employed * Age	1.200	NS
Country * Parent child <16 years * Employed * Age	1.212	NS
Gender * Parent child <16 years * Employed * Age	1.232	NS
Country * Gender * Parent child <16 years * employed * Age	1.280	NS

** P < 0.001 *P< 0.01

Total number of respondents 30626

Table 9: ANNOVA Social Quality Index Men and Women

Variable	Men		Women	
	F	Sig	F	Sig
Corrected Model	8.795	**	9.677	**
Intercept	0,215	NS	0.597	NS
Country	13.357	**	15.424	**
Parent child <16 years	0.297	NS	0.022	NS
Employed	88.691	**	56.716	**
Age	3.986	**	7.151	**
Country * Parent child <16 years	1.823	*	1.691	*
Country * Employed	1.438	NS	1.901	*
Country * Age	1.755	**	1.862	**
Parent child <16 years * Employed	0.009	NS	0.008	NS
Parent child <16 years * Age	9.850	**	8.368	**
Employed * Age	6.902	**	2.832	NS
Country * Parent child <16 years * Employed	1.432	NS	1.936	**
Country * Parent child <16 years * Age	1.268	NS	1.149	NS
Country * Employed * Age	1.460	**	1.269	NS
Parent child <16 years * Employed * Age	1.741	NS	4.040	**
Country * Parent child <16 years * Employed * Age	1.367	NS	1.133	NS

** P < 0.001 *P< 0.01

Total number of respondents 30626

Table 10: Annova Social Quality Index 18 – 65 years

Variable	All	Parents
Corrected Model	23.014**	16.422**
Intercept	17.237**	14.799**
Country	53.522**	19.939**
Gender	NS	NS
Parent child <16	6.504*	-----
Employed	427.738**	178.161**
Country*Gender	2.010**	NS
Country*parent child <16	2.158**	-----
Country*Employed	3.356**	2.910**
Gender*parent child <16	NS	-----
Gender*Employed	35.287**	29.242**
Parent*Employed	6.615**	-----
Country*Gender*Parent	1.743*	-----
Country*Gender*Employed	NS	NS
Country*Parent*Employed	2.447**	-----
Gender*Parent*Employed	12.115	-----
Country*Gender*Employed*Age	NS	NS
Country*Gender*Employed*Age*Parent	NS	-----

We found that social quality varies significantly by country. Using Scheffe test there are 16 homogeneous subsets of countries for the combined data set and 13 for men and 15 for women (Appendix Table A1 -4). The order remains much the same with Bulgaria followed by Hungary having the lowest social quality and Sweden the highest. Overall the Scandinavian countries have the highest levels of social quality and the Central and Eastern European ones the lowest. Slovenia is noticeably the best of the former communist countries having a higher level of social quality than Portugal, Greece, Italy and Cyprus. In terms of age we found an inverted U-shape with those over 65 years having the lowest social quality followed by 18 – 24 year olds and those 50 -64 years old with the highest social quality being for those aged 25 to 49 years old (Table 13).

We now turn once again to look at parents. Table 11 shows the homogeneous sub-sets for parents and Table A5 gives the detailed means for all parents, for mothers and fathers and for employed and unemployed mothers and fathers. As for the sample as a whole Bulgaria has the lowest score on the index and Sweden the highest with the countries of Central and Eastern Europe generally scoring lower than the countries of Eastern and Southern Europe but with the UK, Italy and France scoring lower than might have been expected and Lithuania more highly. Country clearly makes a difference –social quality varies significantly across Europe and this provides the context in which families with children live. However, category is also important. Father score higher on social quality than mothers (Chart 2). Parents in employment have higher social quality than non-employed with the gap between employed fathers being greater than that for employed mothers. The only exceptions to this are Austria, Estonia and

Spain where employed mothers have lower social quality than non-employed ones.

We can conclude that:

- Employed fathers score more highly on social quality than non-employed fathers in all countries. The pattern is varied for mothers.
- Employed fathers generally score more highly than employed mothers.
- Non-employed mothers generally score more highly than non-employed fathers
- The gap in scores is greater for non-employed and employed fathers than for employed and non-employed mothers

Parenting Regimes

Employed fathers have the highest score and unemployed mothers the lowest but with a large gap between employed and unemployed mothers Belgium, Denmark, UK, Netherland, Poland, Sweden and Portugal

Employed fathers have the highest score and unemployed lowest. Employed mothers have higher scores than unemployed mothers but the gap is relatively small. Found in Bulgaria, Cyprus, Czech Republic, Germany, Hungary, Lithuania, Malta, Romania, Slovenia

Employed fathers have the highest scores followed by non-employed mothers with non-employed fathers having the lowest scores; Found in Austria, Italy, Luxembourg, Spain, Estonia, Latvia, Slovakia.

Employed fathers highest score and non-employed mothers lowest score with a large gap between employed and non-employed mothers Found in Finland, France and Greece.

Table 11: Homogeneous Subsets Parents

BU	HU	LV	LT	RO	PL	CZ	UK	EE	IT	SI	FRE	REL	PT	SK	CY	BE	MT	DE	IE	ATE	ES	LUN	NL	FID	DK	SE
X	X	X	X	X																						
	X	X	X	X	X																					
		X	X	X	X	X	X	X	X	X	X	X	X	X												
			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X							
						X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X					
							X	X	X	X	X	X	X	X	X	X	X	X	X	X	X					
															X	X	X	X	X	X	X	X	X	X		
																				X	X	X	X	X	X	X

We can conclude that:

- Country and employment are very important for social quality score – highest for employed fathers and Scandinavian countries, lowest for unemployed men and some Central and Eastern European Countries
- Countries where family policy encourages women to take on a caring role and have intermittent attachment to the labour market are ones where non-employed mothers score more highly or not much lower than those in employment
- Countries where family policy encourages women to have paid employment are ones where employed mothers score more highly than unemployed mothers and the gap is relatively large.

Conclusions

The analysis has shown that social quality is a good predictor of life satisfaction for both parents and non-parents alike, although social quality was a little higher among parents than among non-parents. However, the social quality of employed and non-employed mothers and fathers did vary according to the workcare regime of the country. In all countries employed fathers had the highest social quality, whilst for employed mothers, this varied according to whether the norm was for them to return fairly soon to full time work or whether they lived in a country where extended periods of leave for childcare was more usual. Therefore, social quality is shaped by the policy environment.

Combining, as we have the social quality approach with measuring what is important in determining individual life satisfaction, we can consider what social policy needs to encompass if it is both to meet individual needs and underpin the

development of competitive, dynamic societies. Social quality provides the basis for a meta- theory for developing public policy and for its implementation - for the practice of public policy. Social policy determines social quality. In this respect, labour market as well as income maintenance policies are important for fostering economic security and social integration of individuals into the society. The policy context shapes social quality by providing socio-economic security or social inclusion, for example or by providing the basis for social and cultural empowerment. However, it is also shaped by social quality in the way that different human and social needs are fed back into the policy process. A public policy informed by social quality provides the basis for general integration, policies to ensure societal cohesion and social integration - policies designed to socially empower all members of the society.

Our analysis indicates that a society delivers social quality when citizens have sufficient income to enjoy a decent standard of living, can place trust in people generally and in government, feel that they are integrated into society, have good physical and mental health and feel empowered to take control over their lives. In other words beyond economic security societies that have social and systems integration are able to deliver social quality. From the point of view of mothers and fathers it is important that policies allow them integrated work and care. In the case of fathers this means having more opportunity to spend time with their children and in the case of mothers to have policies which integrated them also into the workplace.

Governments need to invest in supporting families to enable them to combine their responsibilities for care and ensure that men and women are able to exercise their rights to secure and flexible employment.

In this way EU policy objectives will be achieved, including high levels of employment, social inclusion of men and women and the avoidance of precariousness, equality of opportunity for men and women, and increased fertility rates. Parents will be empowered in developing a joint strategy and as individuals in taking control over their lives and making informed choices.

A gender lens must be used in evaluating all policy proposals and all subject to a gender impact analysis.

Policies must be informed by a life course perspective, for example the consequences for career, entitlement to social security benefits and so on for women and men of taking periods outside the labour market to care.

Appendix

Table A1: ANOVA Social Quality Index Homogeneous Subsets Countries EU 27 All

Country																
Subset	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Bulgaria	-.3959															
Hungary	-.2918	-.2198														
Lithuania		-.2219	-.2219													
Latvia		-.2124	-.2124													
Romania		-.1750		-.1750												
Poland			-.1217	-.1217	-.1217											
Czech Re				-.0854	-.0854	-.0854										
Estonia				-.0785	-.0785	-.0785										
Slovakia				-.072	-.072	-.072										
Portugal				-.0571	-.0571	-.0571										
Greece					-.0335	-.0335	-.0335									
Italy					-.0149	-.0149	-.0149	-.0149								
Cyprus						.0049	.0049	.0049	.0049							
Slovenia						.0069	.0069	.0069	.0069							
UK						.0115	.0115	.0115	.0115							
Belgium							.0815	.0815	.0815	.0815						
France							.0820	.0820	.0820	.0820						
Malta								.0971	.0971	.0971	.0971					
Austria									.1097	.1097	.1097					
Germany									.1152	.1152	.1152	.1152				
Spain										.1626	.1626	.1626	.1626			
Ireland											.2049	.2049	.2049	.2049		
Luxembourg												.2357	.2357	.2357		
Netherlands												.2830	.2830	.2830		
Finland													2872	2872	2872	
Denmark														.3927	.3927	.3927
Sweden																.4116

Total number of respondents 30626

Table A2: ANOVA Social Quality Index Homogeneous Subsets Countries EU 27 Men

Country													
Subset	1	2	3	4	5	6	7	8	9	10	11	12	13
Bulgaria	-.3531												
Hungary	-.2344	-.2344											
Lithuania	-.1793	-.1793	-.1793										
Latvia		-.1563	-.1563	-.1563									
Romania		-.1162	-.1162	-.1162	-.1162								
Poland			-.0583	-.0583	-.0583	-.0583							
Slovakia			-.0416	-.0416	-.0416	-.0416	-.0416						
Czech Re			-.0342	-.0342	-.0342	-.0342	-.0342	-.0342					
Estonia			-.0197	-.0197	-.0197	-.0197	-.0197	-.0197	-.0197				
Greece				.0078	.0078	.0078	.0078	.0078	.0078				
Italy				.0106	.0106	.0106	.0106	.0106	.0106				
Portugal					-.0223	-.0223	-.0223	-.0223	-.0223				
Cyprus					.0348	.0348	.0348	.0348	.0348	.0348			
UK					.0401	.0401	.0401	.0401	.0401	.0401			
Slovenia					.0913	.0913	.0913	.0913	.0913	.0913			
Austria						.1015	.1015	.1015	.1015	.1015			
France							.1314	.1314	.1314	.1314	.1314		
Malta								.1314	.1314	.1314	.1314		
Germany								.1400	.1400	.1400	.1400		
Belgium									.1446	.1446	.1446		
Spain									.1501	.1501	.1501	.1501	
Ireland										.2075	.2075	.2075	.2075
Finland											.2908	.2908	.2908
Luxembourg											.2913	.2913	.2913
Netherlands												.3404	.3404
Denmark													.4376
Sweden													.4447

Total number of respondents 30626

Table A3: ANOVA Social Quality Index Homogeneous Subsets Countries EU 27 Women

Country															
Subset	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Bulgaria	-.4298														
Hungary	-.3291	-.3291													
Latvia		-.2514	-.2514												
Lithuania		-.2500	-.2500												
Romania		-.2314	-.2314	-.2314											
Poland		-.1685	-.1685	-.1685	-.1685										
Portugal			-.139	-.139	-.1398	-.1398									
Estonia			-.1184	-.1184	-.1184	-.1184	-.1184								
Czech Re			-.1179	-.1179	-.1179	-.1179	-.1179	-.1179							
Slovakia			-.0934	-.0934	-.0934	-.0934	-.0934	-.0934	-.0934						
Greece				-.0663	-.0663	-.0663	-.0663	-.0663	-.0663						
Slovenia					-.0547	-.0547	-.0547	-.0547	-.0547						
Italy					-.0293	-.0293	-.0293	-.0293	-.0293	-.0293					
Cyprus					-.0214	-.0214	-.0214	-.0214	-.0214	-.0214					
UK					-.0115	-.0115	-.0115	-.0115	-.0115	-.0115					
Belgium						.0203	.0203	.0203	.0203	.0203					
France								.0469	.0469	.0469	.0469				
Malta								.0483	.0483	.0483	.0483				
Germany									.0902	.0902	.0902	.0902			
Austria										.1168	.1168	.1168			
Spain										.1198	.1198	.1198	.1198		
Luxembourg											.1915	.1915	.1915	.1915	
Ireland											.2030	.2030	.2030	.2030	
Netherlands												.2285	.2285	.2285	.2285
Finland													.2842	.2842	.2842
Denmark														.3554	.3554
Sweden															.3783

Total number of respondents 30626

Table A4: ANOVA Social Quality Index Homogeneous Subsets Age EU 27

Age Last Birthday			
Subset	1	2	3
65 and over	-.0209		
18 - 24		.0106	
50 - 64		.0373	
35 - 49			.0729
25 - 34			.0792

Total number of respondents 30626

	All Parents	All Fathers	Unemployed Fathers	Employed Fathers	All Mothers	Unemployed Mothers	Employed Mothers
BG	-.2664	-.1776	-.9595	-.1150	-.3249	-.4938	-.2168
HU	-.2372	-.1773	-.7937	-.0417	-.2672	-.3335	-.2008
LT	-.0437	.0111	-.1484	.0267	-.0681	-.0851	-.0570
LV	-.1670	-.0830	-.1608	-.0647	-.1930	-.3348	-.1930
RO	-.0450	.0751	-.3081	.1299	-.1546	-.2413	-.0986
PL	-.0186	.0741	-.0432	.0890	-.0781	-.1664	.0005
CZ	-.0023	.0654	-.3425	.0926	-.0362	-.0876	.0003
EE	-.0206	.0881	-.0730	.1197	-.0165	.0579	-.0479
SK	.0715	.0723	-.2667	.0996	.0711	-.4114	.0524
PT	.0632	.1598	.1444	.1741	-.0502	-.2217	.0069
EL	.0590	.1171	-.1268	.1312	.0134	-.0624	.1066
IT	.0532	.0923	.2208	.0870	.0369	-.0228	.0850
CY	.0746	.0981	-.3015	.1407	-.0588	-.0481	.1205
SI	.0544	.0963	-.1629	.1212	.0221	-.0490	.0417
UK	.0177	.1151	-.1908	.1954	-.0312	-.2250	.1357
BE	.1251	.2540	-.1296	.3051	.0454	-.2370	.1905
FR	.0574	.1158	-.3330	.1358	.0255	-.2062	.1179
MT	.1340	.1990	-.1604	.2301	.0606	.0216	.1343
AT	.2255	.2340	-.0825	.2645	.2199	.2329	.2082
DE	.1396	.1857	-.1929	.2435	.1152	.0243	.1170
ES	.2277	.2470	-.0484	.3052	.2108	.2199	.2032
IE	-.1837	.1939	-.1204	.2432	.1796	.0788	.3037
LU	-.2391	.2289	.3992	.2246	-.2457	.1795	.2832
NL	.3426	.4297	.2419	.4391	.2771	.1750	.3074
FI	.3498	.3689	.1473	.3923	.3340	.2288	.3698
DK	.4376	.5032	.2470	.5383	.3941	.2134	.4438
SE	.4558	.4906	.3831	.4947	.4228	.2759	.4642

Table A5: Social Quality Index Means for Parents

*Chapter 4: Dual Earner
Families Managing Work
and Care*

**Pamela Abbott, Corinne Nativel,
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Introduction

The Lisbon Agenda and other European policy initiatives have encouraged the move to continuous employment for women, even those with children throughout Europe. This has led to a shift away from the traditional male breadwinner model and an increase in dual earner families – families where both men and women combine full time work with raising children (Lewis 2002). Mainly due to different cultural and institutional assumptions about work and care the dual earner family has become more common in some countries than others (Haas 2003; Pfau-Effinger 2005; Haas, Steiber et al. 2006). However, dual earner families are now increasingly common across the EU meaning that the reconciliation of work and care has become one of the main challenges confronting such families throughout Europe. This paper examines how mothers and fathers in dual-earner households go about combining unpaid domestic work and child care obligations with paid employment. It draws on narratives from mothers and fathers in 28 dual-earner families to identify and analyse the strategies they use to combine full-time paid employment with care in seven EU countries, representing different Western European welfare regimes (Austria, Italy, Portugal, Denmark and UK) and two former communist countries (Hungary and Portugal). These couples (both partners were interviewed separately) represent those families with potentially the most pressures upon them in combining paid employment with unpaid work in the domestic sphere. The paper seeks to understand how they combine resources through household strategies (Wallace 2002) and whether institutional and

cultural arrangements make any difference to these strategies as has been previously argued.

Only a minority of couples in the EU with young children both work full time (about 25% with a youngest child under five and 32% with one 6 to 15 years) although there is evidence that more would prefer to do so (Haas, Steiber et al. 2008; O'Reilly, Roche et al. 2008). The proportions tend to vary between countries depending on the availability of support for working parents (Bielienski and Hartmann nd). This paper will show that irrespective of the country in which they live, dual-earner parents are under constant pressure to manage their work and domestic commitments and mothers tend to experience more pressure than fathers, as do those in working class jobs. This supports similar findings from research that has considered a narrower range of countries (Nazio and MacInnes 2007; Forsberg 2009).

The countries selected for analysis exemplify a range of work and care regimes. In terms of cultures of care (Haas 2003; Pfau-Effinger 2004) Italy and Austria exemplify countries where mothers are expected to be full-time carers, whilst Denmark has had a long tradition of supporting parents in full time work. In both post-communist countries (Hungary and Poland) there has been a tradition of women and men working full time at the same time as well as women being responsible for extensive housework duties, although the institutional support for these arrangements have been eroded in the last twenty years. In Portugal there has been a tradition of full time employment for mothers but with little institutional

support, whilst in the UK part time employment has been more common for mothers (Haas, Steiber et al. 2008). In Southern European countries welfare support has traditionally been given by the extended family and relatives could offer possibilities for providing childcare even where formal child care provision is absent.

While member states have sought to pursue a wider range of policies, they too have encouraged increased female participation in the labour market, including amongst mothers (Lewis, Campbell et al. 2008). Dual labour market participation may be facilitated by the couple themselves (sharing of childcare and domestic work), firms (family friendly policies), by state policies and social services and by social resources (help from family, friends and neighbours) and the ability to purchase substitute care and domestic labour (Forsberg 2009; Wallace 2002). Mothers' participation rates are influenced by a combination of material and cultural factors, employment opportunities and economic pressures. However, Haas et al. (2006) have argued that while cultural and institutional factors are important in explaining mothers' employment rates in Eastern and Central Europe, these factors are mediated by the economic necessity of both parents working. Transfers between generations are also important in supporting parents and the extent and nature of such transfers also varies between countries (Moss and Kamerman 2009). Clearly the strategies that parents put in place will be influenced by the support, formal and informal care they can draw on as well as cultural attitudes and these will be critical in enabling them not only to fulfil their multiple

obligations but also to have an acceptable quality of life (Fine-Davis, Fagnani et al. 2004).

Based upon these institutional and cultural arrangements, we would therefore expect to find different care strategies as couples combine resources available within a prevailing value system (Wallace 2002). For example we would expect to find family arrangements playing a larger part in Southern Europe (Italy and Portugal), whilst formal child care arrangements might be more important in Denmark where pre-school provision is extensive and of high quality. On the other hand, lack of childcare facilities for the under threes means that Hungarian and Polish families less likely to have access to formal provision. In the UK the traditional lack of child care facilities has recently been mitigated by Labour policies, but there is still a shortfall compared to other countries such as Denmark, so we might expect to find mothers there making less use of them.

Combining Work and Care

There is a significant body of research on how European families combine paid work and care much of it based on the analysis of large data sets and limited to Western Europe. It points to the underlying tensions, conflicts, instability and anxiety experienced by parents: the lack of time for one's family due to work obligations puts family life at risk, while the lack of time for work because of family obligations diminishes individual career prospects, level of income and pensions (Knijn and Smit 2009). Dual worker families have difficulty in fulfilling all the demands on their time irrespective of care regime with women

shouldering much of the burden of child care and domestic work. Whilst parents give significant importance to work and family they tend to prioritise the latter (Haas, Steiber et al. 2008). However, it is important to recognise that when they are talking about childcare, parents tend to feel constrained to comply with a norm of involved parents (Forsberg 2009).

The diversity of welfare regimes across Europe is assumed to result in different patterns of combining work and childcare, some having more family-friendly policies than others. Research in four European cities (Dublin, Paris, Copenhagen and Bologna) found significant differences between the countries in the ease with which parents could combine employment and care. Parents in Denmark, where childcare is seen as a public responsibility and where flexible working is commonplace, found it much easier than parents in the other countries (Fine-Davis et al 2004). Five Workcare regimes have been identified in Europe (Table 1): *Long leave, Part-time Extensive Family Policy; Family Care; Short Leave, Part-time; Extended Parental Leave* (Ejrnaes and Boje 2008). The Extensive Family Policy regime of which Denmark is an example is the only one where there is extensive public policy support for working parents (Moss and Kamerman 2009) with the others providing little practical support for dual-earner parents, although a high proportion of mothers are in paid employment in Portugal, Hungary and the UK with a somewhat smaller promotion in Poland and a low participation in Italy. The countries from which we have drawn the qualitative

interviews represent each of these regimes.

There seems, however, to be increasing convergence across Europe in the ways in which families organise paid and unpaid work with factors such as parents' individual perceptions and attitudes towards care, their educational level, earnings and working schedules, together with the age of children being important factors although the availability of childcare facilities remains influential (Larson 2004). Negotiations between parents and the preferences of fathers are also important (Baldock and Hadlow 2004). An analysis of the time budgets of dual worker parents suggests three ways in which parents allocate responsibilities: shared roles, both parents spending the same time on paid work and unpaid care; complementary strategies (one parent spending more time paid work and the other on childcare), or, the 'double burden' with the mother spending more time on both activities (Wierda-Boer, Gerris et al. 2009). The most common was the equal sharing of child care but with women generally remaining responsible for domestic work.

We now turn to identifying and comparing the strategies used by dual-earner parents as they combine their duties as full-time workers with their responsibilities for childcare and domestic work. We add new insights both in terms of focus and method, firstly by looking at dual-worker parents in seven countries representing different workcare regimes and secondly by looking at the accounts of both parents.

Work-care Regime	Key Features ²	Countries
Extensive Family Policy	High level childcare 0 -3 years, with generous payment of parental leave. High proportion women working part-time	Sweden, Denmark, Belgium, France
Short leave, Part -time	Short period of poorly paid parental leave, low provision of public childcare for 0 – 3 year olds and high proportion of mothers working part-time.	UK, Netherlands
Long Leave Part-time	Long period of relatively well – paid parental leave followed by mothers who do return to the labour market working part-time.	Germany, Austria, Luxembourg
Family Care	Period parental leave varies but badly paid . Mothers generally withdraw from the labour market and do not return when their children are older.	Italy, Estonia, Slovenia, Spain, Latvia, Portugal, Greece
Extended Parental Leave ¹	Long period of parental leave with women returning to full-time employment when they have exhausted their entitlement to leave. Finland deviates someone what as there is a greater provision of public care for 0-3 year olds and more women working part-time.	Hungary, Poland, Czech Republic, Finland, Lithuania

1. Bulgaria also has this regime but was not included in the Workcare analysis.

2. Part-time work is working less than 30 hours a week. In the Scandinavian countries, including Finland, part-time is generally relatively secure long-part-time whereas in the UK, Netherlands , Germany and Austria many women work in short-part -time jobs which with the exception of those in the Netherlands are often marginal and insecure.

Methods

The paper is based on qualitative analysis of narratives from a purposeful sample of parents from 28 households (56 interviews) where both worked full-time (Appendix 1). Respondents were aged between 30 and 50, 17 couples had two children, seven had one child, three had three children and one four.

Children were aged between six months and 12 years but only nine families (2 in Denmark, Italy and Poland and the UK and 1 in Portugal had a child less than 3 years) with two of these (both Danish) having only children less than three. The socio-occupational status of respondents, ranged from manual and sales to top level management and professional occupations. Some had secure

employment others were self-employed or on temporary contracts. Half (28 informants) were graduates; in 10 couples both had degrees and in eight graduate mothers

were married to non-graduates. In 22 of the families both parents were employed in jobs in the same occupational class (5 professional and managerial, 10 intermediate and 6 working -class). Five wives in intermediate jobs were married to working class men and one professional to an intermediate man, with one intermediate man having a working class wife. Interviews were based on an agenda agreed by the project partners and carried out in the language of the informants by trained interviewers. Each partner was interviewed separately. The agenda covered current and past paid employment and childcare arrangements, responsibility for domestic work, their perceptions of individual, family and state responsibilities as well as satisfaction with their workcare arrangements. The transcripts were anonymised, transcribed, translated into English. All names are fictitious.

The analysis proceeded by creating charts through which interview data was classified, following the “framework” approach (Ritchie and Spencer 1994). The themes identified from this analysis are described below and fully set out in Appendix 1. In particular, we focused upon the use of day care, paid care (for example a nanny), paid occasional care (for example a babysitter), informal occasional care (for example relatives and friends) and emergency care in case of a crisis. Based upon these classifications we went on to identify

five main strategies by which parents combined these resources. Dual-earner couples’ strategies relate to three main spheres of activity: paid work, childcare and household duties. We examine the ways in which mothers and fathers organise their lives to fulfil the competing demands placed on them.

1. The meaning of paid work.

Paid work is a means to ensure the family's livelihood and as such strategies to optimise income are important. For some parents paid work is seen as essential for the family's survival:

[-----] without my income we would not be able to provide for the family. It would be impossible, if I did not work (Marta, Hungary, interpreter, 1 child).

For other families, especially those in intermediate and professional occupations, dual earning was seen as a way to enjoy a good standard of living with parents frequently mentioning being able to afford better housing:

Taking into account the financial situation, it's much better, for instance, I live in my own house, I drive a, better car, I make more money, I have more children. (Marcin, Poland, team manager, 3 children).

Work is also seen as important for fulfilment and many of those in professional and managerial occupations stressed the importance of the rewards from work and the importance of career progression, although they also experienced difficulties in combining work with caring responsibilities. Fredek, a Hungarian teacher said:

It is very hard emotionally because it is very difficult to leave the school because I like teaching very

much and I feel that I am successful at it.

While Iwona a Polish financial controller told us:

I just plan to get better and better at my job. I should study for another qualification, but that is just a dream, there is no time.

Other mothers, recognising the potential conflict between home and work stressed that they prioritised the family over career progression. As Brigitte a Danish PhD student with two young children put it:

I have decided to put my career ambitions on hold. [---] I always thought having children meant putting your career aside.

However, Domos, a self employed Hungarian building contractor married to an interpreter who had taken long parental leave said:

I need to help my wife now. She stayed at home to look after the child [-----]. I have to give up things so she can progress her career.

Others, where the income of both parents was essential for survival defend working arguing that it was not a question of prioritising work over the family, but as a Portuguese mother who worked as a clerk put it:

Work obligations are also for my family. I'm not putting the job before my family. I'm putting the job in its right place, which is to feed my family.

Mothers tended to be more concerned to ensure that their employment obligations did not prevent them taking on the work of caring for children and doing domestic work than fathers recognising the sacrifices they were making for the sake of the family. Pat, an engineer in the UK, clearly regretted not being able to work offshore anymore which she saw

as incompatible with being a mother, but not with being a father. Compare, also, the regrets of a Polish dressmaker: *I make lots of sacrifices; I mean lots*, with those of a Danish father: *But in general when saying yes to a new job, I have never considered it in relation to my family situation.*

1.1 Managing Work and Care

Dual worker parents are under constant time pressure, as a Polish mother and university lecturer with three children explained: *No, we don't have much time because of how we work; there isn't much time.*

Given the pressure on time scheduling to ensure that all the essential work, care and domestic tasks are undertaken is an essential but often unrecognised task. In addition to organising day-to-day activities, parents have to be able to plan what they will do in emergency situations, when the kids are sick, when they need to be taken for a medical appointment, if they themselves are sick, if the nursery/kindergarten/school has a closure or if carers they rely on (formal or informal) are unavailable. A Polish dressmaker, recounted how she tells people: *I have this procurement, catering and logistics company.* The majority of couples, and especially those in professional and skilled intermediate occupations, pay a lot of attention to planning. Cooperation, communication and coordination represent the key pillars on which household strategies rest. As Monika, a Hungarian teacher with two children put it:

I have to plan every minute. My husband and I agree every evening that will happen the next day, who will do what. Every day is planned; it is organized.

There were also references to longer term planning, especially in terms of ensuring adequate support for child care. Marcin a Polish account with two young children explained how they had moved from Warsaw to Płońsk:

We thought it would be a good solution to move to Płońsk, [---] we could count on help of the grandparents, to take care of the children, and things like kindergartens are much closer than in Warsaw.

Working class couples, however, often feel a lower sense of control over the day-to-day scheduling of domestic and child care tasks and report having to take decisions in a hasty fashion, as and when, without being able to plan. They are generally subjected to more uncertainty and less flexibility at work; they report feeling limited control and are highly reliant on the proximity and time flexibility of other close members of the family for support. As Lynn a self employed car valet from the UK explained:

We don't plan things anymore [---] there's no planning (...) you just can't plan ...Certainly I wouldn't know what a normal week was...we've been like that for 12-13 years now.

Crisis management generally relied on being able to organise work around looking after children and/or having relatives who could be called on at short notice. It was mainly professional and some intermediate workers and those employed in the public sector that were able to rely on work flexibility and sympathetic bosses. Iwona, a Polish accountant, gave us an 'extreme' example of employer support when she was required to go on a business trip: *My boss told me I should stay in a hotel with*

my baby and a nanny [-----]. It was paid for by the company

It was also noticeable that the mothers were seen as mainly responsible for planning and organising. Many told us that their husbands helped with domestic tasks and childcare, but had to be told what to do and often it was easier just to get on and do it themselves. A Hungarian doctor, father of one child recognised the key role of his wife in organising.

I am a very lucky man because my wife wears the trousers in the family. She solves everything.[--] Thanks to this our family works well. (Victor, Hungary, doctor, 1 child)

2. Caring for Children

Dual earner parents generally need some support in providing care for their children, depending on the age of the children, the public provision available and the informal networks they have access to.

Parents with children under three have to make arrangements for them to be cared for during the day. Denmark is the only country with extensive subsidised state day care provision and workplace support for children under three years. At three years, children can generally go to kindergarten and then subsequently to school. Parents still have to make arrangements for children or at least younger children to be taken to and collect from kindergarten/school and to be looked after. Beata, a Polish dressmaker points to a problem facing many parents:

The kindergarten is open only for 5 hours, from 8.00 a.m. till 1.00 p.m., so it makes things difficult, because if it was open longer, it'd

be a bit easier... as it is, somebody has to collect him from the kindergarten and bring him home.

Parents also have to find ways of ensuring their children are looked after in emergencies, often at short notice, and during kindergarten/school holidays. Substitute child care is also necessary if parents wish to go out without their children.

Below we divide the analysis into the different forms of care that were used by couples.

2.1 Day Care

Nine families had at least one child less than three years old, two in each of Denmark, Italy, Poland, and the UK and one in Portugal (Appendix 1). All the parents except one Danish father, who was an electrician, were in professional or intermediate occupations. The parents used a range of substitute care options, nurseries, child minders, nannies and grandparents. Mostly they took their child to the care provider but two Polish families employed nannies. All the families paid for childcare for at least some of their children except the Portuguese family where a grandfather and his maid cared for the baby. One Italian family had the youngest children (twins aged 2) cared for by grandparents who lived close to them. Two other families relied on grandparents to provide some care, one in Italy and one in Poland.

Sara, an Italian doctor told us of her parents:

They've always lived nearby. They used to live opposite, now they're in the same building, so I had no worries that going back to work I'd have to leave my daughter with a stranger after 3

or 4 months. I've never had worries in this respect.

Five couples relied on themselves to provide care outside of the hours of formal childcare with some, mostly, occasional help from relatives. What is noticeable is that this falls mainly on the mothers; fathers with very young children tend to do even less childcare and housework than those with older ones.

Many of the parents did not think that very young children should in formal institutional childcare. As Marcin, a Polish financial controller who employed a nanny explained:

I think a small child should be cared for at home, and when they're around four, go to the kindergarten.

However, some parents in Denmark and the UK were critical of the lack of state provision, for young children, in the case of Denmark specifically for those under one year. It is worth noting that these were parents where mothers with very young children worked and who lacked informal care networks to draw on for regular substitute care. Sylvia, a UK shop worker, told us:

I think they could organise childcare better [-----] if they could provide more facilities for childcare

The cost of childcare was also only raised as a concern in the UK. Brian a kitchen designer married to a car valet said:

-----two children in a nursery...it was borderline as to whether it was worth Brenda going to work ...we paid so much in fees...it is horrendously expensive.

However, Martin a train guard pointed out that most of the cost of nursery for

his son had been paid for by the Government

we had to take him to a ...take care centre...and the government was paying most of that we just topped up the rest...once he was in primary, that was the end of our need of childcare (Martin)

2.2 Before and After Kindergarten/School Care

Twenty six of the families had at least one child in kindergarten/school. Generally the opening hours of these institutions are shorter than normal working day and only four families (2 Danish, 1 Austrian and 1 Portuguese) used formal after school provision. With the exception of a few older children who could go to and from school themselves children had to be taken to and collect from the kindergarten/school. The two strategies used by parents were either to arrange their own working day so that one of them was available to take the children to kindergarten/school and to collect and look after them or for a relative (most frequently a grandparent) was called upon to do so (Appendix 1). Often both strategies were used with parents calling on relatives when they could not collect the children themselves. Parents were generally able to look after children at weekends but relatives often provided help during school holidays.

The most common dual-earner strategy is temporal de-synchronisation, ensuring that at least one of the parents is at home to look after the child(ren). This strategy is possible when work arrangements are flexible, for example being able to work different shifts, being able to work from home or being able to work flexible

hours. Some parents said that they had become self employed so that they could provide adequate child care cover. This strategy was found in all the countries and by parents in all occupational classes. Fredek, a Hungarian school teacher and Sylvie a UK shop work provide examples of how parents can work shifts:

I work in the mornings, and my wife works in the afternoons and evenings. We take care of the children by taking over from each other and we can both build our careers (Fredek).

My partner works days so I look after them during the day and then I work nights (Sylvie).

While Victor, a Hungarian doctor explains how his wife who is a self employed IT consultant can work at home:

She works as a consultant on the computers. She has an intellectual occupation and has arranged motherhood and career very well. This is a lucky situation and a lucky job selection.

Pat who works as an engineer in the UK explains how flexibility of hours can enable work and care to be scheduled:

We are quite lucky actually because we are both engineers and our times are quite flexible. It's not like if we were working in a shop ...the shop opens at nine you have to be there. If I am in at half past nine doesn't matter, I will just work my lunch break, I will work a little bit late...

However de-synchronisation could be difficult to organise and subject to employers changing policy and was not a strategy available to our entire informants. For example, Dariusz, a Polish police officer told us it could be

difficult to organise shifts and Henrik a Danish electrician told us about a change in attitude by his employer:

Until recently, I've collected Signe from the day nursery, and Rikke [his wife] collected Anne but now I'm not allowed to use the company car. I was told that if I did and got caught, I'd get fired.

De-synchronisation as well as not being an option for some parents can also have drawbacks as Brigitte a Danish mother explained:

We have tried to work by turns so that our daughter was not in the kindergarten for so long but that resulted in us not seeing each other very much, which in the end has made us argue about family obligations.

The other main strategy was to rely on grandparents to take children to and from kindergarten/school and look after them until parents arrived home. This was the main strategy used by six families, in three of these the families lived with grandparents and in the other three the grandparents lived close by. In other cases grandparents were responsible on a regular, but not daily for before and/or after kindergarten/school care.

Neighbours and friends were rarely called on to provide childcare especially on a regular basis. A rare exception was Beata a Polish dressmaker who lived in an extended family and described reciprocal help amongst neighbours:

---the neighbours help us everyday. Because we can leave the children with them and they can leave theirs with us.

2.3 Paid occasional care

Paid occasional care, such as baby sitting was used in most countries but was seldom listed as a regular child care strategy.

2.4 Informal regular care

Informal regular care was a common strategy and for this couples mostly drew on the assistance of grandparents. In Southern and Eastern European countries the participation of extended family has been a long tradition. In the case of Eastern European countries, this continues from the communist times (Wallace 1995) whereby the older generation had obligations to support the younger generation through their family building phase (Wallace and Kovatcheva 1998). In Southern Europe, the “family centred model” of social care was a long tradition also reinforced by the lack of public welfare services (Haas, Steiber et al. 2008). In many of the interviews in Southern and Eastern European countries, grandparents were actually co-resident as they offered housing to young couples not able to live independently. This style of living, a result of necessity, was more common than in northern Europe, but enabled the provision of regular childcare to be spread around different kin more easily.

2.5 Informal occasional care

Grandparents are also the usual source of informal occasional care, but so are friends, neighbours and aunts and uncles. This use of informal care as an additional resources to more usual arrangements is pervasive. Informal contacts are important in all countries, in contrast to the informal regular care described above.

Occasional care was required by parents both to enable them to carry out paid employment and to pursue leisure activities. The three alternatives were for the parents to cover themselves, to call on informal carers or to pay a baby sitter. Victor, a Hungarian doctor who generally considered childcare and domestic work his wife's responsibility provided an example of parents covering themselves:

My wife was in Paris at a conference in the autumn, so I was left with my daughter. The grannies sometimes took her from the pre-school to dance classes, but I could arrange my day so that I could collect her most of the time.

Again relatives, especially grandparents including those unable to provide regular care would provide occasional care to enable parents to go out look after them during school holidays. A few could also ask neighbours but most were reluctant to do so. Brian a UK kitchen designer explained to us:

[The neighbour] if we wanted to someday go out Milly and Aron could go there, no problem, if she's not on duty; we just don't know if she's gonna be on duty or not. And she doesn't know when we are going to be available.

Others said that they went out separately and a number of the mothers described how their husbands continued to pursue leisure activities but that they themselves did not have the time to do so. Others expressed the view that it was not acceptable for parents to leave young children so they could enjoy themselves. Martin, a UK train guard, told us:

I know through experience of friends who are putting their kids with grandparents and aunties and

things like that...they get resentful for being there because the parents are always out having fun and they are having to look after their children sort of thing...so we don't want to put our family in a situation where they feel they have to look after them while we are away having some fun.

The general impression was that parents were relatively content with staying at home in the evenings and weekends and going out as a family.

2.6 Emergency Care

Most parents had strategies in place for providing childcare cover in emergencies, only two families, the two who had children they considered old enough to look after themselves after school said they had no strategy in place. The rest relied on a combination of parents managing themselves and calling on kin, most frequently grandparents. A number of those who were not easily able to call on kin said it could be difficult to cover on occasions. Employment flexibility were again important Joao a Portuguese medical centre receptionist told us: *In the case of the little one being sick and having to be picked up at the nursery I could go.* Where one or both parents work at home it is generally not a problem and others were able to work at home if the children were sick although, this was often seen as far from ideal and could be problematic if cover was needed for more than a few days. Parental leave was mentioned by a number of the parents although it was generally mothers who were said to take it. However, making arrangements could be difficult. Brian, a UK kitchen designer who worked flexibly thought child care was his

wife's responsibility and described collecting them and taking them to her in an emergency. She then had to look after them while continuing with her work as a car valet. Others, mainly in routine non-manual and manual work, explained how difficult it could be. Olivia an Austrian clerical work said: *I am not allowed to take work home*, and Sylvia a UK shop worker told us:

The job I've got at the moment is really good but it's got to the point where I resent it because you cannot afford to take time off.

Two Polish respondents, Marta, who is a Polish shop assistant and Marcin, a financial controller employed with a subsidiary of a German carmaker told us that employers in Poland were reluctant to let workers exercise their rights:

At my company, there's no child care leave [-----] I should force my employer to give me what I'm entitled to, like every employee but it's impossible, because there's no such demand from employees here. (Marta).

In Germany, it does a lot to present itself as being family-friendly and children-friendly. On the other hand, in Poland it's a bit different. (Marcin)

3. Domestic work

The third main area that dual earner couples had to manage was that of domestic work. The topic of housework is the one that female interviewees gave us detailed accounts of when describing their daily routines which they experience at a fast pace and under constant pressure. The mothers clearly spend more time than the fathers doing housework and were seen as responsible for it (Appendix 2). Fathers were

generally said to help and often said that they did the household maintenance and gardening so this was a fair division of labour. The combination of work with family and household duties was stressful and exhausting for many of our respondents as Dora a Hungarian clerical worker put it: *My whole day is rapid. Shopping, cooking, washing, cleaning and going to the bed..* Marta, a Polish shop assistant, expressed the views of many of the wives when she said: *I'd like him to start cleaning more, so that I have to do less. When I get home I do not know where to start.*

Even for those couples where both agreed that they shared the planning and carrying out of domestic work, women did most of the essential day-to-day work. Six of the fathers provided no help with domestic work at all and only one, Carlos a self-employed Portuguese technical drafts person, was said to share childcare and domestic work equally. Husbands were relatively honest about not being very engaged in domestic work and argued that the main reason was that housecleaning, laundry, cooking and similar tasks were areas in which their partners wanted to remain 'in control' and they themselves did not feel confident. Martin a UK train guard, for example argued:

I'm surely not going to agree to wash the windows and clean up, because I know nothing about it and it makes me nervous. I'm not going to force my wife to go to the garage and fix her car, because she knows nothing about it. Or clean up in the garage, it's not her duty.

Household tasks were also regarded as menial by some men. Marcin, a Polish

financial controller married to an accountant argued quite cynically that:

I like to load the dishwasher. But unloading is something I find dull, because it doesn't require thinking and arranging the dishes so that they are fitted in the best way.

Mothers frequently did the domestic work because it was easier than trying to get their husbands to do it or because even if the husbands did help, they often did not make a good job of it. As Malene, a Danish schoolteacher put it:

He's just like the typical man [---] If he does something, I always have the feeling I have to go cleaning up after him. So I prefer to do it myself in the first place.

In sum, the gender role division remains very traditional: full-time working women bear the brunt of the household duties while men perform maintenance and repair work around the house and occasionally help with dishwashing, and with cooking, a task that some of them enjoy. In fact, it is more often women who overstate their husband's participation, which is based more on a perception and wishful thinking (he could help if needed) than on actual tasks carried out.

Strategies for Combining Work and Care

Planned strategies for combining work and care were generally restricted to ensuring that there was adequate day-to-day cover for child minding. Domestic work which is care work generally remained the responsibility of mothers. We can identify five main strategies used by parents (Appendix 1):

Shift working – parents work different shifts so that one is generally available to look after the children (used by four couples). This strategy involved the de-synchronisation of care discussed above. Couples using this strategy were found in Austria, Poland, Italy and the UK, but it was not a dominant strategy in any particular country. All of the above countries however, are ones with insufficient formal child care provision for children under 3 and in the case of Austria school finishes at midday meaning that it is difficult for both parents to work full time. Shift work enables the parents to care for children as a couple without having to resort to outside help.

Case Study: Shift working – Nunzia and Massimo from Italy provide an example of a couple who combine work and care by working different shifts. They are both police officers. They have two children now ages 7 and 10 years but both worked full-time when the children were younger. When the children were younger they had a house in the countryside but moved back to the town as the time taken travelling made things very difficult. The accommodation they now have is not really large enough but all they can afford. Massimo has had promotion but Nunzia, who is a university graduate, has put career ambitions on hold while the children are young. They have very occasional help from grandparents with childcare but generally manage

to cover themselves for both routine and emergency childcare. Massimo helps with childcare and the shopping but not with housework or cooking.

Flexible working – the jobs that one or both parents have enables them to ensure adequate child care cover because either they are able to work flexibly or because they are self-employed (used by nine couples). This strategy was found in all countries and was the most common strategy across our sample. Here we find the adaptation of working life to family life to some extent.

Case Study: Flexible working.
Natlia and Carlos from Portugal exemplify parents who are able to work flexibly. Carlos is a self-employed draftsman and can work at home. Natalia works in adult education and can also be somewhat flexible. They have two children aged 4 and 7 years. They have occasional help from relatives but generally the father is responsible for routine and emergency childcare. Carlos also shares responsibility for housework and cooking.

Reliance on formal care – the hours that formal care institutions are open meets the needs of working parents and/or carers are employed to work in the family home (used by seven couples).

Case Study: Formal Care
Pat and Doug from the UK exemplify parents who rely on formal care. They have two children ages two and three years and are

both employed as engineers. Doug usually takes the children to and collects them from the nursery and Pat is able to take parental leave in an emergency. Doug helps with the hovering.

Informal care networks – parents are able to draw on a network of informal carers, generally grandparents with whom they share a family home or who live in close proximity (six couples); This arrangement was found only in Southern and Eastern European countries, where cohabitation is more common and family help a more established tradition. The availability of grandparents was an important part of this strategy

Case Study: informal care networks
Beta and Grzegorz from Poland exemplify parents who use an informal network of relatives and friends. Beta is employed as a dressmaker and Grzegorz as a baker and they have two children aged five and nine years. They live in an extended family and routine support with childcare is provided by Beta's mother and sister. Neighbours are also called on regularly. In an emergency Beta's mother generally looks after the children but Beta has taken parental leave occasionally. Grzegorz occasionally helps with childcare and regularly helps with cooking, dishwashing and cleaning.

Self-reliance. In this strategy, children are considered old enough to go home from school on their own and look after

themselves until their parents return from work (two couples).

Case Study: self reliance

Gabriele and Felix exemplify parents who are self-reliant. They have one child aged 12 years. Felix takes the child to school in the morning but after school the child goes home and waits for the parents to return. They have very occasional help from a grandmother and say that there is no one to help in an emergency. They are uncertain what they would do if the child was sick and could not go to school. Felix helps with the shopping and hovering.

Parents also have to plan for emergencies, especially when children are sick or need to be taken for medical appointments. Most parents used a combination of strategies including flexible working, parental leave (most frequently taken by the mother) and calling on relatives (Appendix 1). A small number of parents appeared to have no contingency plans in place for emergencies and just hoped they would not happen. Employers' attitudes and understanding towards parental responsibilities allowing them to take parental leave, giving discretionary time off in emergency situations, or allowing a margin of time for late arrival and early departure are major enabling factors. Having relatives, especially grandparents who are healthy and live close by is also important. Parents rarely used substitute care to enable them to pursue leisure activities without their children, when they did they generally called on relatives, infrequently on friends/neighbours and occasionally on paid babysitters.

There is no doubt that the above strategies are informed by a set of institutional and policy measures available or not through the state, the firm and the family as well as by a set of values and beliefs which may be culturally-driven and thus country-specific (Pfau-Effinger, 2005) or which may be universal. In such a small purposeful sample it would be dangerous to generalise to countries but rather to see the strategies as ideal-types of the ways in which it is possible for dual-earner parents to combine paid employment with responsibilities in the domestic sphere. Having said this it is noticeable that high dependency on informal networks is to be found in Italy, Poland and Hungary, countries where cultural attitudes emphasise family care and that criticism of the state for inadequate provision of care especially for children under three was made by parents in Denmark and the UK where cultural attitudes and public policy encourage mothers to have paid employment. Country does matter but there are commonalities across countries with occupation, access to formal care and the ability to draw on informal carers being the major determinants of the strategies adopted.

Conclusions

This paper has identified patterns of childcare, housework and paid employment in dual-earner families. Working parents have to develop routines of everyday life in order to combine responsibilities for paid employment with those in the domestic sphere. These routines are constrained by the formal and informal support that they can draw on as well as by often

deeply buried taken-for-granted assumptions about responsibilities for work and care. While there is evidence of fathers being involved in child rearing it is noticeable that fathers do little of the day-to-day routine work of caring for children and this is generally seen as appropriate by mothers and employers as well as fathers themselves. Mothers do the bulk of child supervision and caring for the family, ensuring that children and fathers are fed, have clean clothes to wear and live in hygienic conditions. The main task routinely undertaken by fathers is taking children to and/or collecting them from care providers, generally on their way to and from work. Dual-earner couples generally try to be self-reliant calling on family when they have no other option. While public policy and cultural values help explain some of the differences between countries equally important are the type of employment parents have and the

sector they are employed in, with parents often choosing employment that enables them to manage dual earning or becoming self-employed so that they have greater flexibility. Formal substitute care is essential and those who cannot call on informal networks in emergencies are especially challenged.

The five strategies in this study do suggest that there might be a relationship with the kinds of resources available in different countries and with cultures of care. However, most strategies could be found in all countries, suggesting that dual earner households are facing common problems in combining work and care, irrespective of the institutional environment. Hence, the presence or absence of good quality child care or of grandparents might make certain strategies more likely, but in the end parents have to balance a range of resources, wherever they live.

Appendix 1: Summary of respondents' Main Workcare Characteristics

Names	Age	Professions ²	Children age	Day care ³	Paid occasional care	Informal regular care	Informal occasional care ⁴	Emergency Care	Strategy	Country
Cornelia Theo	47 50	School teacher (HE) Wine and book shop owner (HE)	2 (9, 12)	School			Friends (VO) Uncle (VO)	Parents	Shift work	AT
Gabriele Felix	47 41	Youth worker (HE) Administrator	1 (12)	School			Grandmother (VO)	No one	Self reliant	AT
Olivia Christian	33 45	Administrator Car mechanic	2 (4, 6)	Kindergarten School			Grandmothers (VO) Neighbours (VO)	Mother	Flexible working	AT
Marlene Frank	31 37	Auxiliary Nurse Waiter	2 (4,8)	Kindergarten School After school club			Grandmother (VO)	Parents	Formal care	AT
Birgitte Jon	30 31	PhD Student (HE) Stock Broker (HE)	2(6m, 3)	Childminder nursery			Uncle (V O) Grandparents (VO))	Parents	Flexible working	DK
Chistina Jan	38 44	Shop Assistant Bus Driver	2 (5, 10)	Kindergarten School After School Club		Grandfather	Aunt (O)	Mother	Formal care	DK
Rikke Henrik	34 39	Teacher (HE) Electrician	2 (1.5, 2.5)	Childminder Nursery			Grandmother (O) Uncle(V O)	Grandmother	Formal care	DK
Malene Jesper	35 35	Teacher (HE) Teacher (HE)	2 (4, 8)	Kindergarten School After school club			Grandmothers (O)	Grandmother	Formal care	DK
Dora Markus	31 31	Administrator Bricklayer (self employed)	1 (8)	School		Aunt, grandmother, great	Paternal grandmother (O) Friends (VO)	Informal care network	Informal care network	HU

2 HE – higher education

3 For consistency we refer to institutional care for children less than three years as nursery, someone caring for children in the parent's home as a nanny and in their own home as a childminder. We refer to all institutional provision for children 3 years and over not in school as kindergarten.

4 O– occasional, VO very occasional

						grandmother				
Marta Domos	31 30	Interpreter (HE) Owner small construction firm	1 (4)	Kindergarten			Grandparents (O)	Parents	Flexible working	HU
Monika Fredek	40 40	Art gallery Manager (HE) Teacher (HE)	2 (6 , 8)	Kindergarten school			Grandparents (VO) Aunts (VO)	Parents	Flexible working	HU
Gabi Viktor	----- 44	IT Consultant (HE) Medical doctor - owner of hospital (HE)	1 (6)	Kindergarten	Babysitter		Grandmothers (O) Friends (VO)	Mother	Formal care	HU
Sara Gaetano	44 41	Medical doctor (HE) Medical doctor (HE)	3 (8, 6, 2)	Nursery School	Babysitter	Grandparents		Grandmother	Informal care network	IT
Nunzia Massimo	46 42	Police officer (HE) Police Vice Constable	2 (7,10)	School			Grandparents(VO)	Parents	Shift work	IT
Federica Davide	38 39	Care worker Care worker	2 (4, 7)	Kindergarten School		Maternal grandmother - co-habit	Paternal grandmother (VO)	Grandmother	Informal care network	IT
Monica Angelo	38 36	Administrator (HE) Administrator	4 (twins 2, 5 ,7)	Kindergarten School	Babysitter	Grandparents Co-habit	Uncles & Aunts (VO) Friend (VO)	Grandparents	Informal care network	IT
Kasia Zbigniew	31 35	University Lecturer (HE) School teacher and translator(HE)	3 (6 m, 3 , 7)	Nanny Kindergarten school			Grandmother Neighbours (O) Friends(O) Uncles &Aunts (O)	Parents	Flexible working	PL
Iwona Marcin	35 34	Account (HE) Financial Controller (HE)	2 (2, 5)	Nanny Kindergarten		Grandparents,	Aunt(O)	Grandmother	Informal care network	PL
Beata Grzegorz	31 34	Dressmaker Baker	2 (5, 9)	Kindergarten school		Grandmother, and aunt ,live together) Neighbours		Grandmother & mother	Informal care network	PL
Marta Dariusz	37 40	Shop Assistant Police Officer	2 (8, 11)	School			Aunt (O), cousin (O) Maternal grandmother (O) Friend (VO)	Parents	Shift work	PL

Almedia	34	Self employed Hygiene and Security Technician(HE)	2 (1, 5)	Private school		Grandfather (and his maid)		Grandfather & mother	Flexible working	PT
Hugo	35	Self Employed Economist(HE)								
Natalia Carlos	35 35	Adult educator (HE) Technical draftsperson- self employed	2 (4, 7)	School			Aunt (VO) Grandparents (VO)	Father	Flexible working	PT
Dina Joao	35 34	Clerk and sales person Receptionist at Medical Centre	1 (7)	School After school club		Grandmother	Aunts (VO)	Grandmother	Formal care	PT
Maria Filipe	45 48	Administrator (HE) Car sales person	1 (11)	School			Grandparents (VO) Aunt (VO) Friends (VO)	No one	Self reliant	PT
Pat Doug	35 46	Engineer (HE) Engineer (HE)	2 (2, 3)	Nursery			Aunt & uncle (VO) Grandparents (VO)	Mother	Formal care	UK
Lynn Brian	33 44	Car Valet (own business) Kitchen Designer	2 (4,7)	PT nursery School			Grandmother (O) Neighbours (O)	Mother & grandmother	Flexible working	UK
Brenda Nick	35 42	IT Engineer (HE) Operations Manager	2 (2, 6)	Nursery School		Grandparents	Aunts (O)	Mother	Flexible working	UK
Sylvia Martin	34 38	Shop Assistant Train Guard	3 (5, 8 - twins)	School Breakfast club			Grandparents (O) Aunt (O) Friend (VO)	Parents	Shift work	UK

Appendix 2: Men's Degree of Commitment to Childcare and Domestic Duties - Dual-earner Couples*

Name of couple and country	Participation in Childcare	Participation in Domestic Work
Cornelia & Theo (AUSTRIA)	Collects from kindergarten and looks after them	Shopping, cooking (regular)
Gabriele & Felix (AUSTRIA)	Takes to school	Shopping at week-ends, hovering. (regular)
Olivia & Christian (AUSTRIA)	Collects from 2 days a week	No
Marlene & Frank (AUSTRIA)	Takes care of the youngest one in morning.	Shopping (joint), cooks occasionally and unloads dishwasher.
Birgitte & Jon (DENMARK)	Wakes up eldest child and prepares her breakfast. Helps when sick	Helps with the dishwashing and shares cooking at weekends.
Chistina & Jan (DENMARK)	Occasionally collects from after school club	Hovering, dishwashing.
Rikke & Henrik (DENMARK)	Collects from childminder	Occasionally cooks, hovers if asked to
Malene & Jesper (DENMARK)	Takes to school and looks after them on Wednesdays and Friday evenings.	Hovering. Helps with cooking, shopping, dishwashing.
Dora & Markus (HUNGARY)	Takes to school with mother	Dishwashing occasionally
Marta & Domos (HUNGARY)	Sometimes collects from kindergarten Helps when sick	No
Monika & Fredek (HUNGARY)	Collects daily and looks after them	Laundry, weekly shopping (joint)
Gabi & Viktor (HUNGARY)	No	No
Sara & Gaetano (ITALY)	Takes the children to school	Laundry, dishwashing.
Nunzia & Massimo (ITALY)	Takes the children to school.. Helps when sick	Half of the shopping.
Federica & Davide (ITALY)	Takes to and from school	No (Live with grandmother)
Monica & Angelo (ITALY)	Takes to and collects from school.	Shares the cooking and shopping (Paid cleaner)
Kasia & Zbigniew (POLAND)	Sometimes collects from kindergarten	Dishwashing and hovering (VO) (Nanny helps with washing and ironing)
Iwona & Marcin (POLAND)	No	Loads dishwasher. (Nanny does cleaning and shopping)
Beata & Grzegorz (POLAND)	Collects youngest from Kindergarten Occasionally looks after	Shopping helps with cooking, dishwashing and cleaning. (Live with grandfather and aunt)
Marta & Dariusz (POLAND)	Helps all child care depending on shifts	No
Natalia & Carlos (PORTUGAL)	Looks after them Wednesday evenings Helps when sick	Shares housework (according to wife), he claims to do it all
Almedia & Hugo (PT)	Shares taking children to and from school and covering for maid at lunch time	shares shopping , cooking
Diana & João (PORTUGAL)	Shares taking to and collecting from school	shares cooking
Maria & Filipe (PT)	No	No
Pat & Doug (UK)	Usually takes and collects from nursery	Hovering (o).
Lynn & Brian (UK)	Takes to and collects them from nursery	Dishwashing and hovering (VO).

	and school.	
Brenda & Nick (UK)	Sometimes collects nursery/school	Occasionally helps with ironing, main shopping cooking and hovering (employ a cleaner.)
Sylvia & Martin (UK)	Takes to school when shifts permit	Most of the laundry, cleaning kitchen.

* The table is based on both respondents' answers.

** Excludes leisure activities with children.

*** Includes shopping, cooking, dishwashing, taking care of the laundry, ironing, cleaning.

**** VO: very occasionally

- ABBOTT, P. (2007) 'Cultural Trauma and Social Quality in post-Soviet Moldova and Belarus'. *East European Politics and Societies*, 21, 219 – 258
- ABBOTT, P. (2007) Social quality, quality of life and happiness in London, Seoul
Global Metropolitan Forum, Assessing Happiness and Competitiveness in the
Major World Metropolises.
- ABBOTT, P. & SAPSFORD, R. (2006) 'Happiness and general satisfaction in post-Soviet Russia and Ukraine'. *Journal of Happiness Studies*, 7, 251 – 287
- ABBOTT, P. & WALLACE, C. (2007), 'Talking about health and well-being in post Soviet Ukraine and Russia', *Journal of Communist Studies and Transition Politics*, 23, 181 - 2002
- ABBOTT, P, CORINNE, N., & WALLACE, C (2009) *There's Never Enough Time: Dual Earner Parents Strategies for Reconciling Work and Care in Seven European Countries, Paper given at European Sociological Association Conference, Lisbon, September*
- ABBOTT, P. & WALLACE, C. (2009a) 'Combining Work and Care: Enabling Parents with Children to have a High Quality of Life'. Paper given at the International Society of Quality of Life Studies Conference, Turin, July
- ABBOTT, P. & WALLACE, C. (2009b) 'A Virtuous Spiral of Development? Changing Quality of Life in Central and Eastern Europe'. Paper given at the International Society of Quality of Life Studies Conference, Turin, July
- ALBER, J, FAHEY T., & SARACENO C. (eds) (2008) *Handbook of Quality of Life in an Enlarged Europe*, London and New York, Routledge
- ANDERSEN, R., MIKULIE, B., VERMEYLEN, G., LYLY-YRJANINEN, M. & ZIGANTE, V. (2009) *Second European quality of Life Survey Overview*, Luxembourg: Office for Official Publications of the European Commission
- BALDOCK, J. & HADLOW, J. (2004). 'Managing the family: productivity, scheduling and the male veto.' *Social Policy and Administration* 38: 706-720.
- BECK, W., VAN DER MAESEN, L.J.G., THOMESE F., & WALKER A. (Eds.) (2001) *Social Quality: A Vision for Europe*, The Hague, London, Boston, Kluwer Law International.
- BIELIENSKI, H. & HARTMANN, J. (Ed). *Combining family and work: the working arrangements of women and men*. Luxembourg, Office of Official Publishers of the European Union.
- BOHNKE, P. (2005) *First European Quality of Life Survey: Life Satisfaction, Happiness and a Sense of Belonging*, Luxembourg: European Foundation for the Improvement of Living and Working Conditions.
- BOHNKE, P. (2006). *First European Quality of Life Survey: Life Satisfaction, Happiness and Sense of Belonging*. Dublin, European Foundation for the Improvement of Living and Working Conditions.
- BOHNKE, P. (2008). 'Does Society Matter? Life Satisfaction in An Enlarged Europe.' *Social Indicators Research* 87: 189 – 210.
- CLARK, D. A. (2003) 'Concepts and perspectives of human well-being: some evidence from South Africa'. *Oxford Developmental Studies* 31: 173.
- DIENER, E. & SUH, E. (1997) 'Measuring quality of life: economic, social and subjective indicators.' *Social Indicators Research* 40 (1-2): 189-216.
- DOYAL, I. & GOUGH, I. (1991) *A Theory of Human Need*. Basingstoke: Macmillan

- ERJNAERS, A. & BOJE, T. (2008) 'Family Policy and welfare Regimes', in, *Labour Market and Social Policy, Workcare Workpackage 3*, Aberdeen, University of Aberdeen,
http://www.socsci/research/nec/workcare/documents/working_paper_3_combined.doc
 c last accessed 27.08.09
- ESPING-ANDERSEN, G. (1990) *The Three Worlds of Welfare Capitalism*. Oxford: Polity Press.
- FAHEY, T.(2008) 'Fertility Patterns and Aspiration in Europe' in J. Alber, J., Fahey, T. and Saraceno, C. (eds) op cit
- FIGARI, F., PAULUS, A., & SUTHERLAND, H. (2009) *Measuring the Size and Impact of Public Cash Support for Children in Cross-national Perspective*, Essex, Institute for social and Economic Research
- FINE-DAVIS, M., FAGNANI, J., GIOVANNI, D., & HOJGA, L. (2004). *Fathers and Mothers: Dilemmas of Work-Life Balance*. Amsterdam, Kluwer.
- FORSBERG, L. (2009). 'Managing time and childcare in dual-earner families: unforeseen consequences of household strategies' *Acta Sociologica* **52**: 162-175.
- GALLIE, D. & PAUGAM, S. C.. (2002) *Social Precarity and social Integration*, Brussels, European Commission.
- GOUGH, I. (2002) *Lists and thresholds: compassing our theory of human needs with Nussbaum's Capabilities approach*. Paper presented to a conference on Promoting Women's Capabilities: examining Nussbaum's Capabilities approach, Cambridge, September.
- HAAS, B. (2003). 'The reconciliation of work and family obligations: a comparison between Austria, the Netherlands and Sweden.' HWF Survey Comparative Report Volume 2: Thematic Papers. C. Wallace. Vienna, Institute for Advanced Studies, HWF Project.
- HAAS, B., STEIBER, N., HARTEL, M., & WALLACE, C. (2006). 'Household employment patterns in an enlarged European Union.' *Work, Employment and Society* **20**(4): 751-772.
- HAAS, B., STEIBER, N., TORRES, A., COELHO, B., CARDOSO, I., BRITES, R., & JERONIMO, P. (2008). *Orientations to Work and Care. Workcare Report no.4*. <http://www.abdn.ac.uk/socsci/research/nec/workcare/>, Workcare. Social Quality in Work, Care and Welfare across Europe.
- HALLER, M. AND HADLER, M. (2006). 'How Social Relations and Structures can Produce Happiness and Unhappiness: An International Comparative Analysis' *Social Indicators Research* **75** (2): 169-216
- HAUSMANN, R., TYSON, L. D., & ZAHIDI, S.. (2008) *The Global Gender Gap Report 2008*, Geneva, World Economic forum
- HERRMANN, P. (2004) *Discussion Paper on the Domain Empowerment*. Paper submitted to the European Network on Indicators of Social Quality. Amsterdam: European Foundation on Social Quality.
- HERRMANN, P. & VAN DER MAESEN, L. J. G.. (2008) *Social Quality and Precarity: Approaching New Patterns of Societal (Dis)Integration*, .Munich, Personal Research Paper Archive, 10245, <http://mpra.ub.uni-muenchen.de/10245> (last accessed 30.05.2009)
- KNIJN, T. & SMIT, A. (2009). *The relationship between family and work : tensions, paradigms and directives*. Edinburgh, RECOWE Publication, Dissemination and Dialogue Centre, .

- LAND, K., LAMB, V., MEADOWS, S., & TAYLOR, A. (2006). 'Measuring Trends in Child Well being: an Evidenced-based Approach.' *Social Indicators Research* 80: 105 – 132.
- LARSON, T. P.(2004). 'Work and care strategies of European families: similarities or national differences?' *Social Policy and Administration* 38: 654-677.
- LELKES, O. & ZOLYOMI, E.. (2008) *Poverty Across Europe: The Latest Evidence Using EU-SILC Survey*, Budapest, European Centre for Social Welfare and Policy Research
- LEWIS, J.(1992). 'Gender and the development of welfare regimes.' *European Journal of Social Policy* 2(3): 159-173.
- LEWIS, J. (2002). 'Gender and welfare state change.' *European Societies* 4(4): 331-358.
- LEWIS, J., CAMPBELL, M., & HUERTA, C. (2008). 'Patterns of paid and unpaid work in Western Europe: gender, commodification, preferences and implications for policy.' *Journal of European Social Policy* 18: 21-37.
- LOCKWOOD, D. (1964). 'Social Integration and System Integration,' in G. K. Zollschan and H. W. Hirsch (eds) *Explorations in Social Change*. Boston: Houghton Mifflin.
- LOCKWOOD, D. (1992). *Solidarity and Schism: 'the problem of disorder' in Durkheimian and Marxist*
- LOCKWOOD, D. (1999) 'Civic integration and social cohesion' in Gough, I. & Olafsson, G. (Eds.) *Capitalism and Social Cohesion*. Basingstoke, Macmillan.
- LOCWARD, C. (1999) Civic integration and social cohesion. in Gough, I. & Olafsson, G. (Eds.) *Capitalism and Social Cohesion*. Basingstoke, Macmillan.
- MILLS, C. W. (1954) *The Sociological Imagination*, Harmondsworth, Penguin.
- MOSS, P. & KAMERMAN, S.. (2009). *The Politics of Parental Leave*. Bristol, Policy Press.
- NAZIO, T. & MACINNES, J.. (2007). 'Time-stress, well-being and the double burden.' *Family Formation and Family Dilemmas in Contemporary Europe*. G. Esping-Andersen. Bilbao, Fudacion.
- NUSSBAUM, M., and SEN, A., Eds. (1993). *The Quality of Life.*_ Oxford, Clarendon Press.
- O'REILLY, J., ROCHE, J.,& NAZIO, T., MACINNES, J.. (2008). *Labour Market Transitions and Household's Capabilities around Time, Care and Employment*. <http://www.abdn.ac.uk/socsci/research/nec/workcare/>, Workcare Report no.7. Social Quality in Work, Care and Welfare Across Europe.
- O'REILLY, J., ROCHE, J., NAZIO, T., & MACINNES, J.. (2009) *Workpackage 7: Household Capabilities, Organisation of Home, Care and Employment*. Workcare CIT5 contract no. 028361 <http://www.abdn.ac.uk/socsci/research/nec/workcare>
- PFAU-EFFINGER, B. (2004). *Development of Culture, Welfare State and Women's Employment in Europe*. Aldershot, Ashgate.
- PFAU-EFFINGER, B. (2005). 'Welfare state policies and the development of care arrangements.' *European Societies* 7(2): 321-348.
- PHILLIPS, D. (2006) *Quality of Life: Concept, Policy and Practice*, London, and New York, Routledge.
- PRODI, R. (2001) 'Foreword', in Beck, W. A., Van der Maesen, L. J. G., Thomese, F. and Walker, A. (Eds.) *op. cit.*
- RICHARDSON, D., HOELSCHER, P., & BRADSHAW, J.. (2008). "Child Well-being in Central and Eastern European countries(CEE) and the Commonwealth of Independent States." *Child Indicators Research* 1: 211 – 250.

- RITCHIE, J. & SPENCER, L. (1994). 'Qualitative data analysis for applied policy research.' *Analyzing Qualitative Data*. A. Bryman and R. G. Burgess. London, Routledge.
- SARACENO, C. (2008) 'Patterns of Family Living in an Enlarged Europe' in J. Alber, J., Fahey, T. and Saraceno, C. (eds) op cit
- SEN, A. (1993) 'Capability and Well-being' in Nassabaum, N. and Sen, A. (eds) *The quality of Life*, Oxford, Clarendon Press.
- SMITH, A. & STENNING, A. (2006) 'Beyond Household Economies: Articulation and Spaces of Economic Practice' in Postsocialism, *Progress in Human Geography* 30, 190 - 213.
- TARLIN, R. (2009) *Statistical Modelling for Social Researchers*. London: Routledge.
- TRIFILETTI, R., GUSMANO, B., & SALMIERI, L. (2009) *Qualitative Interviews with Households About Work and Care*, Aberdeen, University of Aberdeen
www.abdn.ac.uk/socsci/research/nec/workcare
- VAN DER MAESEN, L., WALKER, M. & KEIZER, M. (2002) *Social Quality. The Final Report. European Network of Indicators of Social Quality*, Amsterdam, European Foundation for Social Quality.
- VEENHOVEN, R. (1999). 'Quality of Life in an individualistic society. A comparison of 43 nations in the early 1990s.' *Social Indicators Research* 48: 157-186.
- VEENHOVEN, R. (2008) "Sociological Theories of Subjective Well-being", in M. Eid & Larsen, R(Eds), *The Science of Subjective Well-being: A Tribute to Ed Diener*, New York, Guilford.
- VEENHOVEN, R. (2009) 'Well-being in Nations and Well-being of Nations', *Social Indicators Research*, 1, 5 - 21.
- WALKER, A. AND WIGFIELD, A. (2003) *The Social Inclusion Component of Social Quality*. European Network on Indicators of Social Quality. Amsterdam: European Foundation on Social Quality
- WALLACE, C. (1995). 'The family and social transition in Poland.' *Journal of European Social Policy* 5(2): 97-109.
- WALLACE, C. (2002). 'Household strategies: their conceptual relevance and analytical scope in social research.' *Sociology* 36(2): 275-292.
- WALLACE, C. & ABBOTT, P.. (2009) *Social Quality in Europe*. CINEFOGO Newsletter, June 2009.
- WALLACE, C & ABBOTT, P. 2009) The Consequences for Health of System Disintegration and Social Disintegration in the Commonwealth of Independent States, Paper given at European Sociological Association Conference, Lisbon, September
- WALLACE, C. & ABBOTT, P. (2009b) Workcare Policy Briefing, Aberdeen, University of Aberdeen www.abdn.ac.uk/socsci/research/nec/workcare
- WALLACE, C. & KOVATCHEVA, S. (1998). *Youth in Society. The construction and deconstruction of youth in East and West Europe*. London, Macmillans.
- WALLACE, C., PICHLER, F. & HAYES, B. (2007) *Job satisfaction and life satisfaction in an enlarged Europe*, Dublin, European Foundation for the Improvement of Living and Working Conditions.
- WIERDA-BOER, H, GERRIS, J., VERMULST, A., MALINEN, K., ANDERSON, K. (2009). 'Combination strategies and work-family interference among dual-earner couples in Finland, Germany and the Netherlands.' *Community, Work and Family* 12: 233-249.