Mothers – Grandmothers – Daughters?
Reconciling Labour Market Integration with Care Responsibilities in Brno
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INTRODUCTION

This book presents a case study of how social policies influence women in the labour market in the Czech municipality of Brno. This study is based on research that we conducted as part of the EU financed project “Impact of local welfare systems on female labour force participation and social cohesion,” which has been shortened to the acronym FLOWS. The project’s goal was to analyze “how local welfare provision affects the labour market participation of women, and how female employment in turn affects the life-course (of women and men), structures of inequality, social cohesion and hence the sustainability of the European social model” (FLOWS 2010: A1: 3).

Following Esping-Andersen (1990) many scholars have tried to place countries into different welfare typologies (e.g. Castles and Mitchells 1992, 1993; Ferrera 1998; Leibfried 1992; Powell and Barrientos 2011). However, these typologies have tended to concentrate much more on benefits than on services, although services make up a great part of public welfare (cf. Jensen 2008). This has caused scholars to miss many points. For example, while it was common to claim that Sweden did not suffer from welfare entrenchment in the 1990s because benefit levels only increased slightly (e.g. Bonoli, George, and Taylor-Gooby 2000), service levels actually decreased greatly (for example, measured in the number of hospital beds or doctors per capita; see Saxonberg 2004). Feminist scholars also pointed out the importance of concentrating more on family and caring polices, since the unpaid work of women played a major role in the economy and in reproduction (e.g. Lewis 1993; Lister 2003; Orloff 2009; Sainsbury 1994). They have noted that matters such as access to daycare and types of parental leave influence that ability for women to participate in the labour market. Since these scholars emphasized the role of family policies, they tended to include one type of service – daycare – in their typologies. This was an improvement over mainstream studies. More recently feminist scholars have also begun to note the impact of elder care issues on gender relations, because if women are expected to take care of their parents or parents-in-law, it complicates their labour market participation (e.g. Eichler and Pfau-Effinger 2009; Outshoorn 2008).

However, feminist scholars also predominantly stuck to the tradition of looking at country-level policies (e.g. Hantrais 2004; Lewis 1993; Gornick, Meyers and Ross 1997; Sainsbury 1996). Even though national comparisons are important and benefits are paid by the state, welfare services are most often provided by local authorities among EU countries. Burau and Kröger (2004), for example, show the often distinctively local nature of welfare services. They also show that local comparisons extend existing cross-country explanations. Even though one country might, to a large extent, belong to a certain welfare regime type at the national level, studies indicate that variations within a country can still be great at the local level. For example, Schultz, Strohmeier and Wunderlich (2009) show
that the same policies can have much different results among cities in Germany because of the different socio-economic makeups and cultural values of people in different cities. As Burau and Kröger note, “Local comparisons extend existing cross-country explanations of community care by showing that community care is largely shaped by local politics, together with indirect structuring by national contexts” (Burau and Kröger 2004). When it comes to elderly care, Trydegård and Thorslund state that in this area the “municipal disparity constitutes a greater threat to the principle of equality in care of the elderly than gender and socio-economic differences” (Trydegård and Thorslund 2001). Nevertheless, very few studies have been made on local welfare (Herbst and Barnow 2008 present one of the few examples) and even fewer in the area of elder care (Anttonen et al. 2003; Wilson 2006).

The aim of the FLOWS project is to contribute to resolving some of these limitations. Therefore, the project gathered data on the local level and concentrated on care for both children and the elderly. The idea being that the coverage and quality of services as well as the welfare mix (including private and family provision) greatly influences the employment of women. Another goal was to see what role cultural norms play in influencing employment, because as some scholars have noted, similar policies can lead to different results in different areas, because of cultural differences. For example, the decision of whether a mother will stay at home for a long period with her child or send the child to daycare is not only dependent upon the quality, cost and accessibility of daycare, it is also dependent on cultural norms of what is “proper” care (Duncan and Edwards 1999; Duncan et al. 2003; Pfau-Effinger 2005).

From this background, the project focused not only on mapping the local welfare system, its relation to the national welfare system and how it potentially supports and/or constrains the integration of women to the labour market; it also put key emphasis on the individual decision making of women with care responsibilities (either for pre-school children or for dependent elderly family members). This special focus on the factors and motives underlying women’s decisions to enter the labour market in the given local policy, cultural and economic context as well as on its impacts on gender equality is highly innovative. It aims at integrating different areas of research, which have so far been mostly treated in isolation.

To do so, the project was organized in several research stages. The first step was to map the local patterns of women’s labour market participation and their (economic) structural context. It was realized mainly through desk research and the analysis of available local and national statistical data. Building on this basic overview of the situation of women on the labour market in the FLOWS cities, the second stage of the project focused on the formal institutional factors conditioning female labour market participation. In this respect, the research concentrated on local welfare systems on the one hand, that is factors such as the local welfare mix in the provision of childcare and elderly care services, governance structures as well as the quality of provided services. On the other hand, focus was placed on the local policy makers’ leeway in their decision making as well as on how their mindsets affect policy formation in the local welfare systems. Apart from
a detailed analysis of key local policy documents, the main approach in gathering these data were structured interviews with key policy makers on the local city level. Finally, the last step of data collection focused on the process of women's decision to enter the labour market. In order to understand this, two differing methods were employed: a representative survey among women living in the FLOWS cities and focus group discussions with employed women living in the FLOWS cities and caring either for a pre-school child or a dependent elderly family member. In this regard, the aim was to gain insights into how women perceive and make use of welfare provisions; how they evaluate their formal and informal work situation as well as their reconciling of gainful employment and care duties (FL OWS 2010: A1).

Hence, the project relied on a mixed method approach which combined focus group interviews with a general survey of women living in the FLOWS cities as well as expert interviews with local policymakers and basic desk research. By going to the micro-level in one town, the project research generated an unusually broad picture of the situation. The FLOWS project compared the local welfare regimes in 11 medium-sized cities in 11 EU countries. The cities chosen were Aalborg in Denmark, Tartu in Estonia, Jyväskylä in Finland, Nantes in France, Hamburg in Germany, Székesfehérvár in Hungary, Dublin in Ireland, Bologna in Italy, Terrassa in Spain, Leeds in the Great Britain and Brno in the Czech Republic.

This book is comprised of material that the Czech team collected within the FLOWS project for the city of Brno. Based on the research steps presented above, this includes analysing current local census data, collecting statistics from the local authorities and collecting printed information about childcare and elder care policies and services in the city, as well as collecting data about changes in parental leave policies on the national level. Our fieldwork includes 13 expert interviews (conducted in autumn 2011) with local municipal policymakers who deal with caring issues as well as local NGOs that are interested in these issues. The focus group interviews were organized with 34 employed women in spring 2013. We had four focus groups: two dealing with childcare (each with 8 participants) and two dealing with elderly care (each with 9 participants). For each type of care we had one group of highly educated women (ISCED 4-8) and one group of women without a university education (ISCED 1-3). The survey was conducted among 805 women living in Brno aged 25–64.

Within the FLOWS project, the main task for the Czech team was to gather local data for international comparison among the FLOWS cities. However, the focus of the FLOWS project on local welfare state policies and women's labour market participation at the local level also created local data, which are valuable and provide interesting insights in itself. This information is especially valuable for researchers interested in welfare state policies and/or the integration of women to the labour market. Our publication importantly adds to current local research on the labour market (re)integration of mothers and their reconciling of work and care responsibilities (cf. e.g. Křížková et al. 2011; Bartáková 2009), by putting specific emphasis on the municipal context as well as on what allows women an early return to the labour market. As far as elder care is concerned, the results of the FLOWS project contribute to earlier research (cf. e.g. Jeřábek
Mothers – Grandmothers – Daughters? (et al. 2013; Přidalová 2007a,b; 2006; Veselá 2002) first and foremost by analyzing the provision of care by informal carers and their decisions about the provision of care within the current institutional and structural context of elder care. At the same time, the presented findings are useful for local policymakers. In this sense, the information presented in our study also adds to the insights of existing (international comparative) policy analyses, which analyze the policy developments in the Czech Republic at a national level. At the same time this existing analysis constitutes an important point of departure for the study of local level policies.

From this point of view, the Czech Republic represents an interesting case, because under communist rule almost all women had to work, since incomes were too low for families to be able to live well off one income. Even though almost all women worked – in contrast to the Nordic countries, where most women began working by the late 1960s – no debate emerged about the need for fathers to share in the parental leave time and the childraising chores. Also in contrast to West European countries, part-time work was virtually non-existent. Thus, the double-burden that women faced of having a job and being the main person responsible for housework and childraising was particularly strong. During the 1950s the communist regime originally tried to make it easier for women to work by rapidly expanding access to daycare. This meant both increasing the number of nurseries for children under three and kindergartens for pre-school children over three. The nurseries were not all that popular, however, because they were overcrowded and run like mini-hospitals, with nurses rather than teachers taking care of the children. In the public discourse, concerns were also raised about the high sickness rates (which came as a consequence of the groups being so large). Paediatricians complained, for example, that children under 1.5 years of age who attended nurseries became sick three to seven times more often than those who stayed at home (Dunovský 1971: 154). A study from 1956 also concluded that one of the reasons for the unpopularity of nurseries was that they were frequently closed due to the outbreak of contagious diseases (Srb and Kučera 1959: 115–120). Psychologists also started complaining that children suffered deprivation which stemmed from being separated from their mothers at an early age (Wagnerová 2007; Langmeier and Matějček 1963; Klíma 1969).

In order to deal with the lack of popularity of nurseries and the falling fertility rates, the regime decided to add an “additional” maternity leave to compliment the mere 3-month maternity leave. The more generous leave was based on the income replacement principle and the regime increased its period to 6 months. The additional leave only paid a flat rate and little by little the regime increased it until it reached a period of 3 years. By the late 1970s it became a common norm for mothers to stay at home for three years (Bulíř 1990; Kreipl et al. 1979), although around 20% of children below three still attended daycare. In fact, the number of nurseries in the Czech part of Czechoslovakia increased from 83 in 1937 to 1,330 by 1978 (ČSÚ, 1979: 1). Under these conditions, it was difficult for
women to compete with men in the public sphere (work and politics), so the
saying arose that women work, but only men have careers (Čermáková 1997).2

After the collapse of the communist regime, women basically continued their
pattern of working full-time before having children, staying at home for 3 years
when having children and then returning to work full-time again after having
children. Some changes took place that made it even more difficult for women
to balance work and family life. First, the public nurseries almost completely
disappeared, which makes it much more difficult for women to return to work
within three years (Saxonberg and Sirovátka 2006). In addition, the number of
kindergarten places decreased, which did not cause problems until recently, as the
birthrate also radically decreased. In recent years the birthrate has increased, yet it
is still nowhere near levels seen in the 1980s (see Figure I.1). As a result, a shortage
of places has arisen, which forces many mothers to stay at home a fourth year.

Figure I.1 Fertility Rates in the Czech Republic 1980–2008

In 1995 the government introduced a fourth year of paid leave. By now the
benefit was open to fathers (having been allowed since 1990), but the government
did not expect men to take this leave, as it was still officially called an additional
maternity leave. It was only because of demands from the EU during the accession
negotiations that, in 2002, fathers received the right to get their jobs back after
taking leave. Various reforms in the parental leave benefits took place between
2006–present. First, right before the elections in 2006 the parliament voted to

1 For details on the subjects of this chapter, see Saxonberg (2014) and Hašková, Saxonberg and
Mudrák (2012).
almost double the amount of money that one gets per month for parental leave to 7,600 CZK. Then a reform allowed parents to choose three different types of parental leave. The fast track paid 11,400 CZK/month for those staying at home until the child is two years old, the basic rate paid 7,600 CZK/month for those staying at home until the child is three years old, while the slow track paid 3,800 CZK/month for those staying at home until the child is four (MPSV 2011). Because of the lack of daycare spaces for children under three, the minister responsible for the reform admitted that he did not expect many mothers to take advantage of this reform and to shorten their leave to two years (Čápová 2008).

In 2012 a further reform was enacted which equalized the different options for leave. Now parents are entitled to stay at home as long as they like up to four years, but they receive a total of 220,000 CZK (approx. EUR 8,800) for the entire period. The monthly rate amounts to 70% of the previous income (of the mother or the father), with a minimum payment of 7600 CZK (approx. EUR 304) and a maximum payment of 11,500 CZK (approx. EUR 460). The shortest possible period of time for drawing the parental allowance is until the child reaches the age of 2. At the same time, the regulations for placing children in public caring facilities were changed. Now, before the child reaches the age of 2 years, the use of a child care facility is limited to a maximum of 46 hours a month and for children over 2 institutional childcare is no longer limited. Nevertheless, for families where neither the mother nor the father contributed to social insurance before the birth of the child, the only option available is the longest (until the child reaches the age of 4) (MPSV 2012). In relation to this system of parental leave allowance, it is still important to note that parents only have the right to return to their previous job within a 3 year period. Hence, the four year option potentially puts the parent at risk of losing the ability to return to their former job.

Thus, family policies are still based on the assumption that only the mother will go on leave (as there is no paternity leave, father quotas or a leave period based on the income-replacement principle, which would minimize the family loss of income if the father went on leave given the fact that fathers have the highest income in most families). Even though parents can now get more money per month if they stay at home for two years instead of three or four, very few mothers choose this option, since public nursery places are extremely difficult to find and private daycare is very expensive. Given the low benefit level, only around 1% of fathers go on leave\(^1\), as they easily can argue that the loss of income would be too great, while mothers have lower incomes. Even in the cases in which a mother has a higher income, fathers who might want to go on leave would have to face the generally negative judgment of their employers. The Nordic examples show that fathers only begin going on parental leave in large numbers when there is a father’s quota (and the leave is insurance-based), because then fathers can defend their decision vis-à-vis their employer on the grounds that they cannot afford to lose the caring benefit (e.g. Haataja 2009). Consequently, mothers now face even greater pressure to stay at home for at least three years than they did.

\(^1\) For example, in 2006, only 0.8 per cent of those on parental leave were men (Maříková 2008: 75), it remained about the same in 2011, see ČSÚ (2012)
under communist rule. In addition, since the country now has a market economy, it is more difficult for mothers to return to the same jobs they had before, as private enterprises need to quickly find replacements and do not want to suddenly let go of people who worked there for 3–4 years (again, for a discussion see Saxonberg 2014; Hašková, Saxonberg and Mudrák 2012). As a result, the employment penalty for having children is greatest in the Czech Republic among all EU countries (see Table I.1). In other words, the employment level of women having children under 6 decreases the most in the Czech Republic. Women’s share in total employment has also decreased by about 5% since the fall of communism, as many women who go on maternity leave have trouble finding a job afterwards.

Table I.1 Employment Impact of Parenthood and Part-time Work (2007)

<table>
<thead>
<tr>
<th></th>
<th>% working under 30 hours/week</th>
<th>Employment impact of parenthood (PP)</th>
<th>Women’s employment share %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Czech Republic</td>
<td>1</td>
<td>4</td>
<td>4.5</td>
</tr>
<tr>
<td>Hungary</td>
<td>1</td>
<td>3</td>
<td>4.3</td>
</tr>
<tr>
<td>Poland</td>
<td>3</td>
<td>3</td>
<td>11.2</td>
</tr>
<tr>
<td>Slovakia</td>
<td>2</td>
<td>1</td>
<td>5.9</td>
</tr>
<tr>
<td>Germany</td>
<td>6</td>
<td>39</td>
<td>7.1</td>
</tr>
<tr>
<td>Sweden</td>
<td>7</td>
<td>16</td>
<td>—</td>
</tr>
<tr>
<td>UK</td>
<td>8</td>
<td>34</td>
<td>4.4</td>
</tr>
</tbody>
</table>

Note: employment impact of parenthood = absolute difference in employment rates between men and women (age group 20–50) without children and with children aged 0–6

Sources: For part-time employment, see OECD (2011) and EC (2009: 30-1). Women’s employment rate calculated from figures from national statistical offices found via ILO’s homepage. Following sources also used for calculating employment in Hungary and Poland:

http://portal.ksh.hu/pls/ksh/docs/eng/xtabla/munkero/tablemp094_03.html

Interestingly, kindergartens have remained popular. One reason is that they have been part of the Czech nationalist project since the mid-1800s. The original kindergartens in the Austrian Empire taught in German, charged fees and were only open 4–5 hours per day; thus, they catered mainly to the middle class (Mišurcová 1980). However, “Volkskindergärten” also emerged, which taught in the local language and had long opening hours, so that poor mothers could work (Fellner, 1884). Czech nationalists established an association, Matice česká, which promoted and financed Czech Volkskindergärten, so that their children would learn Czech (Mišurcová 1980). Since the Volkskindergärten in the Czech lands taught in Czech, they became much more popular and widespread than the traditional, German speaking kindergartens.

This connection of Volkskindergärten with nationalism also helps to explain the fact that, while post-communist governments with conservative views on gender roles let most nurseries close, they have kept most of the kindergartens
open. Kindergartens still have a positive connotation even among conservatives. Thus, a governmental survey in 2000 found that 70% of parents agreed that Czech “kindergartens provide good care to all children of pre-school age” (MŠMT 2000: 105). Because of their popularity, the closing of kindergartens would have met much more opposition than the closing of nurseries. Yet, as already noted, some kindergartens did in fact close down in the 1990s, but that did not meet much opposition because birthrates also decreases, so the percentage of children attending kindergartens remained stable. However, now that the birthrate has increased, shortages in kindergartens are now arising.

In summary, both during communist rule and today, Czech family policies have differed from the mainstream Western typologies. During communist rule, the daycare system was in some ways similar to the Nordic, social-democratic model, in that most children above three attended daycare and – at least relative to its time – a rather large number of children under three also attended daycare. Of course, by today’s standards the 20% of the children under three who attended daycare in 1988 are not all that high and is lower than the Barcelona targets, in the 1980s it was a comparatively high number. Thus, even though Denmark is the only Scandinavian country to divide daycare into nurseries for children under three and kindergartens for children above three, the Czechoslovak system shared its “defamilializing” (Esping-Andersen 1999; Lister 1994; Hantrais 2004) or “degenderizing” (Saxonberg 2013) tendencies in the area of daycare. At the same time, the parental leave system more closely resembled the conservative, continental European model that was “explicitly familializing” (Leitner 2003) or “explicitly genderizing” (Saxonberg 2013) in that it had a maternity leave followed by a flat-rate leave. Not only was the benefit level of the leave too low to encourage fathers to share in the leave time, the benefit was not even available to fathers; hence its name “additional maternity leave.” The parental leave system basically remained conservative or explicitly genderizing since the collapse of the communist system. Even though the additional leave period has now been opened to men, the benefit level is too low to give men much incentive to share in the leave time. However, now that most of the nurseries have closed and access to daycare is difficult for children under three, the system has become more of a “pure” conservative, explicitly genderizing system in the sense that both the parental leave system and the daycare system encourage mothers to leave the labor market for long periods, without giving fathers incentives to share in the leave time.

Nevertheless, conditions still differ greatly from traditional conservative countries in that: 1) most women still work full-time both before and after their parental leave period, and very few leave the labor market completely to become housewives, nor do they work part-time. 2) In contrast to many continental European conservative welfare states, kindergartens are open full-time, rather than part-time (although they operate mainly as schools, so they still close around

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3 Bussemaker and van Kersbergen (1999) note that it is typical for conservative, continental welfare states to have a maternity leave followed by a flat-rate leave.
4, which is earlier than many mothers finish their jobs and they are closed during the summer).

In the area of care for the elderly, policies have also been a bit mixed. Just as the original family policies had a degenderizing element in that the communist regime invested heavily in daycare to make it easier for mothers of young children to work, so did the regime invest in retirement homes, so that daughters would not have to care for their elderly parents or parents-in-law. By the middle of the 1960s, social scientists began criticizing the lack of places in retirement homes and the “excessively collectivist nature” of care (Maříková and Plasová 2012). Gradually, the critique increased and began focusing on the lack of caring personnel, dehumanised care and high mortality of seniors in these facilities (cf. Wolfová 1987: 268). They also began advocating for the rights of elderly people to be able to stay in their home environment for as long as possible (Schimmerlingová and Novotná 1992: 14). Yet, although demands for allowing the elderly to stay at home for as long as possible also arose in the social-democratic Nordic countries, there feminists were able to push for using publicly employed home helpers that come to the homes of the elderly, so that they can live there as long as possible, while in Czechoslovakia, where an independent feminist movement could not develop because the communist dictatorship suppressed civil society, the emphasis was more on returning responsibility to the family. A survey of seniors above 70 years old, living in urban areas, undertaken in the beginning of the 1970s showed that 70% of those with a limited ability to care for themselves received such care within the family – mostly from their wives, daughters or other (mainly female) relatives (Kaufman and Schimmerlingová 1971: 67). Thus, public care was inadequate for the majority of the elderly.

Already by 1964 the regime had passed a law that re-introduced the Bismarckian principle of “limited” subsidiarity. According to the decree, institutionalized homecare services were to be provided to the elderly only when family members could not ensure such care. Moreover, the decree introduced an aspect of professionalization in field care as it allowed professional carers to provide the field care. Home care for the elderly, whether voluntary or professional, was again performed by women (Maříková and Plasová 2012). In 1988, the communist regime introduced another reform that encouraged family members (i.e. daughters/daughters-in-law) to provide the long-term care for the sick or elderly older than 85 (Ministry Ordinance No. 152/1988 to the law No. 100/1988; printed in http://aplikace.mvcr.cz/archiv2008/sbirka/1988/sb33-88.pdf). Thus, despite the initial defamilializing/degenderizing reforms that place emphasis on public care, the communist regime began to go in a more conservative direction, one in which daughters were seen as the main carers for the elderly.

After the fall of communism, conditions for the elderly worsened in some important respects. For example, pensions did not increase as fast as the inflation rate (Saxonberg and Sirovátka 2009). Given the relatively low pensions, the elderly have little money to pay for private home-help, which makes them rely on help from their family (mostly their daughters or daughters-in-law). Although elderly care has, to a large extent, been based on conservative-Bismarckian principles in which daughters are expected to take care of their elderly parents/parents-in-law,
recent reforms have gone in a more liberal direction. The new Social Services Act from 2007 changed the system for financing social services. The state no longer directly pays care allowances to the person providing care but rather to the person receiving care. The elderly care receivers can then decide which type of care they will purchase. The official goal of the reform is to strengthen the autonomy of seniors in terms of deciding which kinds of care they choose. However, the possibility of choosing certain types of care is limited by the shortage of professional services and low benefit levels, which make it difficult to hire private help (Maříková and Plasová 2012).

An alternative form of care is provided by retirement homes. However, it has become more difficult to get places in retirement homes and the fees for living there have increased (Maříková and Plasová 2012). Although the total number of places in residential care services has constantly increased (MPSV 2007: 30), the coverage of people over 80 years old has been slowly decreasing since 1989 (ČSÚ 2008). One reason for this is that the percentage of the population over 80 years old as a portion of the total population above 65 years has increased from 23.8% in 1989 to almost 30% in 2007 (ČSÚ 2007). Because of the lack of available institutionalized housing, the number of applications rejected for retirement homes has grown dramatically and the elderly often have to wait several years for a place (Holmerová 2004). This lack of places in retirement homes and lack of public support for homehelpers increases pressures on daughters to give up their careers in order to take care of their parents or parent-in-laws.

Against this background, this book presents a selection of local FLOWS results related to the city of Brno, centering around the decision making of women with care responsibilities, living in the policy context of Brno and the Czech Republic, about their care arrangements for pre-school children and dependent elderly family members as well as their labour market participation. In this regard, our micro-level study deals with the following questions: How important is the leeway of local policy makers in the design of child and elderly care policies and the provision of related services? Do local policy makers make use of their opportunities to support women’s labour market participation, or, on a more general level, gender equality? How does the gendered dual earner model (described above) work in the everyday life of women living in Brno? How do women with care responsibilities, living in Brno, perceive their possibilities for reconciling care work with participating in the labour market? How do they interpret and evaluate the current (local) policy context? What role do care norms play in the women’s decision making about work and care? What kind of reconciling strategies allow women a successful and satisfying combination of care work and labour market participation?

In this respect, the major goals of the book are as follows:
- to present an overview of the current situation of women’s labour market participation in the city of Brno;
- to present the policy context that influences the labour market and caring decisions of women (and men) in Brno; the caring decisions include both childcare and elder care;
• to illustrate the decision making processes of women with care responsibilities, with lower and higher educational attainment (based on the focus group data) and to examine the interaction and complexity of the factors conditioning women’s decisions to participate in the labour market;
• to contextualize the insights from our focus group interviews based on statistical data from a representative survey conducted among women living in Brno;
• to present policy recommendations stemming from the results of the focus groups and the survey.

In relation to these goals, the book consists of 8 chapters which are divided into three parts. The first part of the book provides basic information on the participation of women in the labour market, with a special focus on the situation in Brno. Thus, Chapter 1 focuses on the pattern of women’s labour market participation in Brno, providing data on the extent to which women in Brno are active in the labour market, as well as on how this participation differs for different groups of women (according to educational attainment, age and care responsibilities for preschool children). For this purpose, our main data source is census data from the years 1991, 2001 and 2011. However, as not all relevant data are available from the census, we also use regional and national data in order to complete the picture. Subsequently, the second chapter provides information on the structural context of the patterns identified before. Departing from the economic structure of the local labour market and its development as well as from the educational structure of the labour force in Brno, the main emphasis in this chapter is put on describing the horizontal and vertical segregation of the labour market in Brno and the related gender pay gap. Again, our main source of information is census data, completed by data from the labour force survey and other local sources.

The second part of the book turns to the institutional and policy contexts of women’s labour market participation in Brno. In this respect, it puts specific emphasis on the situation of women with caring responsibilities, both for pre-school children and for dependent elderly. The main focus of Chapters 3 and 4 is therefore the national and local policies relevant for both areas as well as the current coverage and welfare mix of childcare and elder care services in Brno. Based on the analysis of local policy documents and expert interviews with local policy makers, the chapters evaluate both policy areas from the point of view of supporting women’s labour market participation.

Though both chapters work as independent evaluations of the respective policy areas in Brno, at the same time, they provide an important context for part III of the book, which focuses on women’s actual decision making about their care arrangements and their labour market participation. In this regard, Chapter 5 presents the key results of the two focus group discussions (one with women with higher educational attainment and one with women with lower educational attainment), which were organized in March 2013 with employed women with pre-school children living in Brno. The related analysis focuses on
how the respondents perceive their employment as meaningful and how they manage to reconcile their gainful employment with their care responsibilities. It also discusses the respondents’ decision making on both their labour market integration as well as their care arrangements. Following a similar structure, Chapter 6 presents the analysis of the two focus groups with women with care responsibilities for dependent elderly family members. Chapter 7 goes on to analyze the survey data in order to ascertain whether the focus group results are at all representative of the population at large in Brno. Finally, Chapter 8 provides the book’s overall conclusions as well as policy recommendations based on our study.

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CHAPTER 1
Patterns of Women’s Labour Market Participation in Brno

The aim of this first chapter is to provide an overview of currently available data on women’s labour market participation in Brno. For this purpose, our main data source is census data from the years 1991, 2001 and 2011. As not all relevant data is available from the census, however, we also use regional and national data in order to complete the picture.

1.1 Historical Background and the Development of Women’s Labour Market Participation in the Czech Republic and in Brno between 1991 and 2001

Historically, the Czech Republic (and former Czechoslovakia) has been characterized by a high integration of women into the labour market. Under communist rule, women were expected to work full-time both before and after having children, which created a system that contrasted sharply with the male-breadwinner/female housewife model, or the male breadwinner/part-time female worker model that dominated many European countries (Pfau-Effinger 2004). For example, according to census data from the year 1980, on the national level 79.93% and similarly in Brno 79.23% (FSÚ 1985, 1981) of women were employed.

However, in contrast to the dual-earner/dual-carer model that has become an ideal in Nordic countries, women in most communist-ruled countries were expected to do all the caring (and household chores), while fathers were not even allowed to go on parental leave (e.g. Saxonberg, Hašková, Mudrák 2012). In this regard, the communist regime in Czechoslovakia gradually launched policy measures to encourage mothers to stay at home to care for their children. Especially from the 1970s on, the communist regime launched pro-natality measures, including a universal child benefit and a prolonged maternity leave up to the child’s age of 2 (which was later further extended to the age of 3), among others (Čermáková et al. 2000; Saxonberg 2014). This produced a pattern according to which it was a matter of course and a financial necessity for women (due to income policies) to be in full-time gainful employment, from which they retreated for up to three years, however, when they had a child. Though under communist-rule it was no problem to return to the labour market after parental leave, as pointed out for example by Čermáková (1997), the related double burden importantly limited women’s potential for professional careers. Departing mainly from census data, in the following we will discuss how this pattern changed and/or remained.

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1 The census data do not provide data on unemployment/employment, as officially in the socialist state there was no unemployment and hence all economically active where employed.
stable – both in Brno and the Czech Republic – after the fall of the communist regime in Czechoslovakia in 1989 and the separation of Czechoslovakia into two independent states – the Czech Republic and the Slovak Republic.

According to the 1991 Census, that is, in the early phase of the political changes after the fall of the communist regime, the labour force participation of women in Brno was around 74% (of women aged 15–64) and women formed about 49% of the labour force (Krajská statistická správa 1992). In the course of the 1990s, this high level of women's labour market participation in Brno decreased. Between the Census in 1991 and the Census in 2001, it fell by 7 percentage points, reaching an employment rate level of 60.7% and an unemployment rate of 6.4% (of the population aged 15–64) and 9.6% of the economically active. This decrease in labour market participation was far greater for women than for men and hence the share of women in the labour force decreased to 47% (Krajská statistická správa 1992; ČSÚ 2003). However, there was no mass withdrawal of women from the labour market into the household, a topic widely discussed in the course of the 1990s. The reason for this is twofold: On the one hand, the high level of women's labour market integration was related to a certain economic necessity. Especially under state-socialism, but also in the course of the 1990s, women's income constituted an important contribution to provide for the family's living. On the other hand, women saw their labour market integration as an important part of their life. For example, according to public opinion surveys carried out in the 1990s, the majority of women would not have wanted to leave the labour market even if the economic situation of the family would have allowed them to do so. Similarly, the full-time norm of women's labour market participation continued after the political changes, as well. Nevertheless, despite the fact that full-time work was clearly prevalent among women, opinion surveys also showed that they were not fully satisfied with this situation: if the (economic) situation would allow it, 43% of women would have preferred to work less than full time, especially in order to achieve a better balance between their work and caring duties (Křížková 2003: 19; Čermáková et al. 2000).

Thus the norm of women's full-time labour market participation remained rather stable after the end of the state-socialist regime, as well. The related economic transformation process nevertheless brought central changes to the work life of both women and men. While under state socialism the norm was to have one job for one's entire life, which was more or less guaranteed and not much oriented towards performance. The transformation in the course of the 1990s brought new risks and pressures, however, unemployment being central among them (cf. for example Dudová, Vohlídalaová 2008; Čermáková et al. 2000). Yet the early restructuring of the economy did not immediately produce higher unemployment. Some former employees moved outside of the labour market (e.g. became housewives or retired) and many also became private entrepreneurs (self-employment was also a new phenomenon after the years of state-socialist rule). When economic problems began to arise in the middle of the 1990s, however, unemployment became an important issue (Interview with labour market experts from the Brno labour office). According to data provided by the Ministry of Labour and Social Affairs (MOLSA), the registered unemployment
rate of women in Brno almost tripled between the years 1997 and 2001 (rising from 3.5% to 9.1%). Still, the gender gap in unemployment remained more or less stable, fluctuating around 2 percentage points. Hence during the 1990s unemployment became an especially important risk, both for women and men.

Departing from this historical background, we will now take a closer look at current labour market participation and non-participation of women in Brno. To start with, we will provide a general overview of the main trends during the last 10 years, based on data from the census in 2001 and 2011.

1.2 Women’s Labour Market Participation in Brno in 2001 and 2011

As the census data for Brno show, women’s labour market participation increased by 2.7 percentage points (PP) in the 10 year period between 2001 and 2011. This is a positive development, especially as it predominantly results from an increase in the employment rate (+2.2 PP) and only a slight increase in the unemployment rate. Furthermore, this increase in the women’s labour force was caused by women who were outside the labour market for other reasons than full-time education. Compared to the situation of men, the increase of women’s employment rate in Brno has been slightly stronger and hence has resulted in a decrease of the gender gap in employment, on a higher overall level of employment for both, men and women. The gender gap in unemployment remained at a slightly higher level of overall unemployment (as percentage of the economically active).

The evaluation of this trend as a certain improvement for the situation of women on the labour market in Brno is further underscored by a comparison to the national trend. Here, the increase in women’s labour market participation is not only lower, but also stems from more or less equal increases in employment and unemployment. Moreover, though the gender gap in employment also decreased on the national level, this decrease was also related to a slight decrease in the employment of men and hence of the overall level of employment. That is, compared to the national average, for women in Brno, entering the labour market resulted more often in employment.

<table>
<thead>
<tr>
<th>Table 1.1 Economic Activity in General</th>
</tr>
</thead>
<tbody>
<tr>
<td>CZECH REPUBLIC</td>
</tr>
<tr>
<td>overall</td>
</tr>
<tr>
<td>Employed</td>
</tr>
<tr>
<td>Including on maternity leave (% of the employed)</td>
</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
</tr>
<tr>
<td>Not on the labour market</td>
</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
</tr>
</tbody>
</table>
Table 1.1 Economic Activity in General – Continuation

<table>
<thead>
<tr>
<th>BRNO overall</th>
<th>MEN 2001</th>
<th>MEN 2011</th>
<th>WOMEN 2001</th>
<th>WOMEN 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed</td>
<td>72.4</td>
<td>73.4</td>
<td>60.7</td>
<td>62.9</td>
</tr>
<tr>
<td>Including on maternity leave (% of the employed)</td>
<td>0</td>
<td>0</td>
<td>3.2</td>
<td>4.5</td>
</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>9.0 / 7.2</td>
<td>9.4 / 7.7</td>
<td>9.6 / 6.4</td>
<td>9.9 / 6.9</td>
</tr>
<tr>
<td>Not on the labour market</td>
<td>8.7</td>
<td>7.9</td>
<td>22.0</td>
<td>19.3</td>
</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
<td>11.7</td>
<td>11.0</td>
<td>10.9</td>
<td>10.9</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2003, Census 2011

The data from the census in 2001 and 2011 only provide data for two specific points in time, thus making it impossible to evaluate the development between them. In this regard, only limited data are available for the local level of the city of Brno. In fact, the census data are the only source for exact data on employment. For unemployment, however, the MOLSA also provides local data and the following table gives an overview of the development of the registered unemployment rate for men and women between 2001 and 2011:

Table 1.2 The Development of Unemployment in the City of Brno 2001–2011 (Registered Unemployment Rate, Annual Average)

<table>
<thead>
<tr>
<th>Brno</th>
<th>Total</th>
<th>Women</th>
<th>Men</th>
<th>Gender gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>8.2</td>
<td>9.1</td>
<td>7.4</td>
<td>−1.7</td>
</tr>
<tr>
<td>2002</td>
<td>9.4</td>
<td>10.1</td>
<td>8.8</td>
<td>−1.3</td>
</tr>
<tr>
<td>2003</td>
<td>10.6</td>
<td>11.5</td>
<td>9.5</td>
<td>−2.0</td>
</tr>
<tr>
<td>2004</td>
<td>9.8</td>
<td>11.3</td>
<td>8.7</td>
<td>−2.6</td>
</tr>
<tr>
<td>2005</td>
<td>9.5</td>
<td>10.8</td>
<td>8.5</td>
<td>−2.3</td>
</tr>
<tr>
<td>2006</td>
<td>8.5</td>
<td>10.0</td>
<td>7.3</td>
<td>−2.7</td>
</tr>
<tr>
<td>2007</td>
<td>6.9</td>
<td>8.2</td>
<td>5.6</td>
<td>−2.6</td>
</tr>
<tr>
<td>2008</td>
<td>5.5</td>
<td>6.9</td>
<td>4.4</td>
<td>−2.5</td>
</tr>
<tr>
<td>2009</td>
<td>7.3</td>
<td>8.5</td>
<td>6.1</td>
<td>−2.4</td>
</tr>
<tr>
<td>2010</td>
<td>8.5</td>
<td>9.4</td>
<td>7.7</td>
<td>−1.7</td>
</tr>
<tr>
<td>2011</td>
<td>8.2</td>
<td>9.2</td>
<td>7.4</td>
<td>−1.8</td>
</tr>
</tbody>
</table>

Source: Ministry of Labour and Social Affairs (ordered data)

The above table shows a downward trend for the average unemployment rate beginning in 2004. This, on the one hand, is due to changes in the Ministry’s of Labour and Social affairs method for calculating the unemployment rate, and, on the other hand, the result of an important influx of foreign capital to Brno (Interview with labour market experts from the Brno labour office). It is important to note that this decrease in overall unemployment is first and foremost a result of a decrease in the male unemployment rate (as is also shown by the widening of the gender gap to around 2.5 percentage points between 2004 and 2005). This trend ended
in 2008–2010 when the global financial crises fully hit the labour market in Brno. The electronics industry was affected first and foremost, as was manufacturing, which had negative consequences primarily for men. The textile industry, which was traditionally feminized, had previously lost much of its importance. During the initial year of the financial crisis, 33 employers realized collective dismissals and, all in all, in the city of Brno about 2,000 people lost their jobs. In 2009 another 2,000–3,000 employees were laid off by firms and organizations for “crisis” reasons. Although fewer corporations were affected by the crisis in 2010, sixteen of them made collective dismissals and about 1,000 employees were laid off, again mostly in the sectors of engineering, manufacturing of electronics, construction and transportation, which are traditionally male dominated (Marek 2011). However, the secondary impacts of the crisis more strongly affect the service sector and hence are more felt by the women concentrated in this sector (ÚP Brno-město 2010; estimations from the labour office; Interview with labour market experts from the Brno labour office).

As the MOLSA unemployment data (Table 1.2) show, the various impacts of the economic crisis on women and men lead to a decrease of the gender gap in registered unemployment. This downward trend is related to a stronger increase in male unemployment, however, and hence is also related to a higher level of overall unemployment. Nevertheless, after the rather strong increase in unemployment in the years 2008–2010, the year 2011 brought a turn around, with only a slight decrease in unemployment. From this point of view, the results of the 2011 census (collected in March) are probably already part of this turn.

Another question related to women’s labour market participation which is not possible to answer from the available census data, is the question of whether and to what extent women are in the labour market on full-time or part-time basis. Therefore, we use national and regional data from the labour force survey as well as a local survey conducted by the Brno labour office in order to provide at least a rough picture of this issue.

As mentioned before, traditionally (including under communist rule) women have worked full-time. Even today, part-time employment is not widespread in the Czech Republic. As current data from the labour force survey show, on national average only 5% of men and women aged 15–64 work part-time. Though the number for women is slightly higher (9%), it is far below the average of other European countries (Labour force survey 2010, ordered data). The reason for this is a mixture of a tradition of full time employment and economic necessity, and a very limited offer of such positions (Křížková 2003; Dudová, Vohlídalová 2008).

Regarding the situation in Brno, according to estimates of the labour market experts interviewed at the labour office, the demand for part-time jobs is much higher than the supply. This is backed-up by the public opinion surveys referred to earlier and indicates that the trend from the 1990s also continues in the new millennium. Further estimates can be made based on a local survey annually conducted by the Brno labour office, covering approximately 50% of the people employed in Brno. This survey contains a certain bias towards large companies, however (small companies with up to 20 employees are underrepresented in the sample). According to the results of this survey, in 2010 about 12% of surveyed
employees worked on a part-time basis and about 70% of these positions were occupied by women\(^2\). All in all, 18% of employed women included in the survey worked on a part time basis. The survey data also allows the analysis of the types of companies in which these part-time positions are located. The most important sectors providing part-time positions in Brno (over 20% of the total positions) are “Research and Development” (51% women), “Education” (57% women), “Real estate, renting and business activities” (90% women), “Transport and Storage” (95% women), “Recreational, cultural and sporting activities” (73% women) and finally “Manufacture of pulp, paper and paper products; publishing and printing” (60% women). As the percentages indicated in brackets show, these part-time positions are “feminized” to different extents (Database PZJMK 2010).

The higher percentage of part-time positions for women compared to the national average can also be related to the fact that sectors which seem to provide an above average number of part-time positions in the Czech Republic in general (e.g. research and development as well as education – cf. for example Dudová, Vohlídalová 2008) are especially important in the economic structure of the city of Brno (Brno is an important educational centre and hosts 6 public universities) – cf. also Chapter 2.

The central question regarding these part-time arrangements concerns their quality, that is, if they meet the needs of women/men e.g. with respect to reconciling work and family life or if they are rather the result of what the literature (cf. for example Dudová, Vohlídalová 2008) refers to as “negative work flexibility” (which

\(^2\) As outlined by the interviewed experts, part-time positions are often also designed especially for disabled employees, subsidized by the Czech government.

### Table 1.3 Development of Full-time and Part-time Employment at NUTS 3 and National Level

<table>
<thead>
<tr>
<th>Region</th>
<th>Time period</th>
<th>Full time employment (% from the total employment)</th>
<th>Part time employment (% from the total employment)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>Women</td>
</tr>
<tr>
<td>NUTS 3</td>
<td>2005</td>
<td>95.3</td>
<td>91.4</td>
</tr>
<tr>
<td></td>
<td>2006</td>
<td>95.4</td>
<td>91.4</td>
</tr>
<tr>
<td></td>
<td>2007</td>
<td>95.4</td>
<td>91.5</td>
</tr>
<tr>
<td></td>
<td>2008</td>
<td>95.4</td>
<td>91.3</td>
</tr>
<tr>
<td></td>
<td>2009</td>
<td>94.6</td>
<td>90.0</td>
</tr>
<tr>
<td></td>
<td>2010</td>
<td>95.2</td>
<td>91.4</td>
</tr>
<tr>
<td>NATIONAL</td>
<td>2005</td>
<td>95.6</td>
<td>92.0</td>
</tr>
<tr>
<td></td>
<td>2006</td>
<td>95.6</td>
<td>91.9</td>
</tr>
<tr>
<td></td>
<td>2007</td>
<td>95.6</td>
<td>92.1</td>
</tr>
<tr>
<td></td>
<td>2008</td>
<td>95.7</td>
<td>92.2</td>
</tr>
<tr>
<td></td>
<td>2009</td>
<td>95.2</td>
<td>91.5</td>
</tr>
<tr>
<td></td>
<td>2010</td>
<td>94.9</td>
<td>90.9</td>
</tr>
</tbody>
</table>

Source: Ministry of Labour and Social Affairs (ordered data)
is often imposed on employees and mainly related to the company’s demand for a flexible work force; in contrast to “positive work flexibility”, which supports reconciling work and family life). According to Dudová and Vohlídalová (2008), in the Czech Republic, as in other post-socialist countries, negative working flexibility arrangements prevail. These primarily occur in relation with working positions characterized by a low level of the employee’s autonomy, a low income and low educational requirements. At the same time, however, according to the authors, part-time positions (as a specific form of flexible work arrangements) in the Czech Republic are often concentrated in sectors which demand highly qualified work (however, without large capital investments) as, for example, in science, education, culture and public administration. The pattern described above for the local level of Brno points to a combination of these two trends, with a certain tendency to disadvantage women. While “Research and Development” and “Education” offer the highest percentage of part-time positions in general, in these sectors the positions are rather evenly distributed between women and men. In sectors potentially demanding less qualified work (and probably tending to negative working flexibility) part-time positions tend to be feminized.

Fixed term contracts in the Czech Republic are less widespread than in the EU. Only about 8% of the employed had this type of contract in 2008 (on EU-average 14%). Employers, however, use this type more often for women (9.8% in 2008) than men (6.5% in 2008). This is in accordance with the opinion of the interviewed experts from the labour office Brno, who mentioned that fixed term contracts are typical for feminized sectors, such as elementary and secondary school teachers, where fixed term contracts have also been used to save labour costs during holiday months (Interview with labour market experts from the Brno labour office).

By contrast, self-employment is a domain of men. In 2008, 22.6% of men, but only 11.9% of women, were self-employed in the Czech Republic (European Commission 2009). Self-employment in the Czech Republic has been “resilient” to the economic crisis and recently there has been no increase in self-employment. Compared to employees, the Czech self-employed work longer, but earn less money (European Commission 2010).

Finally, another important point for evaluating women’s participation on the labour market in general, are the different reasons for their non-participation – that is, what keeps women out of the labour market?

With regard to this question, the table presented above (1.1 Economic activity in general) indicates that the census does not offer detailed information on this question. With the exception of full-time education, the other categories which group together the different reasons for why people of working age remain outside the labour market, are defined very broadly as “others with their own source of income”, and “persons in the household, children of pre-school age, and other dependent persons”. While the former category puts together such different groups as parents on parental leave drawing parental allowance, persons on welfare and those with other sources of income (such as rental income), the latter refers to all adult persons who are dependent on another household member. Hence these data allow only very limited conclusions on the reasons why people remain outside of the labour market.
A more detailed picture is provided by the Labour force survey, which also asks for the main reason for economic inactivity. However, these data are again not available at the city level. Nevertheless, data for the Czech Republic and the South Moravian region (for the year 2009) show a very homogeneous picture, which suggests a similar importance of the various reasons for the city of Brno. For women, the most important reason is that they receive either an old age or an invalidity pension (roughly one third of the women outside the LM). This is followed by being in the educational system (also roughly one third). Finally, the third reason (for roughly a quarter of those women who are outside the LM) is care for the family and the household (approx. half of them in the framework of the parental leave scheme). While this pattern is characteristic for women at both the national and the regional level, it clearly differs from the pattern of men. For the latter (again both nationally and regionally) participation in the educational system represents the most important reason for remaining out of the labour market (it applies to more than half of the men outside the labour market); followed by those who receive either an old age or invalidity pension (which is roughly one third). Health reasons are in the third place for men, with a share of less than five percent. Relating these data to local census data suggests a similar level of involvement in the educational system for men and women. Hence, the gender gap in economic inactivity is mainly a result of women's caring duties.

While the above analysis provides a general overview of the current pattern of women's economic activity and inactivity in Brno compared to men and the national level, in the following, we now turn to a more detailed analysis of the described pattern in relation to educational attainment, age and caring duties.

### 1.3 The Labour Market Participation of Women in Brno by Educational Attainment, Age and Presence of a Preschool Child

In the following tables, the data from the census 2011 show how educational attainment influences the integration of women in the labour market.

**Table 1.4** Economic Activity by Educational Attainment in 2011

<table>
<thead>
<tr>
<th>CZECH REPUBLIC</th>
<th>MEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Attainment</td>
<td>Pre-primary and primary</td>
</tr>
<tr>
<td>Employed</td>
<td>24.5</td>
</tr>
<tr>
<td>Including on maternity leave (% of the employed)</td>
<td>0</td>
</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>29.7 / 10.4</td>
</tr>
<tr>
<td>Not on the labour market</td>
<td>29.2</td>
</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
<td>35.9</td>
</tr>
</tbody>
</table>
Table 1.4 Economic Activity by Educational Attainment in 2011 – Continuation

| Educational Attainment | WOMEN | | | | |
|-------------------------|-------|-------|-------|-------|
|                         | Pre-primary and primary | Secondary without GCSE | Secondary with GCSE | Post-Secondary | Tertiary |
| Employed                | 16.2  | 48.5  | 58.9  | 62.0  | 72.1    |
| Including on maternity leave (% of the employed) | 3.7 | 3.9 | 4.7 | 3.5 | 5.7 |
| Unemployed (% of the economic active / % of the population 15–64) | 25.9 / 5.7 | 13.3 / 7.7 | 8.0 / 5.1 | 5.7 / 3.7 | 4.1 / 3.1 |
| Not on the labour market | 58.3  | 43.3  | 28.0  | 33.0  | 20.3    |
| In full-time education (not on the labour market) | 19.8  | 0.8   | 7.9   | 1.3   | 4.6     |

| BRNO | | MEN | | | |
|-------|-------|-------|-------|-------|
| Educational Attainment | Pre-primary and primary | Secondary without GCSE | Secondary with GCSE | Post-Secondary | Tertiary |
| Employed                | 25.9  | 61.9  | 64.9  | 58.8  | 76.4    |
| Including on maternity leave (% of the employed) | 0 | 0 | 0 | 0 | 0 |
| Unemployed (% of the economic active / % of the population 15–64) | 31.8 / 12.1 | 12.1 / 8.5 | 8.3 / 5.9 | 6.7 / 4.2 | 3.6 / 2.9 |
| Not on the labour market | 20.3  | 28.6  | 18.5  | 35.3  | 17.4    |
| In full-time education (not on the labour market) | 41.6  | 0.9   | 10.7  | 2.0   | 3.4     |

| WOMEN | | | | | |
|-------|-------|-------|-------|-------|
| Educational Attainment | Pre-primary and primary | Secondary without GCSE | Secondary with GCSE | Post-Secondary | Tertiary |
| Employed                | 17.5  | 43.6  | 53.7  | 56.0  | 69.5    |
| Including on maternity leave (% of the employed) | 4.5 | 3.6 | 4.1 | 3.1 | 5.3 |
| Unemployed (% of the economic active / % of the population 15–64) | 25.3 / 5.9 | 14.5 / 7.4 | 8.9 / 5.3 | 5.7 / 3.4 | 4.6 / 3.4 |
| Not on the labour market | 52.8  | 48.4  | 31.8  | 39.4  | 22.3    |
| In full-time education (not on the labour market) | 23.8  | 0.6   | 9.3   | 1.2   | 4.8     |

Source: Census 2011

In Brno, women with tertiary education show both the highest share of employment and the lowest share of unemployment. By contrast, women in Brno with pre-primary/primary educational attainment as well as secondary without GCSE have the highest risk of unemployment. These two categories also show the lowest employment numbers for women in Brno. In the categories of secondary with GCSE and post-secondary, the employment rates of women in Brno are
below the national average. Nevertheless, for these two groups unemployment numbers are also lower than the national average.

In comparison to men in all categories of educational attainment, the employment rate is higher for men than for women, though to different extents. The most striking differences can be found in secondary education, both with and without GCSE. The smallest gender gaps in employment are, by contrast, related to post-secondary and tertiary educational attainment. What is striking in relation to the unemployment numbers is the fact, that with the exception of two categories; pre-primary/primary and post-secondary men have not only higher employment rates but also lower rates of unemployment. We will return to these gender differences in employment related to educational attainment in the second chapter, with the discussion of both the structure of educational attainment of the labour force in Brno, as well as the structure of the Brno labour market.

The comparison of the employment rates of the various categories of educational attainment in Brno to national numbers shows a very similar structure. What is striking however is the fact that the level of employment (for both men and women) is higher in all the categories of educational attainment, with the only exceptions being pre-primary and primary. While the level of unemployment is quite comparable, these differences mainly stem from a higher level of economic non-activity in Brno.

The census data on economic activity by age group (Table 1.5) indicate a very clear trend for women’s employment and labour market participation in Brno: women’s highest labour market participation is found in the age groups 40–54 and 25–39. In the latter category, however, there is also a rather high level of unemployment (10.1% of the economic active). The lowest level of employment and the highest level of unemployment are both related to the category 15–24. While the low level of employment in this age group is related to the high percentage of women who, at that age, are still in full-time education, the high unemployment rate points to the problem of youth unemployment (probably also related to the lower level of education attainment) i.e. those who enter the labour market at young age. The age group 55–64 shows a rather low employment rate and a low unemployment rate. Women in this age group leave the labour market rather than staying in unemployment. The overall age pattern of women’s economic activity in Brno is very similar to the pattern found on the national level, with the only exception being the group of women between 55–64. For them, the percentage of employment in Brno is 9 PP higher than on the national level and the employment rate lower.

The gender gap in employment and unemployment adds further information on the age pattern of women’s labour market integration. The greatest differences are found in the age groups 25–39 (14.4 PP) and 55–64 (18.4 PP). The differences in the latter group are related to differences in the retirement age of women and men. The average age of retired women was 59.6 years. For men, it was 61.4 years (ČSÚ 2012).
Table 1.5 Economic Activity by Age Groups in 2011

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<tr>
<th></th>
<th>CZECH REPUBLIC</th>
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<tbody>
<tr>
<td>Age group</td>
<td>15–24</td>
<td>25–39</td>
<td>40–54</td>
<td>55–64</td>
<td>Overall</td>
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<tr>
<td>Employed</td>
<td>33.8</td>
<td>88.0</td>
<td>87.1</td>
<td>57.7</td>
<td>72.2</td>
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<tr>
<td>Including on maternity leave (% of the employed)</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>22.5 / 9.8</td>
<td>8.1 / 7.7</td>
<td>7.8 / 7.4</td>
<td>9.5 / 6.0</td>
<td>9.6 / 7.7</td>
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<tr>
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<td>1.8</td>
<td>3.2</td>
<td>5.5</td>
<td>36.2</td>
<td>10.3</td>
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<tr>
<td>In full-time education (not on the labour market)</td>
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<td>9.8</td>
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<td>Age group</td>
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<td>25–39</td>
<td>40–54</td>
<td>55–64</td>
<td>overall</td>
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<tr>
<td>Employed</td>
<td>28.4</td>
<td>72.5</td>
<td>83.1</td>
<td>37.3</td>
<td>60.5</td>
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<td>10.1</td>
<td>0.2</td>
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<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>20.4 / 7.3</td>
<td>10.3 / 8.3</td>
<td>9.3 / 8.6</td>
<td>8.5 / 3.5</td>
<td>10.5 / 7.1</td>
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<tr>
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<td>18.1</td>
<td>8.3</td>
<td>59.2</td>
<td>22</td>
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<td>0</td>
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<td>10.4</td>
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<td>Age group</td>
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<td>25–39</td>
<td>40–54</td>
<td>55–64</td>
<td>Overall</td>
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<td>Employed</td>
<td>30.7</td>
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<td>87.3</td>
<td>64.7</td>
<td>73.4</td>
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<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>22.5 / 8.9</td>
<td>8.2 / 7.8</td>
<td>8.2 / 7.8</td>
<td>8.6 / 6.1</td>
<td>9.4 / 7.7</td>
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<td>4.9</td>
<td>29.3</td>
<td>7.9</td>
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<tr>
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<td>58.9</td>
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<tbody>
<tr>
<td>Age group</td>
<td>15–24</td>
<td>25–39</td>
<td>40–54</td>
<td>55–64</td>
<td>Overall</td>
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<tr>
<td>Employed</td>
<td>28.1</td>
<td>73.0</td>
<td>83.6</td>
<td>46.3</td>
<td>62.9</td>
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<tr>
<td>Including on maternity leave (% of the employed)</td>
<td>4.6</td>
<td>9.8</td>
<td>0.3</td>
<td>0</td>
<td>24.5</td>
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</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>19.2 / 6.7</td>
<td>10.1 / 8.2</td>
<td>8.8 / 8.1</td>
<td>6.9 / 3.4</td>
<td>9.9 / 6.9</td>
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</tr>
<tr>
<td>Not on the labour market</td>
<td>3.1</td>
<td>16.5</td>
<td>8.3</td>
<td>50.3</td>
<td>19.3</td>
<td></td>
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</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
<td>62.1</td>
<td>2.3</td>
<td>0</td>
<td>0</td>
<td>10.9</td>
<td></td>
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</tbody>
</table>

*Source: Census 2011*
In the former group, this is related to the employment impact of women’s childcare duties. While for men the labour market participation between 25–54 remains stable, the data on women show a difference of 10.6 PP in employment between the age groups of 25–39 and 40–54). That is, while women in the younger age group tend to withdraw from the labour market for child care (mostly up to 3 years), men have to take over the role of the main breadwinner (employment figures for men are highest in this age category compared to the other age categories) (cf. for example Křížková 2003; Čermáková et al. 2000). The higher age group shows, in contrast, significantly higher employment rates, lower unemployment rates and the lowest figures of non-employment. According to Čermáková et al. (2000), women of this age group have a second chance to launch their career. This possibility is related to gender norms, which, after the youngest child has entered elementary school (at the age of six) or at least kindergarten (at the age of three), support the full-time reintegration of women into the labour market. At the same time, however, in this situation women are expected to manage their partly conflicting roles related to paid employment, housework and childcare.

This pattern is clearly confirmed by the census data on the economic activity of women with young children, outlined in the following tables.

**Table 1.6 Economic Activity of Women with Young Children in 2011**

<table>
<thead>
<tr>
<th>CZECH REPUBLIC</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of the youngest child</td>
<td>0–2</td>
</tr>
<tr>
<td>Employed</td>
<td>41.1</td>
</tr>
<tr>
<td>Including on maternity leave (% of the employed)</td>
<td>65.6</td>
</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>5.5 / 2.4</td>
</tr>
<tr>
<td>Not on the labour market</td>
<td>55.7</td>
</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
<td>0.4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BRNO</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of the youngest child</td>
<td>0–2</td>
</tr>
<tr>
<td>Employed</td>
<td>40.9</td>
</tr>
<tr>
<td>Including on maternity leave (% of the employed)</td>
<td>65.7</td>
</tr>
<tr>
<td>Unemployed (% of the economic active / % of the population 15–64)</td>
<td>5.4 / 2.3</td>
</tr>
<tr>
<td>Not on the labour market</td>
<td>55.6</td>
</tr>
<tr>
<td>In full-time education (not on the labour market)</td>
<td>0.6</td>
</tr>
</tbody>
</table>

*Source: Census 2011*
While in the group of women with a child aged 0–2 only 40.9% are employed (out of which two thirds are currently on maternity leave) and more than half of the women with children in this age group are outside the labour market (e.g. in the framework of the parental leave scheme), the share of employed women importantly increases in the group of women with a child aged 3–5. Here, 68.5% are employed and 15.7% are outside the labour market. What is nevertheless striking in this category is the high level of unemployment: 18.3% of the economic active. That is an unemployment rate for mothers of a child aged 3–5 in Brno that is almost twice as high as the average unemployment rate for women in Brno, which indicates that a woman’s return to the labour market after maternity and parental leave is rather problematic.

This pattern is closely related to the normative pressures, exerted in the Czech context on mothers, to limit paid work and to personally care for their children (cf. for example Dudová, Vohlídalová 2008; Hašková, Uhde 2009, Křížková et al. 2011). Women are not considered to be good mothers unless they stay at home for at least three years with each child. This norm is closely related to the discourse of Czech paediatricians and psychologists against early institutional childcare, which dates back to the 1960s (cf. Saxonberg, Hašková, Mudrák 2012). This will be discussed in more detail in Chapters 3 and 5. Non-compliance with this norm is very likely to meet with incomprehension and is judged as failure to fulfil the role of a ‘good mother’. From the point of view of women’s labour market participation, this norm produces rather long absences for mothers, thus complicating their re-entry to the labour market (Čermákova 2000; Dudová, Vohlídalová 2008; Hašková, Uhde 2009; Křížková et al. 2011).

Hence, young women are often perceived as problematic by employers. In the case of motherhood, they are expected to leave employment for about three years. The employment impact of parenthood is also clearly evident when comparing employment rates of women (aged 20–49) with and without the presence of a child aged 0–6. With a difference of 40 percentage points between the respective employment rates, women in the Czech Republic show the highest differences in the context of a comparison of 30 European countries (Saxonberg 2014, 2011; Plantega, Remery 2009). In public opinion surveys (1995 and 2003, organized by the Academy of Science) both men and women see women’s care and family responsibilities as the main reason and hindrance of why women do not reach working positions comparable to men (Dudová, Vohlídalová 2008; Křížková 2003).

This strong impact of motherhood on women’s labour market participation is also evident in the Brno census data from 2011. While women with a child aged 0–2 have a significantly lower employment rate (40.9%) in comparison to women without a child aged 0–2 (64.5%), for women with a child aged 3–5 the employment rate is comparable. For women with children in this age group, the employment rate is even slightly higher (68.7%) than for women without children in this age group (62.5%) – this might also be influenced by the fact that this group also includes older women, who gradually withdraw from the labour market. The key difference among women with and without a child aged 3–5 is however their risk of unemployment. While according to the Brno census data
18.3% of economically active women with a child aged 3–5 are unemployed, only 9.4% of economically active women without a child aged 3–5 are unemployed (the average for all women is 9.9%). Hence, for a woman with a child aged 3–5 living in Brno, the risk of unemployment is twice as high as for a woman without a child in this age group. Though we do not have data segregated by educational attainment available, a look at the data on educational attainment strongly suggests that this risk is even higher for women with lower educational attainment, that is, pre-primary or primary as well as secondary without GCSE.

1.4 Conclusions

The aim of this chapter was to provide an overview of the basic patterns of women’s labour market participation in Brno. In the light of the political changes related to the end of the communist regime in 1989, this analysis is closely related to the question of whether and how the patterns of women’s labour market participation, which developed under communist rule, remained the same or changed. The overview and analysis of relevant data available for the local level (especially from the census in 1991, 2001 and 2011) suggests important continuities, when it comes to the basic norms and values related to women’s labour market participation and most importantly the ways of combining gainful employment with care responsibilities. Despite a certain decrease of women’s labour market participation during the 1990s, the norm of their full-time labour market participation remained rather stable. Similarly, the expectation of personal full-time care by the mother until the child reaches the age of three still plays an important role, as shown by the data on the labour market participation of women with children in this age group. However, what has fundamentally changed since 1989 is the economic and social context in which these patterns take place today and hence the consequences for women on the labour market: while under communist rule (with guaranteed employment) the norm of full-time labour market participation in combination with a strongly gendered division of care duties, requiring long absences in case of motherhood, predominantly meant a constraint on a women’s career, in the current economic context, it moreover significantly increases the risk of unemployment. As the discussion of the unemployment rates of women with children in different age groups showed, in Brno, the risk of unemployment doubles for women with children aged 3–5; that is, for those women who, after having a child, wish to return to the labour market.

From the perspective of the FLOWS project and its main goal of examining the potential support on the part of local welfare systems for women’s labour market participation, this group of women is of special interest: these women are willing to work, while at the same time, due to their caring responsibilities, they have problems in finding their way back into the labour market. In the course of the following chapters, we will therefore examine the situation of this group of women in more detail, from two different perspectives. In Chapter 3, we will
focus on how family and child care policies on the national and local level support and/or hinder women's return to the labour market after having a child. Finally, in Chapter 5, we will present the results of two focus group discussions with women with lower and higher educational attainment, with a child of preschool age (0–5). This allows going beyond the analysis of statistics and policy documents to explore how this group of women perceives and evaluates their own situation and what kind of strategies they develop in the given policy context in order to successfully manage their return to the labour market.

Apart from women with child care responsibilities, the following chapters will also focus on care responsibilities in relation to care for elderly dependents. Elder care responsibilities also potentially influence women's labour market participation. However, in contrast to the group of women caring for preschool children, this group of women is not that visibly and clearly definable from the point of view of statistical analysis. Hence, at this stage, we cannot present data on how caring responsibilities for elder dependent relatives impact women's labour market integration, in a way comparable to the data presented above on women with child care responsibilities for preschool children. Nevertheless, we will look at this phenomenon in a similar way. That is, in Chapter 4, we will present how policies related to elder care frame the situation and decision making of women with such care responsibilities and in Chapter 6, we will present the results of two focus group discussions with women with lower and higher educational attainment, with caring responsibilities for an elderly dependent family member. Both perspectives will help to provide more data on this topic and its implications for women's labour market integration.

REFERENCES

Mothers – Grandmothers – Daughters?


CHAPTER 2
The Structural Context of Women’s Labour Market Participation in Brno

While the first chapter focused on patterns of women’s labour market participation in Brno, providing data on the extent to which women in Brno are active in the labour market, as well as on how this participation differs for different groups of women, the aim of the second chapter is to provide information on the structural context of the patterns identified in the first chapter. After presenting the economic structure of the local labour market and its development, as well as the educational structure of the labour force in Brno, we will especially focus on discussing the horizontal and vertical segregation of the labour market in Brno and the related gender pay gap. Again, our main source of information is census data, supplemented by data from the labour force survey and other local sources.

2.1 Historical Background and Gender Segregation in Education

Historically speaking, Brno gained in economic and regional importance from the 19th century on, as it grew as an industrial centre (textile industry, electrical and mechanical engineering). The current employment structure in Brno is influenced by this tradition as well as by the former state-socialist regime and the transformation process during the 1990s. In 1989 before the fall of the communist regime, Brno was an important industrial centre (mostly machinery industry) and this tendency continued in the early 1990s. However, the process of economic transformation of the 1990s brought central changes to the economic structure. It meant, first and foremost, the privatisation of the large state enterprises, mostly splitting them into smaller entities, of which some industrial enterprises were also sold to foreign investors while some other important enterprises were closed down (e.g. the munitions factory Zbrojovka Brno with its roughly 10,000 employees). Yet, the city’s tradition of electrical and mechanical engineering continues to be important and, in recent years, Brno has also started gaining importance as a centre of information technology business. (Brno Business Facts 2010; Hospodařské podmínky 2010; Interview with labour market experts from the Brno labour office).

While in 1989 the industrial (secondary) sector was dominant, employing almost 50% of the people working in Brno, this changed quickly in the early years of the 1990s. By 2008, 27.8% of the employed worked in the industrial sector, 72% worked in the service industry and 0.2% worked in the primary sector. Hence, a shift from industry to the service sector has dominated over the last 20 years. This
trend is intensified by Brno’s importance as a regional centre, hosting many public institutions such as the national constitutional court, the ombudsman, the Brno municipal government and the South Moravian Region administration. Brno is also important for its trade fairs and educational institutions. All of these sectors provide important employment opportunities for women. The city hosts 6 public universities with 27 faculties offering a broad range of university studies (e.g. engineering, information technology, humanities, economics, agriculture, arts and armed services) with over 80,000 students. Additionally, 6 private universities are located in Brno serving 4,600 students. (Brno Business Facts 2010; Hospodářské podmínky 2010; Interview with labour market experts from the Brno labour office).

The city initiated a campaign to attract foreign investors quite late. By the 1990s when most big Czech cities began to invite foreign investors, Brno’s city administration did not follow suit. According to the experts from the labour office, when Brno finally started, its strategy was rather weak. They invited enterprises, such as assembling and packaging companies, that did not bring high added value and focused on low labour costs. Hence, they easily moved on towards cheaper labour costs. Around 2005, foreign investment incentives started being directed towards the electronics and ICT industries. Companies such as IBM, Honeywell and Red Hat entered the Brno labour market and started providing important employment opportunities (Interview with labour market experts from the Brno labour office).

The transformation to capitalism brought completely new possibilities for private entrepreneurs. Many people, including some who had been laid off in the privatization process, became entrepreneurs. The retail sector developed extensively (Interview with labour market experts from the Brno labour office).

Before we turn to the detailed analysis of employment patterns of men and women in the particular economic sectors in Brno showing sectoral and occupational gender segregation, we will have a look at the distribution of educational attainment of women and men living in Brno, as well as of the Brno labour force. This is important because both sectoral and occupational segregation are, to a certain extent, only a continuation of the segregation in education.

To start with, the census data from the years 1991, 2001 and 2011 that are presented in Table 2.1 show that the share of men and women in the different categories of educational attainment has remained quite consistent since the fall of the communist regime. At the same time, however, important changes occurred with regards to the relevance of the different educational categories for women and men in general.

In all three census years, women and men respectively dominated the same educational groups. Over the last 20 years, however, the ratio between them has levelled out, that is their representation in the various educational categories has become more balanced. This tendency was strongest in the category of tertiary education, but also when it comes to pre-primary and primary education. While women have had a stronger presence in the categories of pre-primary/primary
education, secondary with GCSE\(^1\) and post-secondary, men have prevailed in the categories of secondary without GCSE and tertiary education. This shows a clear long-term pattern of educational segregation, where boys are directed towards vocational areas, while girls prevail in general high schools as well as high schools with a specific vocational orientation (e.g. economic-business high schools, medical high schools, etc.) which also end with GCSE. This pattern is furthermore related to the level of post-secondary education where technical and professional higher institutions offer non-tertiary post-secondary education courses (cz: nástavbové studium).

According to Čermáková et al. (2000), the point of transition from primary to secondary education (at the age of 14) plays a central role in this pattern. While at this point boys choose/are directed towards vocational training and apprenticeships, girls choose/are directed towards secondary education with GCSE. This pattern mimics the quota system of the former state-socialist regime (Čermáková et al. 2000; Šmídová, Janoušková, Katrňák 2010) and the rather minor changes during the 1990s indicate that it has also remained stable throughout the economic transformation.

\(^1\) The Czech version of the GCSE (General certificate of secondary education) is called “maturita” and is a necessary prerequisite for admission to an university or post-secondary education.

### Table 2.1 Educational Attainment in Brno in 1991, 2001 and 2011

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% men</td>
<td>% women</td>
<td>share in men total</td>
</tr>
<tr>
<td>Pre-primary and primary</td>
<td>33.7</td>
<td>66.3</td>
<td>18.5</td>
</tr>
<tr>
<td>Secondary without GCSE</td>
<td>51.9</td>
<td>48.1</td>
<td>33.6</td>
</tr>
<tr>
<td>Secondary with GCSE</td>
<td>41.8</td>
<td>58.2</td>
<td>26.7</td>
</tr>
<tr>
<td>Post-secondary</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Tertiary education</td>
<td>63.2</td>
<td>36.8</td>
<td>21.2</td>
</tr>
<tr>
<td></td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>

*Source: ČSÚ 2003; Krajská statistická správa 1992; Census 2011*
Despite the fact that this pattern of educational segregation remained more or less stable, the census data still show very important changes when it comes to the relevance of the specific categories of educational attainment for women and men overall. To a certain extent these changes also relativize the pattern described above. While in 1991, one third of men 15+ had secondary education without GCSE, followed by a quarter with secondary education with GCSE and a fifth with tertiary education, in 2011 these three categories turned upside down. Today almost a third of men have tertiary education, while a bit more than a quarter have secondary education with and without GCSE. Hence, from this point of view, secondary education without GCSE has become less statistically significant for men, while tertiary education has become more important. For women the changes over the last twenty years are even greater. While in 1991 almost two thirds of women had (in equal parts) secondary education with GCSE and pre-primary/primary education and approximately a quarter had secondary education with GCSE, in 2011, the number of women with pre-primary/primary education dropped significantly. Though secondary education with GCSE remained the most important category for women (one third), it is now followed by tertiary education and secondary education without GCSE. While for men, the main shift was from secondary education without GCSE to tertiary education, for women an even greater shift happened from pre-primary and primary to tertiary education. This strong shift also explains the decrease in differences in the share of men and women in the categories of pre-primary/primary and tertiary education.

While the census data of the last 20 years for the population 15+ living in Brno clearly shows the long term trends of educational attainment, these data give only limited information on the educational attainment of people actually working in Brno. In this regard the data presented in the following Table 2.2 provides a more detailed picture. It presents data from an annual survey of the Brno labour office\(^2\), mostly among companies with more than 20 employees. These data are contrasted with census data from the year 2011 for the age group 15–64 (including those who are not economically active, as well as those who are not working in Brno).

The gender segregation pattern in the different categories of educational attainment again remains stable. However, contrasting the survey data with the educational structure of the population 15–64 in Brno shows what kind of labour force is especially attracted by the working opportunities in Brno (at least in relation to larger companies). The city of Brno attracts a highly educated labour force; approx. two thirds of the employed have secondary education with GCSE and tertiary education. Here the fact that Brno is an important educational centre also plays a role, as many students stay in Brno after graduating from university (Interview with labour market experts from the Labour Office Brno). However,

\(^2\) The sample amounted to 124,776 employees which covers only approximately 50% of the currently working population in Brno (according to estimations by the labour office 240,000), with a certain bias towards large companies (small companies with up to 20 employees are underrepresented in the sample) (ÚP Brno-město 2010).
Table 2.2 Education Level of Employees at the City Level in 2010 and the Population 15–64 in 2011

<table>
<thead>
<tr>
<th>Education level</th>
<th>2010 Survey Brno labour office</th>
<th>2011 Census data, age group 15–64</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% men</td>
<td>% women</td>
</tr>
<tr>
<td>Pre-primary and primary</td>
<td>35.9</td>
<td>64.1</td>
</tr>
<tr>
<td>Secondary without GCSE</td>
<td>64.5</td>
<td>35.5</td>
</tr>
<tr>
<td>Secondary with GCSE</td>
<td>42.9</td>
<td>57.1</td>
</tr>
<tr>
<td>Post-secondary</td>
<td>34.6</td>
<td>65.4</td>
</tr>
<tr>
<td>Tertiary education</td>
<td>57.0</td>
<td>43.0</td>
</tr>
</tbody>
</table>

Source: Brno labour office – Database PZJMK 2010; authors’ calculations; Census 2011

the data also suggests that the opportunities differ for women and men. While the workforce covered in the Brno survey consists of a significantly larger portion of men with tertiary education, the female workforce shows a share in secondary education with GCSE far above the share in the population aged 15–64. Thus it appears Brno offers special working opportunities for these two groups, while women with secondary education without GCSE have fewer opportunities to find employment in the city. It is, however, hard to tell to what extent these trends are influenced by the sample of the survey and are applicable to the Brno labour market as a whole. Nevertheless, the survey shows a clear trend for the larger companies operating in Brno.

These considerations already show a certain link between the gender segregation in education and the gender segregation of the labour market. In the following we will therefore have a closer look at the latter.

2.2 Gender Segregation of the Labour Market in Brno

Gender segregation of the labour market is a phenomenon with global and long term relevance. This has been repeatedly pointed out by feminist and gender theorists dealing with the participation of women in the labour market both in the context of the Czech Republic (Křížková 2009b; Šmídová, Janoušková, Katrňák 2010; Valentová, Šmídová, Katrňák 2010), as well as internationally (e.g. Hartmann 1976; Walby 1988; Anker 1998; England 2005 – also cited in Křížková 2009b).

The phenomenon of labour market gender segregation is related to the gendered division of labour which is evident not only in the concentration of women/men in certain sectors and occupations (horizontal segregation), but also in relation to working positions and different contract and working conditions as well as income, prestige and job stability (vertical/hierarchical segregation). The dividing line between these two forms of segregation is not always possible to determine
clearly however, as, for example, many of the occupational categories used for the analysis of segregation include both occupational as well as hierarchical elements (Křížková 2009b; Bettio, Verashchagina 2009).

The literature on labour market gender segregation provides different approaches to measuring segregation (cf. for example Anker 1998: 68–95). In this respect, indices play a central role for the measurement of the overall level of segregation in a country and for the international comparison of this situation (Anker 1998; Bettio, Verashchagina 2009). For example, the recent European Commission report on “Gender segregation in the labour market” (Bettio, Verashchagina 2009) uses both the “standardised or Karmel and MacLachlan index (IP)” and the “Duncan and Duncan index of dissimilarity (ID)”, the former of which is also used in the European Employment strategy. Both indices depart from the assumption that segregation implies a different distribution of women and men across occupations or sectors: the less equal the distribution, the higher the level of segregation. Both can be interpreted as the share of the employed population that would need to change the occupation/sector in order to bring about an even distribution of men and women (Bettio, Verashchagina 2009).

One way to complete the picture provided by segregation indices on a more detailed local level is to analyse the ratio of men and women in different occupations/sectors and identify male/female-dominated and mixed occupations/sectors (Bettio, Verashchagina 2009; Křížková 2009b). In the following, such a detailed analysis will be the central method used to examine the horizontal and vertical gender segregation of the labour market in Brno. To contextualize these findings, we will furthermore evaluate the Czech Republic in comparison with other EU-member states based on the IP and ID indexes.

The central question in regard to the detailed examination of occupations/sectors is how male/female-dominated and mixed occupations/sectors are defined. Here, two central decisions have to be taken: the mid-point for analysis and the width of the middle band (Hakim 1993). The mid-point can either be chosen “theoretically” or based on the actual female share in the labour force. While Hakim (1993) and Bettio and Verashchagina (2009) depart from the actual share of women in the labour force (using a middle band of +/-15 percentage points) Křížková (2009b, referring to Reskin and Roos 1990) argues for setting the mid-point for analysis at 50 per cent (with a middle band of +/-10 percentage points). According to Křížková, Hakim’s approach tends to conserve the current (unequal) condition. In the following analysis we will follow the latter approach and define segregated (male/female dominated) sectors/occupations as those in which one of the sexes is represented at a rate of 60 percent or more. While equal representation is defined as 50% women’s participation in the respective sector/occupation, a representation within the range of 40–60% is evaluated as mixed.

Using this basic definition, we will focus first and foremost on sectors/occupations in which one of the sexes has a rate of 60 percent or more participation. We have also rated the intensity of the segregation in the various sectors/
occupations. Here, we differentiate minimally segregated sectors/occupations (marked yellow, with a male/female percentage of 60–70%), moderately segregated sectors/occupations (highlighted in orange, with a male/female percentage of 70–80%) and finally highly segregated sectors/occupations (marked red, with a male/female percentage of over 80%). This intensity scale is inspired by Anker (1998), who argues that occupations with a male/female percentage of over 80% (that is a ratio of male (female) workers to female (male) workers of 4 to 1), constitute instances where gender-stereotyping is clear and the underrepresented sex has neither equal opportunities of entering these sectors/occupations nor would probably feel comfortable in working in these occupations.

The data used for documenting gender segregation for the Czech Republic in general and in the city of Brno in particular comes from three different data sets: For the national level, the publication *Zaostřeno na ženy a muže 2010* (Focus on Men and Women 2010) published online by the Czech statistical office (ČSÚ 2010d) provides an overview of the development of sectoral and occupational gender segregation on the Czech labour market from 1993 to 2009. At the local city level, data is not that easily available. The Census provides rough data on sectoral and occupational segregation for the years 1991, 2001 and 2011. More detailed data on Brno (for the year 2010) comes from an annual survey organized by the Brno labour office (Database PZJMK 2010). Though the data is quite detailed, its value is limited as it covers only approximately 50% of the people currently employed in the city of Brno (according to estimates by the labour office 240,000), with a certain bias towards large companies (small companies with up to 20 employees are underrepresented in the sample). This potentially influences the data on gender segregation calculated from this data set. Unlike the first two data sources, which are easily available, the data from the labour office survey is not regularly published, but was especially made available by the labour office for the purpose of the project.

In 2009, on national average, 11 out of the first 19 NACE sectors (A–S), almost two thirds, were segregated in the sense that either the male or the female percentage exceeded 60%. In 8 of these segregated sectors men dominated. These are outlined in Table 2.3.

### Table 2.3 Male Dominated Sectors National Average 2009

<table>
<thead>
<tr>
<th>Sector (NACE) – 2009</th>
<th>% men</th>
<th>% of total male employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>(F) Construction</td>
<td>91.8</td>
<td>16.2</td>
</tr>
<tr>
<td>(B) Mining and quarrying</td>
<td>85.6</td>
<td>1.6</td>
</tr>
<tr>
<td>(D) Electricity, gas, steam and air conditioning supply</td>
<td>81.0</td>
<td>1.7</td>
</tr>
<tr>
<td>(E) Water supply</td>
<td>80.7</td>
<td>1.5</td>
</tr>
<tr>
<td>(H) Transportation and storage</td>
<td>74.2</td>
<td>8.7</td>
</tr>
<tr>
<td>(J) Information and communication</td>
<td>73.3</td>
<td>3.4</td>
</tr>
<tr>
<td>(A) Agriculture, forestry and fishing</td>
<td>69.6</td>
<td>3.8</td>
</tr>
<tr>
<td>(C) Manufacturing</td>
<td>64.8</td>
<td>28.5</td>
</tr>
</tbody>
</table>

*Source: VŠPS – ČSÚ 2010d*
Table 2.3 furthermore shows that the majority of these sectors are moderately or highly segregated sectors, that is with a percentage of men of over 70%. Half of them are even strongly segregated, that is in these sectors the men-women ratio is 4 to 1 or higher, which means that these sectors are stereotypically male, and the likeliness for women to work in these sectors is very low.

As far as the importance of these sectors for male labour market participation is concerned, three of these segregated sectors – Manufacturing, Construction as well as Transportation and storage – employ more than half of the men participating on the labour market (53.4%) and approx. two thirds of men work in segregated sectors.

The following Table 2.4 outlines the female dominated sectors.

**Table 2.4 Female Dominated Sectors National Average 2009**

<table>
<thead>
<tr>
<th>Sector (NACE) – 2009</th>
<th>% female</th>
<th>% of total female employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Q) Human health and social work activities</td>
<td>81.5</td>
<td>12.6</td>
</tr>
<tr>
<td>(P) Education</td>
<td>77.2</td>
<td>7.3</td>
</tr>
<tr>
<td>(S) Other service activities</td>
<td>62.7</td>
<td>2.7</td>
</tr>
</tbody>
</table>

*Source: VŠPS – ČSÚ 2010d*

Female employees dominate in three sectors, from which two are moderately or highly segregated sectors with over 70% women. These are Education and Human health and social work activities, the latter showing a female percentage of over 80%. That is, sector Q is a stereotypically female sector. This sector, together with education, makes up approx. one fifth of women’s employment.

As far as the typically male/female dominated sectors are concerned, data for the city of Brno (Databaze PZJMK 2010) shows very similar results. These differ in the intensity of segregation, however, as well as in their importance for the male/female employment related to the specific structure of the Brno labour market.

**Table 2.5 Male Dominated Sectors in the City of Brno 2010**

<table>
<thead>
<tr>
<th>Sector (NACE) – 2009</th>
<th>% men</th>
<th>% of total male employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>(F) Construction</td>
<td>77.5</td>
<td>11.2</td>
</tr>
<tr>
<td>(D) Electricity, gas, steam and air conditioning supply</td>
<td>74.7</td>
<td>1.1</td>
</tr>
<tr>
<td>(C) Manufacturing</td>
<td>72.2</td>
<td>16.7</td>
</tr>
<tr>
<td>(E) Water supply</td>
<td>71.7</td>
<td>1.0</td>
</tr>
<tr>
<td>(H) Transportation and storage</td>
<td>65.6</td>
<td>7.7</td>
</tr>
<tr>
<td>(J) Information and communication</td>
<td>69.1</td>
<td>9.2</td>
</tr>
<tr>
<td>(A) Agriculture, forestry and fishing</td>
<td>61.1</td>
<td>0.3</td>
</tr>
<tr>
<td>(M) Professional, scientific and technical activities</td>
<td>60.5</td>
<td>7.7</td>
</tr>
</tbody>
</table>

*Source: Brno labour office – Database PZJMK 2010, authors’ calculations*
As outlined in more detail in Table 2.5, in Brno, except for the manufacturing sector, data shows the same male dominated sectors in the same order as on national average. The main difference in these sectors is that the intensity of segregation is lower on the local level: according to the data from the survey of the Brno labour office, there are only minimally and moderately segregated sectors in Brno.

As previously mentioned, the city of Brno has a higher (medium) intensity of segregation in the sector of manufacturing than the national averages. At the same time, in Brno, this sector is less important in terms of overall (male and female) employment (for men 16.7% in Brno vs. 28.5% on national average; for women 7% in Brno vs. 20.7% on national average) (ČSÚ 2010d). This could be explained by the fact that the important companies in the manufacturing sector in Brno are stereotypically male: four out of the five of the biggest manufacturing companies operate in the fields of electric equipment, fabricated metal products, machinery and equipment. There is only one large (stereotypically female) company in Brno. It manufactures apparel (Database PZJMK 2010). Moreover, as pointed out earlier in this chapter, during the last two decades the textile industry, which is typically female dominated and was historically important for the city of Brno, has declined in importance (Interview with labour market experts from the Brno labour office).

Also the sector of Professional, scientific and technical activities shows a slightly higher segregation in Brno than on the national level. At the same time, the share in male employment of this sector in Brno is more than twice as high than on national average (3.6% on national average vs. 7.7% on the local level) (ČSÚ 2010d). This is possible to explain by the fact that Brno is an important university city and hence attracts more employees in this sector. From the 6 public universities situated in Brno, Masaryk University and the University of Technology are the most important employers in this field.

Finally, the intensity of segregation of sector J, Information and communication, slightly differs in comparison with the national average (low vs. medium). Again, on the local level of Brno, this sector is more important for the employment of men and women than on national average: in Brno 9.2% of all men (compared to 3.4%) and 4.5% of all women (compared to 1.6%) work in this sector (ČSÚ 2010d). The general higher importance of this sector in the city of Brno seems to also create more opportunities for women to work in this field (compared to the national average).

As outlined in Table 2.6, similar to the case of the male dominated sectors described above, all the female dominated sectors identified in relation to the national average are also female dominated at the level of the city of Brno. Again however, the intensity of the segregation is lower and the female dominated sectors also show only low or moderate segregation.
An exception to this trend of less intensive segregation on the local level is found in the Financial and insurance activities sector (sector K), which, for women, remains slightly below 60 percent on national average. Sector K exceeds the national average at the local level of Brno, however. In Brno, this sector is slightly less important in terms of employment of women than on national average, while its importance for men is comparable on the local and national levels (ČSÚ 2010d).

As far as the other two female dominated sectors are concerned, the female employment structure differs markedly at the local level when compared to the national average. According to the survey data provided by the Brno labour office (Database PZJMK 2010), in the city of Brno, the sectors Q and P are much more important for the employment of women than on national average. In Brno, 18.5% of employed women work in Human health and social work sectors (on national average only 12.6%). Similarly, 18.9% work in education, which is more than twice the percentage of women on national average (ČSÚ 2010d). Both these differences can be explained by the fact that Brno is the second largest city of the Czech Republic and, as an important regional centre, it provides important health and educational infrastructure. Four out of the five biggest and most important employers in sector Q are hospitals. And, as mentioned before, Brno is an important university city with 6 public universities, of which the two largest together employ over 6000 workers. Nevertheless these shares are also potentially biased by the form and sample of the survey. According to the census data for Brno presented later on in this chapter (for the year 2011), only 13.1% of the employed women in Brno work in Education and 14.4% in Human health and social work activities. Hence, according to these figures, the differences between the local and the national levels are not that striking.

The picture developed above in regard to sectoral gender segregation is importantly completed by data on occupational and vertical segregation, which we will concentrate on in the following.

On a very general level, occupational classification data (ISCO-88 one digit code) from the labour force survey (ČSÚ 2010d) shows that on national average 6 out of the 10 categories are segregated by a male/female percentage of over 60% – four are male dominated and two are female dominated.

Table 2.7 shows the male dominated occupations on national average for the year 2009. Here, the armed forces and Craft and related trades workers are
highly segregated. The occupational categories Plant and machine operators and assemblers, as well as Legislators, senior officials and managers, fall among the moderately segregated occupational categories (ČSÚ 2010d).

**Table 2.7** Male Dominated Occupations National Average 2009

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% men</th>
<th>% of total male employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Armed forces</td>
<td>94.2</td>
<td>0.5</td>
</tr>
<tr>
<td>7 Craft and related trades workers</td>
<td>89.9</td>
<td>27.7</td>
</tr>
<tr>
<td>8 Plant and machine operators and assemblers</td>
<td>75.5</td>
<td>17.6</td>
</tr>
<tr>
<td>1 Legislators, senior officials and managers</td>
<td>71.0</td>
<td>7.4</td>
</tr>
</tbody>
</table>

*Source: VŠPS – ČSÚ 2010d*

This global picture is outlined in more detail in Table 2.8, which works with the double digit ISCO-88 code.

**Table 2.8** Male Dominated Occupations (Double-digit ISCO-88 Code) National Average 2008

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% men</th>
<th>% of total male employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>71 Extraction and building trades workers</td>
<td>97.7</td>
<td>4.2</td>
</tr>
<tr>
<td>83 Drivers and mobile-plant operators</td>
<td>90.8</td>
<td>9.5</td>
</tr>
<tr>
<td>72 Metal, machinery and related trades workers</td>
<td>84.3</td>
<td>17.2</td>
</tr>
<tr>
<td>21 Physical, mathematical and engineering science professionals</td>
<td>83.5</td>
<td>4.6</td>
</tr>
<tr>
<td>81 Stationary-plant and related operators</td>
<td>77.9</td>
<td>6.2</td>
</tr>
<tr>
<td>31 Physical and engineering science associate professionals</td>
<td>77.1</td>
<td>10.9</td>
</tr>
<tr>
<td>12 Corporate managers</td>
<td>63.4</td>
<td>5.0</td>
</tr>
</tbody>
</table>

*Source: Křížková 2009b, using data from the earnings survey*

The outlined pattern of male dominated occupations constitutes a mixture of manual technical work (71, 72), the operation of mobile or stationary machinery (81, 83), the performance of technical tasks related to physical and engineering sciences (31), science professionals in physics, mathematics, and engineering and, finally, corporate managers (12). These seven occupational categories include the three most important occupations for men as far as their share of total employment is concerned (72, 31, 83) and together cover 58% of employed men. That is, more than half of all employed men centre in approx. one quarter of available occupations (calculated from the 26 double-digit ISCO-88 categories). Hence it is no surprise that the identified occupations are, by and large, related to gender stereotypical fields like manual work, engineering, machinery and technical equipment. The pattern is also interesting from the point of view of the educational background needed for these occupations. The majority of the outlined male dominated occupations requires either basic education (e.g. in the
form of an apprenticeship) or university education. Hence, the male dominated occupations described above copy the segregational pattern in educational attainment outlined previously. Finally, the category of corporate managers is also male dominated, which is the most direct indicator that the above pattern of male dominated occupations means that men are concentrated in leadership positions. However, the sub-category 12, corporate managers, is not as strongly male dominated as the overall category 1, Legislators, senior officials and managers (Křížková 2009b). The two female dominated occupational categories (out of the 10 ISCO-88 one digit categories) are outlined in Table 2.9.

Table 2.9 Female Dominated Occupations National Average 2009

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% women</th>
<th>% of total female employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Clerks</td>
<td>73.3</td>
<td>12.6</td>
</tr>
<tr>
<td>5 Service workers and shop and market sales workers</td>
<td>65.0</td>
<td>18.1</td>
</tr>
</tbody>
</table>

Source: VŠPS – ČSÚ 2010d

Again, this global picture is outlined in more detail in Table 2.10 which provides an overview of the dominated occupations based on the ISCO-88 double digit categories.

Table 2.10 Female Dominated Occupations (Double-digit ISCO-88 Code) National Average 2008

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% women</th>
<th>% of total female employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>32 Life science and health associate professionals</td>
<td>91.2</td>
<td>7.7</td>
</tr>
<tr>
<td>42 Customer services clerks</td>
<td>88.4</td>
<td>4.2</td>
</tr>
<tr>
<td>52 Models, salespersons and demonstrators</td>
<td>81.3</td>
<td>4.1</td>
</tr>
<tr>
<td>23 Teaching professionals</td>
<td>72.9</td>
<td>9.5</td>
</tr>
<tr>
<td>41 Office clerks</td>
<td>71.3</td>
<td>7.0</td>
</tr>
<tr>
<td>91 Sales and services elementary occupations</td>
<td>70.1</td>
<td>5.5</td>
</tr>
<tr>
<td>33 Teaching associate professionals</td>
<td>68.8</td>
<td>1.7</td>
</tr>
<tr>
<td>24 Other professionals</td>
<td>65.9</td>
<td>8.4</td>
</tr>
<tr>
<td>34 Other associate professionals</td>
<td>64.2</td>
<td>15.0</td>
</tr>
</tbody>
</table>

Source: Křížková 2009b

The outlined pattern of female dominated occupations shows a clear concentration of women in occupations in the service sector – teaching, administrative work, care work, and sales. These nine occupational categories include the three most important occupations for women as far as their share in total employment is concerned (34, 23, 24) and together cover 63% of employed women. That is, almost two thirds of all employed women centre in approx. one third of available occupations (calculated from the 26 double-digit ISCO-88
categories). This is comparable to the male pattern. Again, it is no surprise that the identified occupations are related to gender stereotypical fields like care work, education, and administrative work. This pattern is also interesting in terms of the educational background needed for these occupations, where most female dominated occupations are tied to secondary education with school leaving examination. Here, again, the segregational pattern on the labour market clearly mirrors the segregation in the educational system. Finally, the pattern of female dominated occupations also points to a tendency for women to group in medium and lower hierarchy positions (Křížková 2009b).

Data on occupational gender segregation for the city of Brno is only available on the most basic level of occupational categorization (ISCO-88 single digit categories) and comes from the annual survey conducted by the Brno labour office (Database PZJMK 2010). As outlined in Tables 2.11 and 2.12, both the pattern of male/female dominated occupations and the intensity of segregation in the various categories are very similar to the national average.

**Table 2.11 Male Dominated Occupations in the City of Brno 2010**

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% men</th>
<th>% of total male employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Armed forces</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>7 Craft and related trades workers</td>
<td>8.9</td>
<td>15.1</td>
</tr>
<tr>
<td>8 Plant and machine operators and assemblers</td>
<td>70.8</td>
<td>13.1</td>
</tr>
<tr>
<td>1 Legislators, senior officials an managers</td>
<td>66.9</td>
<td>8.3</td>
</tr>
</tbody>
</table>

*Source: Brno labour office – Database PZJMK 2010, authors’ calculations*

**Table 2.12 Female Dominated Occupations in the City of Brno 2010**

<table>
<thead>
<tr>
<th>Occupations (CZ-ISCO-88)</th>
<th>% women</th>
<th>% of total female employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Clerks</td>
<td>72.5</td>
<td>14.2</td>
</tr>
<tr>
<td>5 Service workers and shop and market sales workers</td>
<td>61.2</td>
<td>14.5</td>
</tr>
</tbody>
</table>

*Source: Brno labour office – Database PZJMK 2010, authors’ calculations*

The two tables again show differences in the importance of the various categories in relation to male/female employment in total. These differences are probably due to the bias of the survey towards medium-size and larger companies and the underrepresentation of small companies (up to 20 employees).

To complement the presented current data for the national and the local level, in the following we will present a rough overview of the most important changes in the pattern of horizontal and vertical gender segregation over the last two decades. To do so, we will use the gender segregation indices cited earlier and then turn to census data for the years 1991, 2001 and 2011, for the city of Brno.

According to the recent European Commission report on gender segregation in the labour market (Bettio, Verashchagina 2009), the relevant indices (IP and ID)
for the core group of 12 EU countries show few changes. However, as this report further emphasizes, this persistent aggregated trend contains a whole range of different developments on the level of individual member states. Based on data for the years 1997–2007, the report identifies the Czech Republic as part of a group of relatively fast de-segregating countries (together with Austria, Denmark, Norway, Sweden and the UK) with changes in the IP index ranging from 2.8 to 1.5 (in the case of the Czech Republic). In the majority of the countries this trend goes hand in hand with a decline of male/female dominated occupations and an increase of mixed occupations.

What is interesting in the case of the Czech Republic is the fact that the decrease of the IP index between 1997 and 2007 was not related to this trend. Rather, according to Křížková (2009b), the percentage of mixed occupations decreased and the percentage of female dominated occupations increased. Hence, instead of changes in the male/female ratio in various occupations, the change in the index is related to changes in occupational structure. Křížková (2009b) explains this as result of the economic transformation in the Czech Republic that went on in the 1990s. While she refers to changes in labour market regulations and the opening up of new areas/occupations in the labour market, she does not specify these changes.

A closer look at the development of sectoral and occupational segregation on the labour market in the city of Brno allows us to examine whether this general pattern identified by Křížková (2009b) for the Czech Republic also applies to the developments on the local level. For this purpose, the following Tables 2.12 and 2.14 present data from the census in 1991, 2001 and 2011. By comparing the census data of the last 20 years, the outcomes of the transformation process on the occupational structure in Brno become especially apparent.

The census data show a clear trend for the primary and secondary sector for the last 20 years: Agriculture, forestry and fishing, Industry, and Construction generally declined in importance, especially for women. As a result, the first two, formerly mixed, sectors turned into slightly male dominated sectors. In the construction sector, existing male domination increased, reaching a ratio of 4 male workers to 1 female worker.

For the tertiary sector, however, the developments in Brno do not confirm the trend described by Křížková (2009b). Though the census data confirm that the changes in labour market segregation are related to changes in the importance of different sectors, there is no clear trend that women predominantly move into already female dominated sectors. Rather, in comparison to 1991, the number of female dominated sectors decreased: while in 1991 5 sectors showed some kind of female segregation, in 2011 only 3 of them remained segregated. Moreover, women's employment in typically and strongly female dominated sectors of Education and Human health and social work activities has remained rather stable over the last 20 years. Though the sector of financial and insurance activities, which has also been traditionally female dominated, gained in importance for women, it gained even stronger importance for the employment of men and, as a result, shows a desegregating tendency. Moreover, the second most important sector for women (after Human health and social work activities) is Wholesale
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% of</td>
<td>share in</td>
<td>% of</td>
</tr>
<tr>
<td></td>
<td>sector</td>
<td>empl. in</td>
<td>sector</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>sector %</td>
<td>%</td>
</tr>
<tr>
<td>Agriculture, forestry and fishing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>40.2</td>
<td>2.3</td>
<td>39.9</td>
</tr>
<tr>
<td>Men</td>
<td>59.8</td>
<td>3.8</td>
<td>60.7</td>
</tr>
<tr>
<td>Industry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>50.7</td>
<td>28.5</td>
<td>35.0</td>
</tr>
<tr>
<td>Men</td>
<td>49.3</td>
<td>30.3</td>
<td>65.0</td>
</tr>
<tr>
<td>Construction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>30.2</td>
<td>6.5</td>
<td>18.9</td>
</tr>
<tr>
<td>Men</td>
<td>69.8</td>
<td>16.4</td>
<td>81.1</td>
</tr>
<tr>
<td>Wholesale and retail trade; repair of motor vehicles and motorcycles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>65.7</td>
<td>13.0</td>
<td>50.3</td>
</tr>
<tr>
<td>Men</td>
<td>34.3</td>
<td>7.4</td>
<td>49.7</td>
</tr>
<tr>
<td>Accommodation and food service activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>69.6</td>
<td>1.3</td>
<td>55.4</td>
</tr>
<tr>
<td>Men</td>
<td>30.4</td>
<td>0.6</td>
<td>44.6</td>
</tr>
<tr>
<td>Transportation and communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>37.5</td>
<td>5.3</td>
<td>31.3</td>
</tr>
<tr>
<td>Men</td>
<td>62.5</td>
<td>9.6</td>
<td>68.7</td>
</tr>
<tr>
<td>Financial and insurance activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>77.3</td>
<td>1.1</td>
<td>65.1</td>
</tr>
<tr>
<td>Men</td>
<td>22.7</td>
<td>0.3</td>
<td>34.9</td>
</tr>
<tr>
<td>Real estate activities, company services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>49.6</td>
<td>7.2</td>
<td>46.6</td>
</tr>
<tr>
<td>Men</td>
<td>50.4</td>
<td>8.0</td>
<td>53.4</td>
</tr>
<tr>
<td>Research and Development</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>43.4</td>
<td>3.1</td>
<td>37.8</td>
</tr>
<tr>
<td>Men</td>
<td>56.6</td>
<td>4.4</td>
<td>62.2</td>
</tr>
<tr>
<td>Public administration and defence; compulsory social security</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>42.5</td>
<td>4.7</td>
<td>48.8</td>
</tr>
<tr>
<td>Men</td>
<td>57.5</td>
<td>7.0</td>
<td>51.2</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>64.5</td>
<td>14.9</td>
<td>68.8</td>
</tr>
<tr>
<td>Men</td>
<td>35.5</td>
<td>9.0</td>
<td>31.2</td>
</tr>
<tr>
<td>Human health and social work activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>80.3</td>
<td>12.2</td>
<td>79.3</td>
</tr>
<tr>
<td>Men</td>
<td>19.7</td>
<td>3.3</td>
<td>20.7</td>
</tr>
<tr>
<td>Other service activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>53.3</td>
<td>8.1</td>
<td>58.0</td>
</tr>
<tr>
<td>Men</td>
<td>46.7</td>
<td>6.2</td>
<td>42.0</td>
</tr>
</tbody>
</table>

Sources: Krajská statistická správa 1992; ČSÚ 2003; Census 2011
and retail, a mixed sector. Hence, rather than an intensification of the female labour market segregation, the trend for Brno seems to be an increase in male domination in the rather stereotypically male sectors of the primary and secondary sectors. Here, the development points towards an exclusion of women, as the ratio of male/female workers is already so high, that – as pointed out by Anker (1998) – gender stereotyping potentially discards women from entering these sectors.

These trends, which to a certain extent go against the developments identified by Křížková for the Czech Republic as a whole, are probably related to the specific working opportunities in Brno. These opportunities stem from Brno’s position as the second largest city of the Czech Republic and have developed based, among other reasons, on the city’s strategy to attract foreign capital. Based on the very broad census data this is however hard to examine in greater detail. Nevertheless, the tendency toward a certain desegregation, or at least a lower level of segregation, in the city of Brno (in comparison to national data) was also the result of the preceding analysis of the more detailed survey data from the Brno labour office. Thus, the census data and their development over the last 20 years confirm the trends identified earlier.

At the same time, despite the fact that almost half of the sectors in Brno are currently mixed, these sectors might still be segregated in an occupational and vertical sense. That is, despite the fact that the ratio among women and men in these sectors is more or less balanced, women and men might still be clustered in different (hierarchical) positions. The following Table 2.14 on occupational gender segregation provides more information on this point.

Again, the census data provides only a very broad picture (on the ISCO-88 one digit level). Furthermore, due to changes in the classification, comparable data is only available for the years 2001 and 2011, mirroring the trend of the last 10 years. In this regard, the data show a rather clear picture: while men dominate the categories Legislators, senior officials and managers, Craft and related trades workers, Plant and machine operators and assemblers as well as the armed forces, women prevail in the categories Clerks, Service workers and shop and market sales workers, as well as in the Elementary occupations. The remaining three categories are gender balanced. This pattern can, to a certain extent, be related to the segregation in educational attainment discussed before. Men dominate in those occupations where either university education or secondary education without GCSE (or professionally oriented secondary education with GCSE) is required. Women in turn dominate those occupations which require secondary education with GCSE (both generally and professionally oriented) as well as the elementary occupations (that is, unskilled work). However, in terms of employment, the most important occupational categories for both men and women are the two mixed ones, Professionals and Technicians and associate professionals. The comparison of the years 2001 and 2011 shows that this pattern is rather persistent. However, the ISCO-88 classification is too broad to make a more detailed analysis. Nevertheless, these data can be used to verify the data on occupational segregation from the survey of the Brno labour office presented before. While the segregated categories match, the actual share of men and women in the various categories differs.
Table 2.14 Occupational Gender Segregation (CZ-ISCO-88) in the City of Brno in the Years 1991, 2001 and 2010

<table>
<thead>
<tr>
<th>Occupations</th>
<th>1991</th>
<th>2001</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>CZ-ISCO-88</td>
<td>% of sector</td>
<td>share in empl. in sector</td>
<td>% of sector</td>
</tr>
<tr>
<td>1 Legislators, Senior officials and managers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>29.0</td>
<td>31.5</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>71.0</td>
<td>68.5</td>
</tr>
<tr>
<td>2 Professionals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>48.3</td>
<td>51.5</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>51.7</td>
<td>48.5</td>
</tr>
<tr>
<td>3 Technicians and associate professionals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>58.8</td>
<td>54.3</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>41.2</td>
<td>45.7</td>
</tr>
<tr>
<td>4 Clerks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>73.6</td>
<td>70.8</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>26.4</td>
<td>29.3</td>
</tr>
<tr>
<td>5 Service workers and shop and market sales workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>61.0</td>
<td>60.4</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>39.0</td>
<td>39.6</td>
</tr>
<tr>
<td>6 Skilled agricultural and forestry workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>43.5</td>
<td>43.7</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>56.5</td>
<td>56.3</td>
</tr>
<tr>
<td>7 Craft and related trades workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>16.3</td>
<td>13.1</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>83.7</td>
<td>86.9</td>
</tr>
<tr>
<td>8 Plant and machine operators and assemblers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>15.7</td>
<td>18.7</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>84.3</td>
<td>81.3</td>
</tr>
<tr>
<td>9 Elementary occupations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>62.4</td>
<td>69.1</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>37.6</td>
<td>30.9</td>
</tr>
<tr>
<td>0 Armed forces</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>—</td>
<td>3.3</td>
<td>15.6</td>
</tr>
<tr>
<td>Men</td>
<td>—</td>
<td>96.7</td>
<td>84.4</td>
</tr>
</tbody>
</table>

Sources: Krajská statistická správa 1992; ČSÚ 2003; Census 2011

The data from the local survey suggested a lower segregation on the local level for all the segregated occupational categories. This tendency is confirmed, with the exception of Plant and machine operators and assemblers, for which the share of men in the city of Brno is approx. 6 percentage points higher. At the same time, the importance of this category for the overall employment of men is lower in the city of Brno than on national average.
What is furthermore possible to add on this rather general level is data on the segregation with regards to company ownership. These data are again available from the survey of the Brno labour office.

Table 2.15 Percentage of Men/Women and Share in Total Employment of Men/Women by Company Ownership, Brno 2010

<table>
<thead>
<tr>
<th>Company ownership</th>
<th>2010</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% of sector</td>
<td>share in empl. in sector %</td>
</tr>
<tr>
<td>Private</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>38.5</td>
<td>38.8</td>
</tr>
<tr>
<td>Men</td>
<td>61.5</td>
<td>56.8</td>
</tr>
<tr>
<td>Cooperative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>59.2</td>
<td>0.9</td>
</tr>
<tr>
<td>Men</td>
<td>40.8</td>
<td>0.5</td>
</tr>
<tr>
<td>Private sector total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>38.8</td>
<td>39.6</td>
</tr>
<tr>
<td>Men</td>
<td>61.2</td>
<td>57.4</td>
</tr>
<tr>
<td>State</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>61.7</td>
<td>35.7</td>
</tr>
<tr>
<td>Men</td>
<td>38.3</td>
<td>20.4</td>
</tr>
<tr>
<td>Municipality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>55.3</td>
<td>9.5</td>
</tr>
<tr>
<td>Men</td>
<td>44.7</td>
<td>7.1</td>
</tr>
<tr>
<td>Public sector total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>60.2</td>
<td>45.3</td>
</tr>
<tr>
<td>Men</td>
<td>39.8</td>
<td>27.4</td>
</tr>
<tr>
<td>Associations, churches, political parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>79.5</td>
<td>0.9</td>
</tr>
<tr>
<td>Men</td>
<td>20.5</td>
<td>0.2</td>
</tr>
<tr>
<td>Mixed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>54.2</td>
<td>1.0</td>
</tr>
<tr>
<td>Men</td>
<td>45.8</td>
<td>0.8</td>
</tr>
</tbody>
</table>

Source: Brno labour office – Database PZJMK 2010, authors’ calculations

While the public sector has a male/female ratio of 39.8%/60.2% slightly dominated by women, the private sector is, with a ratio of 61.2%/38.8%, in turn slightly dominated by men. All in all, the public sector in Brno provides for a share of 45.3% in the total employment of women. This high number is related to the fact that public ownership is first and foremost characteristic of the feminized sectors education, health care and public administration, which are especially important in Brno due to the city’s role as an important centre for education and health institutions. Furthermore, Brno also hosts several important public service and administrational facilities (e.g. the constitutional court, the supreme court, etc.).
The pattern of horizontal and vertical segregation of the labour market in the Czech Republic and in Brno, which we have outlined in this chapter, is part of a complex system, where causes and effects are difficult to differentiate as they tend to mutually reproduce each other (Křížková 2009a, Čermáková et al. 2000). That is, the gender segregation of the educational system presented previously precedes the labour market segregation and at the same time – via the anticipations of possible future employment opportunities – is a reaction to the existence of a segregated labour market (Čermáková et al. 2000; Valentová, Šmídová, Katrnáč 2010). Apart from the segregation as such (that is, the clustering of men and women in a limited number of sectors and occupations) this phenomenon also influences the income level of men and women. One striking example of this is the difference between men and women on the level of secondary education. As described before, boys choose/are directed towards vocational training and apprenticeships, while girls choose/are directed towards secondary education with GCSE. The basic crux of this pattern is that, on average, higher educational attainment of women (secondary with GCSE) does not necessarily lead to better paid jobs. Rather, these women concentrate in typically feminized occupations, which, as will be analysed in detail below, are characterized by a rather low income level. Meanwhile the lower educational attainment of boys (secondary without GCSE) has traditionally enabled them to work in quite well paid jobs. According to Šmídová, Janoušková and Katrnáč (2010), currently, a key question is, if these forms of vocational training preferred by boys will enable them to continue to attain these jobs. At the same time, the census data of Brno show that the importance of secondary education without GCSE has been decreasing over the last 10 years and university education (as well as secondary with GCSE) has gained importance for boys. Together with the important increase of women with tertiary education, this has led to an approximation of the relative importance of the various categories of educational attainment (most importantly, tertiary, secondary with and without GCSE) for men and women and hence a decrease in the intensity of segregation of the respective categories of educational attainment.

Yet the question remains, how will these changes influence the segregation of the labour market as well as the pay gap between men and women. In the final section of this first chapter we will now present more detailed data on the current gender pay gap in the Czech Republic.

2.3 The Gender Pay Gap

As far as salaries for the various sectors and occupations are concerned, only national data are available. According to data for 2009, presented in Table 2.16, the most important female dominated sectors (for Brno as well) such as health and social care and education, were characterized by rather low wages. However, compared to other sectors, both these sectors have a lower gender wage gap – 24.9 in education and 29.9 for Human health and social work activities. This is related
to the fact that these sectors are part of the public sector, which traditionally shows a lower pay gap. The higher gap in human health and social work activities can be explained by vertical segregation: women work mostly as middle health staff and men prevail among doctors, who, on monthly average, also worked more hours (ČSÚ 2010b).

Table 2.16 Salaries in Typically Feminized Sectors and in those Sectors which Show the Highest Gender Pay Gaps in the Czech Republic in 2009 (in CZK⁴)

<table>
<thead>
<tr>
<th>Economic activity</th>
<th>Average gross monthly earnings</th>
<th>Median earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>total</td>
<td>women</td>
</tr>
<tr>
<td>Total Czech Republic</td>
<td>26 677</td>
<td>22 414</td>
</tr>
<tr>
<td>Financial and insurance activities</td>
<td>48 141</td>
<td>36 076</td>
</tr>
<tr>
<td>Information and communication</td>
<td>44 867</td>
<td>32 241</td>
</tr>
<tr>
<td>Wholesale and retail trade; repair of motor vehicles and motorcycles</td>
<td>(26 111)</td>
<td>20 842</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>24 653</td>
<td>19 099</td>
</tr>
<tr>
<td>Education</td>
<td>25 090</td>
<td>23 147</td>
</tr>
<tr>
<td>Human health and social work activities</td>
<td>25 324</td>
<td>23 295</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2010a

Traditionally, the gender pay gap in the private sector is higher than in the public sector, as the wage scales of the public sector provide a certain protection against pay discrimination. The wages in the private sector are more influenced by negotiation between employee and employer and other factors (like uninterrupted careers and unequal opportunities for women to get the same job as men) also play a role (Vlach et al. 2008). This is very well illustrated by the sector of financial and insurance activities (banks, insurance services, etc.), which in Brno is slightly female dominated. It has a pay gap of 49% (related to male earnings). This considerable difference is found not only in the occupational structure of the financial sector. Among the three main occupational (managerial) classes, women had more working hours than men but, on national average, their salaries were lower. The situation is similar when examining the level of education. Women with university degrees worked on monthly average 173.7 hours, men only 173.1 hours, but the gender gap amounted to 33.3% at this level of education (ČSÚ 2010b). The gender pay gap was also above average at the level of secondary education without GCSE and amounted to 28% (ČSÚ 2010b).

⁴ The average exchange rate in 2009 was 26.452 CZK per 1 EUR. In order to keep the presented tables clear and easy to read, we decided to include the equivalent amounts in Euro only in the written text.
As far as occupations are concerned, Table 2.17 provides an overview of the income level in two female dominated occupations (both, nationally and locally), that is Clerks as well as Service, shop and market sales workers: while clerks earn 79% of the national average wage, service, shop and market sales workers earn only 61%. At the same time, the gender pay gap in both occupations is (compared to the other occupations) rather low: 15.3% (average wage) and 12.3% (median) for clerks and 22.4% (average wage) and 19.8% (median) for Service, shop and market sales workers (ČSÚ 2010a). Again, the differences between these two occupations can be explained by the central role of the public sector as an employer for clerks. The highest gender pay gaps are found in the occupational groups which are male dominated, that is Legislators, senior officials and managers as well as in the category of Craft and related trades workers.

Table 2.17 Salaries in the Most Frequently Female Occupations and in Occupations with the Highest Gender Pay Gaps in the Czech Republic in 2009 (in CZK)

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Average gross monthly earnings</th>
<th>Median earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>total</td>
<td>women</td>
</tr>
<tr>
<td>Total Czech Republic</td>
<td>26 677</td>
<td>22 414</td>
</tr>
<tr>
<td>Legislators, senior officials and managers</td>
<td>56 522</td>
<td>39 467</td>
</tr>
<tr>
<td>Craft and related trades workers</td>
<td>21 278</td>
<td>15 512</td>
</tr>
<tr>
<td>Professionals</td>
<td>36 347</td>
<td>30 519</td>
</tr>
<tr>
<td>Service workers and shop and market sales workers</td>
<td>16 318</td>
<td>14 822</td>
</tr>
<tr>
<td>Clerks</td>
<td>21 084</td>
<td>20 064</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2010a

The presented data is again limited by its broadness, providing only information on the ISCO-88 one digit level. This broad picture is importantly completed by the work of Alena Křížková (2009a) on the gender segregation of the Czech labour market. Combining data from different data sets, she shows how the feminization of certain occupations interlocks with the prestige of these occupations and income inequalities. In this regard, Table 2.18 combines information on the income level in certain occupations, the share of women in these occupations with the public perception of these occupations (out of 26 occupational categories). The chosen occupations are either part of the 10 most frequent occupations of women or are highly dominated by women (Křížková 2009a).

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5 The average exchange rate in 2009 was 26.452 CZK per 1 EUR. In order to keep the presented tables clear and easy to read, we decided to include the equivalent amounts in Euro only in the written text.
As Křížková (2009a) outlines, in relation to nurses and primary education teachers, the above table shows that high prestige is not only related to a higher financial remuneration. At the same time, these two occupations are highly feminized and related to the stereotype of ‘natural’ female occupations where women draw on their ‘natural’ caring abilities. Nevertheless, though highly feminized, these two occupations show a rather low gender pay gap, with a difference to the male level of under 10 percentage points, while on average this gap is around 26 percentage points. This is related to the fact that both occupations are part of the public sector. A comparison of these two occupations with two other, highly feminized occupations (Helpers and cleaners with 93.2 percent women and Bookkeepers with 90.4 percent women) show, that the fact that nurses and primary education teachers are employed in the public sector has a stronger impact on the gender pay gap than prestige. While bookkeepers are found in the middle field of the prestige ranking, helpers and cleaners are found rather at the bottom. Both occupations are strongly feminized (over 90%) and have a quite comparable gender pay gap, which is still considerably higher than for nurses and primary education teachers.

Civil engineering is a typical example of a strongly male dominated occupation in the private sector: high prestige and income and at the same time a comparatively large gender wage gap. On the other hand, shop salespeople, secretaries as well as helpers and cleaners provide typical examples of strongly female dominated occupations, with very low prestige and a low average income. At the same time, both these occupations also show a high gender wage gap. According to Křížková (2009a), referring to the team of authors Tomášek and Dudová (2008) these occupations could be seen as part of the ‘secondary labour market’.

The importance of the service sector in Brno, with its high share of health and educational institutions as well as public administration, and the role of Brno

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5. The average exchange rate in 2009 was 26.452 CZK per 1 EUR. In order to keep the presented tables clear and easy to read, we decided to include the equivalent amounts in Euro only in the written text.

<table>
<thead>
<tr>
<th>Occupation</th>
<th>ISCO-88</th>
<th>Prestige</th>
<th>Share of women %</th>
<th>Average monthly income</th>
<th>Women’s income in % of men’s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse</td>
<td>3231-5</td>
<td>4.</td>
<td>97.8</td>
<td>24 509</td>
<td>92.7</td>
</tr>
<tr>
<td>Primary education teacher</td>
<td>2331</td>
<td>5.</td>
<td>85.2</td>
<td>25 175</td>
<td>98.9</td>
</tr>
<tr>
<td>Civil engineer</td>
<td>2142-5</td>
<td>7.</td>
<td>12.3</td>
<td>41 854</td>
<td>74.1</td>
</tr>
<tr>
<td>Bookkeeper</td>
<td>3433</td>
<td>14.</td>
<td>90.4</td>
<td>26 524</td>
<td>72.5</td>
</tr>
<tr>
<td>Police officer</td>
<td>5162</td>
<td>16.</td>
<td>11.6</td>
<td>26 883</td>
<td>90.2</td>
</tr>
<tr>
<td>Shop salesperson</td>
<td>5220</td>
<td>22.</td>
<td>81.4</td>
<td>15 745</td>
<td>71.5</td>
</tr>
<tr>
<td>Secretaries</td>
<td>4115</td>
<td>23.</td>
<td>88.1</td>
<td>23 260</td>
<td>78.6</td>
</tr>
<tr>
<td>Helpers and cleaners</td>
<td>9132</td>
<td>26.</td>
<td>93.2</td>
<td>11 740</td>
<td>74.3</td>
</tr>
</tbody>
</table>

Source: Křížková 2009a: 36
as an important economic centre, makes the presented occupations especially relevant for the local level.

Further data available for the Czech Republic relates to the percentiles of earnings. Table 2.19 presented below provides such data on the earnings of women and men and in relation to the gender pay gap (ČSÚ 2010c). Women's wages are lower in all percentiles; the highest gender pay gap is among the highest wages (mostly managerial positions). As far as these pay gaps are concerned, there are some differences between the public and the private sector. For example female managers are more protected against pay discrimination in public organizations where wage scales exist. Wages in the private sector are more influenced by negotiations between employee and employer. Factors such as an employee's career path also play an important role (in the sense of a career without a maternity break). Another related issue is the difficulty for women to get the same job as men in Czech Republic (Vlach et al. 2008).

Table 2.19 Percentiles and Gender Gaps of Monthly Earnings (in CZK$^7$) in the Czech Republic in 2009

<table>
<thead>
<tr>
<th>Percentiles</th>
<th>P5</th>
<th>P10</th>
<th>P25</th>
<th>P50</th>
<th>P75</th>
<th>P90</th>
<th>P95</th>
</tr>
</thead>
<tbody>
<tr>
<td>5th</td>
<td>10 927</td>
<td>12 792</td>
<td>16 793</td>
<td>22 229</td>
<td>29 538</td>
<td>40 851</td>
<td>52 817</td>
</tr>
<tr>
<td>1st decile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st quartile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>median</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd quartile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9th decile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95th percentile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>12 312</td>
<td>14 740</td>
<td>18 702</td>
<td>24 158</td>
<td>32 288</td>
<td>45 820</td>
<td>60 965</td>
</tr>
<tr>
<td>Women</td>
<td>10 220</td>
<td>11 582</td>
<td>14 695</td>
<td>19 797</td>
<td>26 124</td>
<td>34 228</td>
<td>42 179</td>
</tr>
<tr>
<td>GPG (in %)</td>
<td>17.0</td>
<td>21.4</td>
<td>21.4</td>
<td>18.1</td>
<td>19.1</td>
<td>25.3</td>
<td>30.8</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2010c

Differences in women's income level by age group are also documented (at least on the national level – ČSÚ 2010e) and show the average monthly wage of women and men in different age groups over the last eight years. While the overall gender pay gap has remained rather stable, the data clearly document differences by age groups. The highest gender gaps between the earnings of men and women are found in the age group 35–49, that is when women are most likely to care for children and men are often the single breadwinner in the family (Kozelský, Prušvic 2007). Furthermore the data reflect the increasing age of women at child birth. The gender pay gap in the age group of 30–34 years has been decreasing from 30.1% in 2002 to 23.3% in 2009 (ČSÚ 2010e).

Gender differences are also evident in the amount of pensions. This is related to the gender pay gap described before, as pensions are calculated based on former salaries. On average in 2009, women in regular retirement received 9,774 CZK per month (369 EUR), and men 11,715 CZK (443 EUR). The average early retirement pension was lower: 8,230 CZK women (311 EUR) and 9,912 CZK

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$^7$ The average exchange rate in 2009 was 26.452 CZK per 1 EUR. In order to keep the presented tables clear and easy to read, we decided to include the equivalent amounts in Euro only in the written text.
men (375 EUR). Full disability pension amounted on average to 8,985 CZK women (340 EUR) and 9,957 CZK men (376 EUR) the partial disability pension was lower: 5,675 CZK women (215 EUR) and 6,156 CZK men (233 EUR). The gender gaps in pensions correspond with data on the gender pay gaps. For old-age pensions the gap is 17%; for disability pensions 8–10% (Czech Social Security Administration, ordered data).

Hence, the income disadvantages which women suffer during their time on the labour market also continue after women retire from the labour market. The reasons for this are well known: pay differentials, labour market segregation, careers interrupted by childcare or care for older relatives, a lower age of retirement that leads to lower pensions because of the shorter time of paying contributions to the pension insurance. Women who raised children are even more disadvantaged in comparison to childless women as far as the pension level is concerned (Skopalová 2005).

**Table 2.20 Amount of Pensions and Gender Pay Gaps in Brno in 2009 (in CZK[^a])**

<table>
<thead>
<tr>
<th>Gender pension type</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>average age</td>
<td>average amount of pension</td>
</tr>
<tr>
<td>Regular retirement</td>
<td>68</td>
<td>9,774</td>
</tr>
<tr>
<td>Early retirement</td>
<td>62</td>
<td>8,230</td>
</tr>
<tr>
<td>Retirement because of disability – full</td>
<td>56</td>
<td>8,985</td>
</tr>
<tr>
<td>Retirement because of disability – partial</td>
<td>48</td>
<td>5,675</td>
</tr>
</tbody>
</table>

Source: ČSSZ 2009; Czech Social Security Administration (ordered data)

The average national regular old-age pension for women in 2009 amounted to 9,133 CZK (345 EUR), for men it was 11,175 CZK (422 EUR). That is, the gender gap on national average was higher than on urban average and amounted to 18.3% (CSSZ 2009).

### 2.4 Conclusions

In this chapter our aim was to present key data on the structural context of women’s labour market participation in Brno. In this regard we focused on the structure of educational attainment of women and men living and working in Brno. According to the presented data, we found that the Brno labour market offers above average working opportunities for women with secondary education with GCSE and for men with tertiary education. Women with secondary education without GCSE by contrast have below average working opportunities in the city of Brno.

[^a]: The average exchange rate in 2009 was 26.452 CZK per 1 EUR. In order to keep the presented tables clear and easy to read, we decided to include the equivalent amounts in Euro only in the written text.
Brno. However, overall, the Brno labour force shows similarly gendered patterns of educational attainment as can be observed in Brno and the Czech Republic in general: while women dominate in the categories pre-primary and primary, secondary with GCSE and post-secondary, men slightly prevail in the categories secondary without GCSE and tertiary education. Though these patterns appear to be rather stable throughout the last 20 years, the relevance of the particular categories has changed substantially over this time period, for both women and men. This development is closely related to the transformation process after the end of the communist regime. However, despite the fact that tertiary education gained importance especially for women, their higher educational attainment has not automatically translated into a higher income. As the presented data on horizontal and vertical/occupational labour market segregation in Brno and the Czech Republic has shown, the gendered patterns of educational attainment are closely related to female/male dominated sectors and occupations whereupon these female dominated sectors tend to show higher gender pay gaps. That is, the gender segregation of the educational system precedes the labour market segregation and at the same time – via the anticipations of possible future employment opportunities – is a reaction to the existence of a segregated labour market. This phenomenon also importantly influences the income level of men and women. Despite the fact that the census data related to horizontal labour market segregation suggest certain de-segregating tendencies for Brno, the traditionally strongest female/male dominated sectors remain stable. Moreover, balanced and mixed sectors still show a rather strong vertical/occupational segregation, which also plays a key role in the persistence of the gender pay gap (which has been traditionally high in the Czech Republic).

The first part of this book – that is chapters one and two – presented key patterns of women’s current labour market participation in the city of Brno. Based on available statistics and analysis, we aimed at examining the extent to which women work as well as map the context and basic conditions of their labour market participation. Though women’s labour market participation – first and foremost on a full-time basis – is taken for granted, the data strongly suggests that it is not on equal terms; rather, it seems to pay off less than men’s. On the one hand, as outlined mainly in Chapter two, this is related to a segregated labour market, where an important portion of women cluster in feminized sectors, which either show high gender pay gaps or generally offer lower levels of income. This pattern is closely related to the gender segregation of the Czech educational system, which leads boys and girls on different paths of education. Though the gendered pattern of educational attainment has been weakening in the last 20 years (especially when it comes to the importance of the different educational levels for women and men), it is still very clear with regards to educational content. On the other hand, as discussed in detail in Chapter one, in Brno and the Czech Republic care responsibilities and the task of reconciling them with paid employment have been an issue to be solved predominantly by women. The statistics analysed in Chapter one strongly suggest that this is a key point complicating women’s labour market participation (e.g. in Brno the risk for unemployment doubles for women with preschool children aged 3–5). This latter point of women’s reconciling care
responsibilities with gainful employment is the main focus of the second part of this publication. Chapters three and four will now analyse how family and childcare policies, as well as elderly care policies, relate to women’s labour market participation. That is, we will examine to what extent the problem observed in the data presented in Chapter one, is related to and (re)produced by these policies on the national and local city level and to what extent these policies support and/or hinder women’s labour market participation.

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Interview with labour market experts from the Brno labour office
CHAPTER 3
The Local Welfare System – Childcare for Pre-school Children

In this chapter, we take a look at the development of parental leave and childcare policies in Czechoslovakia under communist rule, present the changes after 1989 in these areas as well as the current situation, with a special focus on Brno. Additionally to the policy context, the chapter presents information on the coverage of childcare services in Brno and discusses their quality, affordability, accessibility and financing. For this purpose, we draw on available statistics and literature, on key policy documents as well as on our interviews with Brno city administration representatives, relevant to the topic. Hence, this chapter aims to provide an overview of the current situation of childcare policies and services in Brno, together with their evaluation from the point of view of their potential support for women’s participation on the labour market as well as to introduce the context for the decision making of women with pre-school children living in Brno, which will be analysed in Chapter 5.

3.1 Historical Background – The Development of Parental Leave and Childcare Policies in Czechoslovakia under Communist Rule

As previously indicated in Chapter one, in relation to the presented data on women’s labour market participation, communist era policies have importantly influenced the childcare norms and ideas prevailing in the Czech Republic today. Under communist rule, women were expected to work full-time both before and after having children, which created a system that contrasted sharply with the male-breadwinner/female housewife model, or the male breadwinner/part-time female worker model that dominated many European countries (Pfau-Effinger 2004). It even contrasted the dual-earner/dual-carer model that has become an ideal in Nordic countries, as women in most communist-ruled countries were supposed to do all the caring and fathers were not even allowed to go on parental leave. Furthermore, in contrast to the dual-earner/dual-carer model, policies encouraged mothers to stay at home for relatively long periods. The Czechoslovak communist regime introduced three-years of paid leave for mothers (e.g. Saxonberg, Hašková, Mudrák 2012).

This process was gradual, however, as the communist regime in the 1950s originally emphasized the expansion of childcare facilities rather than extensive parental leave. At that time, responsibility for nurseries was moved from the Ministry of Social Caring to the Ministry of Health, which turned the care provided in these institutions into a healthcare issue. This was also in line with why the communist regime provided nurseries. They were first and foremost a
tool to enable mothers to work in order to increase production. Hence, nurseries were not established based on pedagogical-psychological goals, rather they were supposed to work efficiently to free women from their child-care duties and allow them to work. As a result, children were grouped together in rather large groups (compared to smaller child per child-minder ratios needed to meet pedagogical-psychological goals), which was seen as more effective. In line with this logic, the child-minders were nurses who had to follow strict hygiene norms in order to keep children healthy and allow mothers to work. Despite this precaution, sickness spread more quickly in the large groups and communist-era nurseries had poor reputations on the issue of illness. Consequently, as mothers often had to stay at home with their sick children, the nurseries were not seen as an efficient tool to free them for labour market participation (Saxonberg, Hašková, Mudrák 2012).

In addition, by the early 1960s psychologists began criticizing the nurseries for children under three for creating “deprivation,” as, they argued, children became separated from their mothers too early to become “attached” to them. Moreover, some paediatricians began publicly complaining about the high rates of illness at these overcrowded facilities. Meanwhile, demographers worried over falling fertility rates and some economists argued that it was becoming increasingly difficult for the economy to keep all women employed full-time. Consequently, all of these professional groups had their reasons for promoting the idea of adding an extended maternity leave that mothers could receive after completing their original maternity leave (which then was only 3 months but later increased to 6 months). In contrast to the maternity leave, which was based on the income-replacement principle, the extended leave would pay a flat-rate in order to keep costs down. The idea was that the extended leave would enable mothers to stay at home until their children would begin attending kindergartens at the age of three. During that decade the regime setup a population commission, which also recommended introducing extended maternity leave and the regime agreed. Consequently, it began progressively increasing the period of extended leave until it paid up to three years of benefits (Saxonberg, Hašková, Mudrák 2012). Survey data indicates that by the late 1970s it had become a norm in Czechoslovakia for mothers to stay at home for three years with their children (Bulíř 1990; Kreipl et al. 1979). According to Hana Havelková (1993), women had an additional incentive to stay at home with their children instead of using nurseries, because the home provided women with an opportunity to withdraw from the public sphere, which was associated with state control and political blackmail.

These developments in leave policies had an important impact on the use of nurseries. Hence, though the percentage of children under three attending nurseries in Czech society increased significantly from 1% at the end of the 1940s to just under one fifth at the end of the 1980s, it never became a mass solution for the care of children aged 0–2 (Saxonberg, Hašková, Mudrák 2012; Bulíř 1990).

Kindergarten, as a childcare institution for children aged 3–5, in contrast, developed under the communist regime into such a mass solution. The Act on Unified Education No. 95/1948 Sb. came immediately into force in 1948 and made kindergartens an integral part of the educational system, administered by
the Ministry of Education. Kindergartens had existed in the Czech lands before, however. Unlike at the end of the 1940s, when most children attended kindergartens for half a day, beginning in the 1950s, an absolute majority of children attended kindergarten for the entire day, in accordance with their mothers working hours. The percentage of three- to five-year-olds in kindergartens increased from one fifth before the Second World War to more than 90% at the end of the 1980s (Saxonberg, Hašková, Mudrák 2012).

Hence, a national ideal of care\(^1\) (cf. Kremer 2005, 2006) gradually developed under communist rule in Czechoslovakia which supported personal full-time care by the mother until the children reached the age of 3. This ideal was backed up especially by a paediatric and psychological discourse, which emphasized the child’s need for a strong bond with the mother as a vital prerequisite of the child’s healthy development in the first 3 years. After that period of childcare, women were again expected to return to their full-time job. In line with this, the ideal of care for children aged 3–5, was institutional care in kindergarten (Saxonberg, Hašková, Mudrák 2012).

3.2 The Czech Republic and Brno after 1989

Parental leave policies

In today’s Czech Republic, since the collapse of the communist regime, the norm that mothers should stay at home for at least three years has been even strengthened, both on the policy level and in political/public discourse (cf. e.g. Hašková, Maříková, Uhde 2009). In the course of the 1990s, parental leave possibilities were extended by enabling a leave until the child reaches the age of 4. Initially, the right to receive the parental leave benefit was explicitly related to the prerequisite of personal care for the child, by restricting the use of institutional childcare for children under three to only a few hours a week. Since then, the system of parental leave has been reformed several times; however the basic guiding principle of preferring individual personal care (mostly by the mother) until the child reaches the age of 3 has remained (e.g. Saxonberg, Hašková, Mudrák 2012; Hašková, Maříková, Uhde 2009). Only recent changes point to a certain weakening of this norm.

\(^1\) An ideal of care defines who should care, where and in what way. That is, ideals of care rationalize and legitimize specific caring arrangements by comparing and contrasting them to personal care by the mother, which forms the basic point of reference. Monique Kremer (2005, 2006) identifies four ideals of care, which form alternatives to the full-time care by the mother: “parental sharing,” “intergenerational care” (ideals of informal care), “surrogate mother” and “professional care” (ideals of formal care). Different countries promote different national ideals of care. Hence, Kremer focuses on what care arrangements are seen as appropriate and acceptable when mothers are at work. These care arrangements are institutionalized and promoted in a given national context. However at the same time, Kremer (2005: 14) argues: “Ideals of care are not rigid moral rules: they can be negotiated, are diffuse and imply some form of negotiation and change.”
After 28 weeks of maternity leave, which is based on the income replacement principle (providing the mother with approximately the same or only a slightly lower level of income), there are several possibilities for parental leave (open to both parents, however in practice predominantly taken by the mother). As already mentioned, parents can receive a parental leave allowance until the child reaches the age of four. Until 2007 parents received a flat-rate (which in 2006 was 7,600 CZK\(^2\)). Then a reform allowed parents to choose three different types of parental leave. The fast track paid 11,400 CZK/month for those staying at home until the child is two years old, the basic rate paid 7,600 CZK/month for those staying at home until the child is three years old, while the slow track paid 3,800 CZK/month for those staying at home until the child is four (MPSV 2012). Hence, from an economic point of view, the 3 year option was the most advantageous. However, in 2012 a new reform was enacted, which equalized the different options for leave. Now parents are entitled to stay at home as long as they like up to four years, but they receive a total of 220,000 CZK (approx. EUR 8,800\(^3\)) for the entire period. By linking the monthly amount to the parent’s income, the extent of flexibility is limited. The monthly amount may not exceed 11,500 CZK (approx. EUR 460), hence the shortest possible period of time for drawing the parental leave allowance is until the child reaches the age of 2. In relation to that, the limitations for placing children in public caring facilities were also changed. Now, before the child reaches the age of 2 years, its placement in a childcare facility is limited to a maximum of 46 hours a month and, for children over 2, institutional childcare is no longer limited. Nevertheless, for mothers who were unemployed before their pregnancy and for low income families, the only option available is the longest (until the child reaches the age of 4) (MPSV 2012). In relation to this system of parental leave allowance, it is still important to note, that parents only have the right to return to their previous job within a 3 years period. Hence, the four year option potentially puts the parent at risk of losing the option of returning to the former job.

The maternity benefit and parental leave allowance form a two-tier system that provides compensation to mothers (parents) for their full time care of a child up to the age of four (maximum). The most central difference between these two benefits, which significantly influences the participation of women in the labour market, is the fact that, while the maternity benefit is insurance based (providing compensation calculated on the basis of the individual income), the parental allowance is a flat rate payment. Put in relation to the average monthly gross wage (which was CZK 25,803 in the 4\(^{th}\) quarter of 2010\(^4\)), the maximum rate amounts to approx. 44%, while the lower rates amount to 30% and 15%. Hence, even the maximum rate, which is only available for medium and higher income groups, means substantial financial losses for these income groups. In a context where income differences between men and women are quite common (the average gender pay gap is around 25%) and hence fathers usually have higher

\(^2\) The average exchange rate in 2006 was 28.343 CZK per 1 EUR.
\(^3\) The average exchange rate changes every year, in 2013 for example, it amounted 25.974 CZK per 1 EUR.
\(^4\) The average exchange rate in 2010 was 25.29 CZK per 1 EUR.
incomes than mothers, these flat-rate payments are potentially too low to give men financial incentives and it is mostly women who leave the labour market in order to care for their children (cf. for example Sirovátka, Saxonberg 2006a, 2006b; Saxonberg 2011, 2014). This is also confirmed by statistics on the use of the parental leave. According to data provided by the MPSV, in 2010 only 1.6% of parental allowance beneficiaries in the Czech Republic were men; the figure for Brno amounted to 1.5%.

Nevertheless, compared to the former regulation of the parental leave allowance, these new regulations provide more flexibility to parents especially as regards the drawing of the benefit and the placement of children in public childcare facilities as well as with respect to the group of people who are entitled to choose the rate of the parental allowance. Regarding the latter, however, these possibilities are potentially limited by the very limited availability of public childcare facilities for children under 3 in the Czech Republic. Hence, even if parents now theoretically have the option of placing their two year old child in a public childcare facility without losing their right to draw parental allowance, from a practical point of view, the key question is, are places in such facilities available and/or affordable. In the context of the reinforcement of a gender-conservative discourse in family policy since 1989, the support or further development of these institutions has not been a priority of the Czech government (cf. for example Hašková, Maříková, Uhde 2009; Sirovátka, Saxonberg 2006a, 2006b; Saxonberg 2011, 2014). Only recently, since facing a recent baby-boom has the government started initiatives to support the creation and development of alternative (private, profit based) childcare facilities in order to fill this gap (cf. the following sections on the development of childcare policies).

**Childcare policies – public nurseries for the age group 0–2**

Thus current policies related to institutional childcare clearly mirror the ideal of personal care by the mother until the child reaches the age of three. The increase in the parental leave period went hand in hand with a decline in public support for nurseries providing childcare for children up to three years of age. After the fall of the communist regime in 1989 the main responsibility for running the nurseries moved from the Ministry of Health to local governments, although the Ministry continued to be the official overseer and regulator of these facilities. Consequently, nurseries are financed exclusively from the municipality’s budget. In contrast to kindergartens, they do not receive any subsidies from the state budget and no legal obligation exists which would compel municipalities to establish nurseries. Hence, municipalities decide whether to establish nurseries or not and what the fees are for children attending nurseries (Štěpánková, Jaklová 2006; Svobodová 2007; Interview No. 12). Contrary to many European countries, including post-socialist countries like Hungary, Czech municipalities have no possibility of raising their own income, for example, by introducing various types of taxes; instead, their income comes from the national budget. This means that if a municipality wanted to start a new nursery it would have to take money away from some other activity (Saxonberg 2014). Due to the increase in fees and
a decrease in demand for these services, almost all the facilities were closed down in the course of the 1990s.

The “National Conception for the Support of Families with Children” (MPSV 2009), which outlines the family policy strategy of the Czech government, shows that the provision of public childcare services for children less than three years is not a current government priority. Rather, with reference to paediatricians and child psychologists, the document emphasises parental care up to the age of 3 as the best and most preferable way to provide “high quality” care. Hence, the document argues against governmental support for the provision of public care services for children under three. Instead the government focuses only on removing legal and other barriers which hinder the development of individual forms of private (profit based) childcare services for children under 3. The provision of public institutional childcare services is only supported for children over three years (by increasing kindergarten capacities) (MPSV 2009). In the following, we will exemplify the described developments based on the case of Brno.

When public nurseries were privatized in Brno after the fall of the communist regime, the city of Brno took over a total of 18 nurseries. Based on the capacity utilization at that time, the municipal government decided to keep only 5 of them as a kind of social service especially for single mothers and low income families. In 1997 and 1998 two further nurseries were closed because of a lack of demand for these services (Svobodová 2007). The local policymakers point out that besides the high costs, the increase in the period of parental leave benefits and falling birth rates, another reason for the drop in demand for public nurseries was the negative public perception of the childcare services provided there (in the sense of communist left-overs, and memories related to overcrowded nurseries, where children very often fell sick). Our interviewees note, though, that today the nurseries in Brno have improved considerably compared to the communist era. First, they are not as overcrowded as they were for example in the 1980s and the staff has pedagogical training. Second, they are much more open towards parents and aim to actively integrate them (e.g. by organizing afternoons with the parents, lectures and little celebrations, during which parents are able to get to know the facility and the staff) (Interviews No. 9 and 12).

Currently, the Brno municipal government runs 3 nurseries, with a total capacity of 110 children. Though this capacity does not even cover 1% of the children aged 0–3 in the city of Brno, in the Czech context the mere existence of such facilities is positive (see Table 3.1 for a list of the development of nurseries).

The 3 public nurseries available in Brno offer care from 6:30 a.m. to 5 p.m. (that is max. 10.5 hours a day and hence 52.5 hours a week)\(^5\). There is also the possibility of placing children there for shorter periods. This form of part-time care was rather widespread, as until December 2011 the central prerequisite for the entitlement to the parental leave allowance was personal full-time care for the child. In detail that meant that the time a child could spend in a public childcare facility was limited to either 5 days a month (children up to the age of 3) or 4 hours a day / max. 5 days a month (for children over 3). Hence, parents often placed

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\(^5\) Calculations based on the timetable provided online for the Brno nurseries: http://www.cdozs.cz
their children in these facilities only for a view days a month or a few hours a day, in order to meet these prerequisites and to keep the parental leave allowance. With the reform of the parental leave described earlier, these limitations changed for children under 2 years to 46 hours a month and were abolished for children over 2 years of age. This will probably lead to a further increase in the demand for full-time services. According to the interviews with the persons in charge at the Brno municipality and the Centre for Specialized Children's Health Services, such an increase has already been observed, after the fast track parental leave benefit (until the child's second birthday) was introduced in 2008. As a consequence, the demand for full-time care in the nurseries increased. Also, in 2011, the 3 nurseries in Brno experienced a demand for nursery services that exceeded the available capacities for the first time, which is – according to our interviewees on this topic – also related to a recent baby boom.

Table 3.1 The Development of Nurseries in Brno

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>Capacity</th>
<th>Children 0–3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
<td>50</td>
<td>2747*</td>
<td>17 952</td>
</tr>
<tr>
<td>1995</td>
<td>33</td>
<td>1079</td>
<td>14 639</td>
</tr>
<tr>
<td>1996</td>
<td>5</td>
<td>245</td>
<td>13 526</td>
</tr>
<tr>
<td>2000</td>
<td>3</td>
<td>90</td>
<td>11 917</td>
</tr>
<tr>
<td>2001</td>
<td>3</td>
<td>90</td>
<td>11 840</td>
</tr>
<tr>
<td>2002</td>
<td>3</td>
<td>100</td>
<td>12 308</td>
</tr>
<tr>
<td>2003</td>
<td>3</td>
<td>110</td>
<td>12 743</td>
</tr>
<tr>
<td>2004</td>
<td>3</td>
<td>110</td>
<td>13 313</td>
</tr>
</tbody>
</table>

* Including children up to the age of 3 placed in “micro-nurseries” and nurseries at kindergartens.


In our interviews, the persons in charge at the Brno municipality and the Centre for Specialized Children's Health Services claimed these three nursery facilities mainly support the reconciliation of work and caring responsibilities for women with university degrees. Consequently, their target group has changed from single women and families with low incomes, who could not afford to have the mother stay at home for three years, to professional, career oriented women. Now, as predominantly high income groups use the nurseries, the municipality recently raised the nursery fees and abolished the means-tested differentiation of fees. This new fee-level is prohibitive for low-income mothers. Due to financial reasons, there are no plans to expand the nurseries’ capacities. At the same time, our interviewees at the local Brno-level perceived the capacities as adequate and saw no need for enlarging them.

In April 2012, the legal definition of a nursery as a health care institution, administered by the ministry of health, was abolished (that is, the traditional
Czech name for this institution [jesle] was abolished). The existing publicly subsidized institutions – as the 3 nurseries in Brno – had the choice to continue either as commercial services (based on the trade act, which will be explained below) or in the legal framework of “child groups”. These changes were related to the preparation of a bill (starting in 2011), which aims to improve the offer of childcare services. This bill newly introduces the legal institute of a “child group” for the regular care of children up to the mandatory school age (without differentiating children aged 0–2 and 3–5), outlines the necessary qualifications for a care provider and defines basic standards in relation to group size, child-carer ratio, space requirements, etc. It can be established within the framework of the trade act, as well as by non-profit subjects, municipalities, regions, employers, etc. That is, the bill aims at fundamentally broadening the group of potential founders of facilities providing childcare services alternative to those provided by public facilities. Furthermore, it includes the possibility of tax reductions for childcare costs both for parents who use private childcare services, and for employers who establish child groups for the children of their employees or contribute to their childcare costs (Návrh 2011). After long discussions and several changes, the government finally agreed on the bill in spring 2013. However, it did not pass the parliament before the governmental crisis in June/July 2013, which lead to early elections and currently it is not clear whether the bill will pass the new parliament. Nevertheless, anticipating these legal changes, the 3 nurseries which currently exist in Brno have been renamed and are now called “Facility for the care of children in a child group” (cz: Zařízení péče o dítě v dětské skupině). However, as this bill was not approved, these institutions (as well as institutions that were also newly established in anticipation of the bill) will continue to work in a legislative vacuum.

**Childcare policies – public kindergartens for the age group 3–5**

While the existence of public childcare services for children aged 0–2 was basically questioned in public and political discourse after 1989, the usefulness of kindergartens and the provision of public childcare for children aged 3–5 in this institution was never doubted (Saxonberg, Hašková, Mudrák 2012). Though kindergarten facilities were also closed down in the course of the 1990s, this was mainly related to demographic developments (a decrease in birth rates) and never interpreted or presented as overcoming an outdated form of institutional childcare. Hence, the ideal of care for children aged 3–5, in the form of public kindergarten services, remained intact after the fall of the communist regime and throughout the following years.

Public kindergartens can be established by the state, municipalities, regions, and associations of municipalities or other legal persons. They are part of the Czech educational system and are open for preschool children over three (and, if space exists, are allowed to accept children over two). They are part of the Czech school register and are legislated according to Educational Act No. 561/2004 Coll. and hence, provide services including educational or schooling services according to the Education Act (MPSV 2011; Štěpánková, Jaklová 2006). It is not mandatory
to attend kindergarten in the Czech Republic. According to the Education Act §34 (4) of Act No. 561/2004 Coll., kindergartens must give preference to children the last year before they start school. In case such a child cannot be accepted for capacity reasons, the municipality (where the child has his/her permanent residence) is obliged to provide a place for the child in another kindergarten. Attending kindergarten in this last year before the child reaches the mandatory school age is free of charge. (Štěpánková, Jaklová 2006; Interview No. 4)

According to the interview with the head of the Pedagogical Organizational Department at the Division of Education, Youth and Sports at the Brno municipality (Interview No. 4), Brno aims at guaranteeing kindergarten places not only for children in their last year before they start school (that is usually at the age of 5) as defined by law, but also for children at the age of four. According to the document “The Expansion of the Kindergarten-System in the City of Brno until 2012 – Basic and innovative Forms of Education and Care for children of pre-school age” (OŠMT 2010) the kindergarten capacities in Brno aim at a full coverage of children aged 4–5 (based on demographic information as well as information on the establishment of new housing) and a coverage of approx. 50% for children at the age of 3 (based on earlier experiences).

Hence the provision of kindergarten facilities in the city of Brno goes beyond the legislative obligation and is presented as part of the city’s concern for family policy, providing services for a reconciliation of work and family life. Though these initiatives are not directly presented in the sense of supporting the participation of women on the labour market, but rather framed as family policy concerns, they definitely have positive effects on women's possibilities of reconciling work and caring responsibilities in Brno. At the same time however, the provided capacities assume non-institutional childcare for children up to the age of three and for 50% of the children even up to the age of four. Hence, to this extent, reconciling work and caring responsibilities in order to achieve an earlier return to the labour market is left to private for-profit or NGO initiatives. Furthermore, the strategic documents for the further development of kindergarten places react first and foremost to the recent baby boom and aim at keeping the status quo of kindergarten coverage, rather than improving the coverage with respect to improving the possibilities for parents to reconcile their work and family life.

The criteria for accepting children in kindergartens are defined by its headmaster (often in coordination with the kindergarten’s operator), hence, these criteria vary locally. According to a survey⁶ of kindergarten headmasters conducted in 2006/2007 (Kuchařová 2009), 87% of the surveyed kindergartens had at least one selection criteria for the children they accepted. More than half of them (55%) used a combination of 4–6 criteria. Among the most important were the permanent residence and the age of the child. Further criteria included the following: whether both parents work, whether the mother/father is a single parent, the planned attendance time (full-time or half-time), whether the child’s

⁶ Within this survey every second kindergarten of every district was selected from a database of public kindergartens provided by the Institute for Information on Education. 96% of these kindergartens were contacted, of which 26% returned the questionnaire (650 Kindergartens) (Kuchařová 2009).
brother/sister is already enrolled, whether the family is socially deprived and so on. However, many of the respondents also indicated that, in case of a lack of capacity, the applications are evaluated individually. In the city of Brno, the basic criteria for accepting children in public kindergartens are the age of the child and its permanent residence. The fact that the mother works does not play a role in Brno and in the interview with the Head of the Pedagogical Organizational Department at the Division for Education, Youth and Sports at the Brno municipality, this approach was presented as being more transparent, and less vulnerable to abuse (Interview No. 4).

Apart from public nurseries and for-profit services for children aged 0–2, kindergartens – which are designed for children aged 3–5 – are allowed to accept children between two and three years old. It is interesting that for children at the age of two, this possibility is far more important than nurseries, as the following figures show: as of September 30, 2010, 33,040 children under 3 were enrolled in kindergartens in the Czech Republic. This amounts to 9.3% of the children in the age group 0–2 and 27.4% of the children aged 2. This relation makes sense, as children under 3 can only be accepted in kindergartens if they are at least two years old)\(^7\). However, as outlined by Kuchařová (2009), though kindergartens accept children already at the age of 2, not all of the facilities allow them to actually start attending the facility at the beginning of the school year. Rather, in one third of the kindergartens surveyed\(^8\), these children were able to start with kindergarten only in the course of the year, after they had turned 3. For the age group 3–5, kindergartens offering pre-school education have a long tradition in the Czech Republic and are the most important facility providing formal care – 84.2% of children in this age group attend these facilities. It becomes even more important for children in their last year before they start going to school: at the age of 5, 91.2% of children are enrolled in kindergartens\(^9\).

In Brno these kindergarten facilities play a similarly important role as on the national level, but also show specific tendencies as far as their importance in

\(^7\) These figures are our own calculations based on data provided by the ÚIV on children enrolled in kindergartens http://stistko.uiv.cz/vo/1A.asp?pokres=left%28vusc%2C3%29%3D%27CZ0%27&ptyp=left%28typ%2C1%29%3D%27A%27&psprur=&agr=3 as well as by the Czech statistical office on the age structure of the population (http://www.czso.cz/csu/2011edicniplan.nsf/p/4003-11). The figures on children enrolled in kindergarten as of September 30, 2010, are based on kindergarten records. For calculating the percentage figures we used the population figures as of December 31, 2010 (which are also available for the local Brno-level). The three months difference in the statistical data used potentially leads to lower percentage figures.

\(^8\) Within this survey every second kindergarten of every district was selected from a database of public kindergartens provided by the Institute for Information on Education. 96% of these kindergartens were contacted, of which 26% returned the questionnaire (650 Kindergartens) (Kuchařová 2009).

\(^9\) These figures are our own calculations based on data provided by the ÚIV on children enrolled in kindergartens http://stistko.uiv.cz/vo/1A.asp?pokres=left%28vusc%2C3%29%3D%27CZ0%27&ptyp=left%28typ%2C1%29%3D%27A%27&psprur=&agr=3 as well as by the Czech statistical office on the age structure of the population (http://www.czso.cz/csu/2011edicniplan.nsf/p/4003-11). The figures on children enrolled in kindergarten are as of September 30, 2010, based on kindergarten records. For calculating the percentage figures we used the population figures as of December 31, 2010 (which are also available for the local Brno-level). The three months difference in the statistical data used potentially leads to lower percentage figures.
the various age groups are concerned: In Brno, the number of children under age 3 enrolled in kindergartens is lower than on the national level – 5.3% of the children aged 0–2 (compared to 9.3% on the national level) and 16.3% of children at the age of 2 (compared to 27.4% on the national level) are attending kindergarten. What is striking here is the fact that the percentage of two years olds enrolled in kindergartens is, on the local Brno-level in comparison to the national average, more than 10 percentage points lower. One possible explanation for this, is the more extensive use of kindergartens for children aged 3–5 on the local level, which leaves less space for the enrolment of children under 3 (older children, especially children in the last year before mandatory school age are preferably accepted in kindergartens). This explanation is supported by statistics provided for children in the age group of 3–5: In Brno 87.5% of children in the age group 3–5 attend kindergarten (on national average only 84.2%) and in the group of children aged 5, it increases to 94.5% (compared to 91.2% on the national level). However, a comparison of the enrolment in kindergartens of children in the age group 2-5 on the national and local Brno-level also shows that this overall enrolment is slightly lower on the Brno-level (42.6%) than on the national level (45%). One possible interpretation of this difference is that the kindergarten capacities offered at the local Brno level are lower than those offered on national average. This is rather surprising, as the Brno municipality claims to guarantee a kindergarten place not only for the last year before the child starts with compulsory school education, but actually for the last two years, that is, also for children at the age of four\textsuperscript{10}.

In the Czech Republic and Brno, kindergartens are predominantly offered on a full-time basis: In the year 2010 in the Czech Republic, 97% of the children enrolled in kindergartens attended on a full time basis. In Brno this percentage was even higher and amounted to 98.7\textsuperscript{11}. According to the educational act, in the Czech Republic full-time kindergarten care means more than 6.5 hours a day, that is 32.5 hours a week. Only a small minority of children attend kindergarten on part-time basis, that is less than 6.5 hours a day. For the Czech Republic and for Brno this number amounts to 0.9% of the children enrolled in kindergartens.

\textsuperscript{10} The indicated figures are our own calculations based on data provided by the ÚIV on children enrolled in kindergartens in the city of Brno http://stistko.uiv.cz/vo/1A.asp?pokres=vusc%3D%27 CZ0622%27&amp;priz=1&amp;typ=left%28typ%2C1%29%3D%27A%27&amp;psprur=&amp;agr=3 as well as by the Czech statistical office on the age structure of the population (http://www.czso.cz/cs/2011edicniplan.nsf/p/4003-11). The figures on children enrolled in kindergarten are as of September 30, 2010, based on kindergarten records. For calculating the percentage figures we used the population figures as of December 31, 2010 (which are also available for the local Brno-level). The three months difference in the statistical data used potentially leads to lower percentage figures.

\textsuperscript{11} The indicated figures are our own calculations based on data provided by the ÚIV on the attendance time of children enrolled in kindergartens in the Czech Republic http://stistko.uiv.cz/vo/41.asp?pokres=left%28vusc%2C3%29%3D%27CZ0%27&amp;priz=1&amp;typ=1&amp;psprur=&amp;agr=3 and on the Brno city level http://stistko.uiv.cz/vo/41.asp?pokres=vusc%3D%27CZ0622%27&amp;priz=1&amp;typ=1&amp;psprur=&amp;agr=3 as well as by the Czech statistical office on the age structure of the population (http://www.czso.cz/cs/2011edicniplan.nsf/p/4003-11). For calculating the percentage figures we used the population figures as of December 31, 2010 (which are also available for the local Brno-level). The three months difference in the statistical data used potentially leads to lower percentage figures.
Finally, there is a third possibility, that is, enrolment in accordance with the (former) prerequisites for the parental allowance, meaning 4 hours a day or 5 days a month. In 2010, in the whole Czech Republic, 2.1% of children enrolled in kindergartens attended in this limited form, for the local Brno-level, this amounted to only 0.4%\textsuperscript{12}.

One of the reasons why these limited services are not widespread in the Czech Republic is the fact that these arrangements are not very popular with kindergartens for financial reasons. If the children attend the kindergarten only on this limited basis, the governmental subsidies the kindergarten obtains for this child are cut back (according to the attendance hours), which might lead to financial problems in the kindergarten (Kuchařová 2009). Furthermore, in the case these children are under 3 (which is quite probable for this group of children, as the parental allowance is paid at maximum until the child reaches the age of 4), this might also mean that the total number of children in the group has to be reduced, which leads to further financial losses for the kindergarten facility (Interview. no. 4). For these reasons some kindergarten facilities refuse to accept children with limited attendance. In this respect it is especially unpopular to accept children for only 5 days a month, as these children have more problems adapting to the kindergarten environment (Kuchařová 2009).

**Childcare policies – Private childcare facilities**

In addition to the outlined public possibilities, in the Czech Republic a rather limited range of private facilities exist which provide childcare services for children 0–5 on a commercial basis (either at the child’s home or in a specific childcare facility). From a legal point of view, currently this is done within the framework of three types of trades related to childcare, which are regulated according to the trade act. The bill related to the “child group” described before, which has not yet passed the parliament, is/was meant to broaden these possibilities.

The first possibility is “Babysitting children up to three years of age by a non-parent” (regulated according to Act No. 455/1991 Coll., trade act). It is designed as a licensed trade, requiring a specific training. Traditionally, the educational and qualification requirements for this licenced trade were characterized by a certain rooting in health care (similar to the definition of nurseries as health care facilities) rather than for example in early child pedagogy. Hence, they had to be operated by a person who is specially qualified to carry out the profession of a general nurse or is qualified to carry out the profession of a healthcare assistant, a male nurse, a midwife or a paramedic according to Act no. 96/2004 Coll. governing

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\textsuperscript{12} The indicated figures are our own calculations based on data provided by the ÚIV on the attendance time of children enrolled in kindergartens in the Czech Republic http://stistko.uiv.cz/vo/41.asp?pokres=k%28vusc%29%29%3D%27CZ0%27&psz&ptyp=psprü=agr=3 and on the Brno city level http://stistko.uiv.cz/vo/41.asp?pokres=vusc%3D%27CZ0622%27&psz&ptyp=psprü=agr=3 as well as by the Czech statistical office on the age structure of the population (http://www.czso.cz/csu/2011edicniplan.nsf/p/4003-11). For calculating the percentage figures we used the population figures as of December 31, 2010 (which are also available for the local Brno-level). The three months difference in the statistical data used potentially leads to lower percentage figures.
non-physician healthcare professions, or a person who is qualified to carry out the profession of a social worker or a social services worker in accordance with Act no. 108/2006 Coll. on Social Services (MPSV 2011). Recent changes in the law (as of June 30th, 2012) widened these requirements to include persons who are qualified to carry out the profession of a social worker or a social services worker in accordance with Act no. 108/2006 Coll. on Social Services, as well as kindergarten teachers (based on Act no. 563/2004 Coll.) and nannies (based on Act no. 179/2006 Coll.).

Decree No. 278/2008 Coll. outlines the content of this trade as educational care for children up to 3 years of age: This kind of care should aim at the development of the child's intellectual and language abilities, movement, working, music, and art abilities as well as the cultural hygienic habits adequate for the child's age. Furthermore, it requires the care for the safety and health of the child, access to fresh air, and sleep in an adequate hygienic environment as well as the securing of the child's personal hygiene, including first aid.

Commercial care services for children over the age of 3 can be provided based on two unlicensed trades, the content of which is again outlined in the Decree no. 278/2008 Coll. governing the contents of individual trades: These are trade no. 72 – “Out of school training and education and the organization of courses and trainings, including lecturing activities” and trade no. 79, defined as “Provision of services for families and households”. While the former (among others) refers to the provision of pre-school education for children over age 3 in facilities which are not registered in the school register, the latter includes the provision for the operation of a household, care of children, care of persons in need of increased care and procurement activities. In this respect, it refers to child minders (among others) who provide care in the child's home. Trade no. 79 explicitly excludes the care for children younger than 3 years on a daily basis (MPSV 2011). Contrary to the licensed trade (providing childcare services for children under 3), for these two unlicensed trades, the law does not outline special requirements as regards the qualification of persons performing this trade.

These private facilities are not registered with the ministry of education, youth and sports (as are public kindergartens) and hence do not get state subsidies for their provision of care. They are also not bound by the Education Act in their provision of services.

Nevertheless, in case the care is provided outside the child's home, in a childcare facility, both the licensed trade related to children up to the age of 3 and the unlicensed trade for children over three, have to comply with § 7 of the act No. 258/2000, Coll. on the protection of public health. That is, these facilities have to fulfil the same hygienic standards as schools and school facilities, related to space requirements, equipment, operation, light, heating, microclimatic conditions, water supply, clearance, and the laundry. Apart from that, this paragraph mentions the child's daily regime, which has to take into account the child's specific characteristics and gives advice for the prevention of infectious diseases.

These regulations fundamentally influence the provision of non-public childcare services. For the person operating childcare facilities these regulations
require rather high investments into the facility, which is not only an important barrier for opening up such facilities, but also fundamentally influences the price of the services. Moreover, the legislation related to the commercial provision of childcare only outlines certain prerequisites which must be met in order to be able to start providing childcare services (educational requirements, standards related to the facility, etc.); however, it does not regulate how the care actually should be provided – for example in the sense of basic standards outlining the maximum number of children allowed in a group, a maximum staff/child ratio, space requirements related to group size, etc. This bears potential problems for the founder of such facilities (as for them it is unclear what kind of criteria they have to fulfil). Additionally, it complicates the situation for parents, as there are no basic quality standards they might fall back upon. Hence they do not know what they can expect from these services (Návrh 2011).

Even worse is the situation related to services, which are neither regulated by the trade act, nor fulfil the criteria for school facilities (in the sense of public kindergartens) – for example various forms of childcare services provided on a non-profit basis (e.g. day care services provided by companies for their employees, by non-profit organizations). Currently, in the Czech Republic, no legal framework regulating such services exists. So these services have no legal grounds to support them. Again this hinders the provision of alternative childcare services (Návrh 2011). As mentioned before, the bill on child groups, which should have contributed to solving these problems, has not yet passed the parliament.

Regarding the provision of private profit based childcare services (based on the trade act), no official statistics exist. Kuchařová (2009) draws on information from a commercial database and indicates for the year 2008 for the whole Czech Republic 93 economic subjects, working on the basis of the licensed trade, that is, providing services for children under 3 years of age. These subjects are mostly concentrated in larger cities (50 in Prague, 6 in Brno) as there the demand for such services is higher than in rural areas. It is hard to gain information on the capacities of these firms. According to the findings presented in Kuchařová’s (2009) study (gained through interviews with selected providers), in the case that they provide caring services outside the child’s home, the capacity of these facilities is usually limited to 12–15 children. Based on the data from 2008, this would mean a maximum capacity of 90 places offered in such commercial facilities in Brno (provided, that all these subjects provide care in groups, outside the child’s home).

The documentation related to the new bill on child groups and childminders (discussed above) gives a much higher number for the whole Czech Republic, regarding the licensed trade “Babysitting children up to three years of age by a non-parent”. According to information provided by the Ministry of Trade, by the end of March 2011, 633 of these licensed trades were registered (Návrh 2011). The question is however, how many of them were active and in fact provided childcare services.

As far as the local Brno level is concerned, for the FLOWS project we bought data from the same commercial database referred to by Kuchařová (2009). According to these data, in January 2012, 31 persons had registered trade licenses
for childcare for children aged 0–2, having their place of business in Brno. Out of this group, 7 had currently interrupted their business activities. For 15 out of the 24, we found information on the internet. According to this information, 10 provide childcare services, mostly in small facilities with a capacity of 9–15 children, with an average of 12 children. Hence, all in all, these facilities provide a capacity of 120–130 children. 3 subjects are agencies which act as agents for child minders, and two subjects provide personal, individual childcare. Based on these (very vague) estimations for commercial services, the total capacities of commercial and public childcare facilities for children aged 0–2 in Brno amounts to 230–240 places (that is, approx. 1.8% of children aged 0–2 living in Brno).

We have no meaningful data available on the provision of childcare services based on the two free trades outlined above. For these cases, it is not even helpful to search the commercial database from which we gained data on the provision of childcare services of children up to the age of 3. The problem is related to the fact that both free trades are not only related to childcare services, but also potentially include the provision of other services. The only estimation we have available comes from the head of the Pedagogical Organizational Department at the Division for Education, Youth and Sports at the Brno municipality. According to her estimation, in the city of Brno approximately 30 facilities exist which use the label “kindergarten”, but are not registered in the schooling register. The overall capacity of these facilities amounts to approx. 1000 places.

Additionally, these two trades also provide the possibility of acting as agents for child minders. An internet search (January 2012) for such agencies operating and offering their services in Brno found 7 such agencies. It is, however, hard to tell how many child minders these agencies have at their disposal and to what extent they are used by parents.

Since the start of discussion on the bill regarding “child groups” there has been an increased number of NGO projects (based on financing by the ESF) which anticipate the legal changes and focus on the provision of childcare for children under three. Currently it remains unclear what kind of legal framework will be established for this form of childcare.

The Brno welfare mix of childcare services

Based on the data outlined above it is now possible to sum up and comment on the welfare mix of childcare services in Brno, that is, the extent to which childcare is provided in the form of private and public services. In the Czech Republic and in Brno accordingly, the relation of public and private childcare services differs for the age groups 0–2 and 3–5. Based on data from the year 2010 and the estimations above, approx. 240 places for children aged 0–2 were provided in Brno (however not including services run by NGOs). Out of these, 110, that is 45.8%, were provided in the 3 nurseries subsidized by the city of Brno, and approx. 120–130, that is 54.2%, in private, profit oriented facilities. For children in the age group 3–5, all in all approximately 10,400 places were provided. Here, the large majority of 9,394 places (90.4%) was provided in public kindergartens and the rest (approx. 1000 places, that is 9.6%) in private facilities (which are not
registered in the school register). Apart from the shares of public and private facilities, childcare services offered for the two age groups differ importantly in their coverage. While the places provided for children aged 0–2 cover only approx. 2% of children in the respective age group living in Brno (as of December 31st, 2010), 95.8% of the children in the age group 3–5 attend a public or private kindergarten.

This mix of services, which is proposed and supported in key policy documents related to childcare on the Brno city level, is inspired by and corresponds with the framework presented in the national conception for family policy (MPSV 2009). With respect to the development of childcare facilities for children aged 0–3, the national family policy strategy promotes (through indirect measures like reducing legal and bureaucratic barriers) the development of private (commercial) offers, which provide care for pre-school children aged 0–2 in small scale facilities, which allow more individual care for the children. The expansion of public, institutional facilities for children in this age group is explicitly not a target of this conception. Rather, in this respect, the focus is put on the sufficient provision of kindergarten facilities, which, as also emphasised in the national family policy conception, is the responsibility of local municipalities (MPSV 2009).

In the context of Brno city policies, the provision of childcare services is dealt with in the context of the family policy conception and as a matter of providing pre-school education (in the framework of the kindergarten system). The Conception for Family Policies of the City of Brno mentions nurseries (for children under three) together with kindergartens (for children over three) in the section “Services for Children”, in relation to the goal of “sufficiency and variability of institutional and non-institutional care for children of all age groups” (Poradní Sbor RMB pro rodinu / OZ MMB 2008). However, there are no strategic documents at the municipal level which explicitly deal with the nurseries or their further development. Rather, in our interviews, the capacities of the three nurseries were presented as sufficient to meet the demand of the target group (professional, career oriented women). The further development of the kindergarten system is in contrast dealt with in two strategic documents: “The general education system in the City of Brno and its development trends until 2013” (OŠMT 2011) and in more detail “The Expansion of the Kindergarten-System in the City of Brno until 2012 – Basic and Innovative Forms of Education and Care for Children of Pre-school Age” (OŠMT 2010). Regarding these two documents, it is also important to note that they first and foremost react to a recent baby boom, which led to a lack of capacity in kindergartens in Brno. In this respect they aim at maintaining the status quo. Improving the conditions for reconciling work and family life for parents in Brno is not their primary concern.

Thus, we can now conclude that the Brno municipality promotes a local ideal of care that basically remains within the framework of the national ideal of care, in which parents should provide full-time care for children until the age of three. The only exception to that was the decision to keep three nurseries. However, these institutions are seen as meeting the needs of a very specific and rather small group of women that, for professional and career reasons, chose an early return to the labour market. Hence, these childcare services are not promoted as
a mainstream option. On the other hand, the city government would not have the financial resources to provide them as a mainstream option. In this sense, the approach to providing childcare services remains within the framework outlined in the national family policy conception. Consequently, it has not been a priority policy issue in Brno to make it easier for mothers in general to return to the labour market before their child reaches the age of three.

3.3 Quality, Affordability, Accessibility and Financing of Childcare Services in Brno

Quality

Regarding the quality of childcare services, in the following we focus on group size, child-staff ratio as well as required staff qualifications for both public and commercial services.

After 1989, the Czech Ministry of Health did not issue any regulation outlining a compulsory maximum staff-child ratio for nurseries. At the same time, however, the methodological instruction on nurseries issued in 1968 was never abolished. These instructions regulated the operation of the nursery as well as its employees and their tasks. Despite the fact that this instruction exactly regulated the necessary presence of a doctor in the nursery, it did not include information on the number of nurses needed for assuring the care services (Svobodová 2007).

In the 3 Brno nurseries, enrolled children are divided into two groups according to age, one for the younger (the nurseries accept children aged 1–3), and one for the older. In case of full capacities, in the group for younger toddlers, the staff-child ratio is 5 children to one nurse and in the group for older toddlers, the staff-child ratio is 5–7 children to one nurse (Svobodová 2007). These standards are also in accordance with the bill on “child groups” (cf. the information presented below).

The requested education for childcare staff working in a public nursery before April 2012, when it was defined as a health care institution, was either a university degree in nursing or specific further training as a child nurse (including pedagogy and psychology) or a general nurse with a specialization in pediatrics, after obtaining the general certificate of secondary education at a health care school (Svobodová 2007). In Brno, each of the three nurseries is managed by a head nurse, who is a specialized child nurse and who also completed specialized training in “Educational care” after obtaining her general certificate of secondary education. The other employees are either child nurses (the study program for child nurses includes also pedagogy and psychology) or general nurses, who completed special further trainings in pedagogy and psychology (Svobodová 2007).

The reform related to the provision of childcare services, which had been in development since 2011 (and which was stopped due to the governmental crises in June/July 2013) aimed at introducing “child groups”, which, for the first
time, also regulated staff-child ratios for different age groups. The following three
groups were differentiated (Návrh 2011):

- **Child group (large):** for 13–24 children (in case of the presence of children
  under 2, for 13–18 children) cared for by at least 3 caring persons (that is
  the maximum staff-child ratio is 6–8 children, depending on age, for one
caring person).

- **Child group (medium):** for 5–12 children (in case of the presence of
  children under 2, for 5–10 children) cared for by at least 2 caring persons
  (that is the maximum staff-child ratio is 5–6 children, depending on age,
  for one caring person).

- **Child group (small):** for maximum 4 children, cared for by one person.

The bill also proposes important changes on the educational level and the
qualifications required for the provision of care in child groups. It harmonizes
the requirements for the care of children aged 0–5 and widens the group of those
persons, who are allowed to provide care for children under 3. Thus, it abolishes
the dominant focus on health care education and also includes people who gained
their qualifications through requalification and specific life-long learning courses
(Návrh 2011). As discussed earlier, it is not clear whether the new government
will continue with these reforms or change the bill.

The group size for kindergartens is regulated in § 2 of regulation No. 14/2005
on preschool education. A kindergarten with one class has at least 15 children
and a kindergarten with two or more classes has at least 18 children in one class
(on average). In the case that there is only one kindergarten with one class in the
municipality, the minimum number of children in one class is 13, in the case of
two or more classes it is 16. The maximum number of children in one class is 24;
in the case of the presence of disabled children, the maximum number is 19 (the
minimum 12). According to § 23 of the act No. 561/2004 (Education Act), the
founder of the kindergarten exceed these limits by a maximum of 4 children. That
is, at most 28 children are allowed in one class with one teacher.

In case of outdoor activities, § 5 of the regulation No. 14/2005 on preschool
education sets the maximum staff-child ratio at one kindergarten teacher for 20
children. In case of a class with disabled children, the maximum is 12 children
for one teacher. For these cases, the headmaster of the kindergarten may grant
exceptions for up to 8 children.

In the city of Brno, all in all in the year 2010, 11,028 children were enrolled
in 432 kindergarten-classes. These children were taught by 898.3 teachers (full-
time equivalents). Based on these numbers, the average number of children per
class in Brno is 25.5 children and the average number of children per teacher is
12.3, that is, on average two teachers per class.13 These two teachers however very
often alternate in the sense of one working in the morning and the other in the
afternoon (Saxonberg, Hašková, Mudrák 2012). Or their simultaneous presence

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13 The presented figures are our own calculations based on the total number of kindergarten
classes and children in Brno (http://stistko.uiv.cz/vo/41.asp?pokres=vusc%3D%27CZ0622%27&pz
riz=&ptyp=&pssprur=&aagr=1) as well as on teachers (http://stistko.uiv.cz/vo/1B.asp?pokres=vusc%3D%27CZ0622%27&pzriz=&ptyp=&pssprur=&aagr=1) as provided by the Institute for Information
on Education (ÚIV) based on Kindergarten records.
is limited to specific times of the day (it is common to have outdoor activities in the morning, which, by law, require the presence of two teachers for a group of over 20 children).

According to Act No. 563/2004, as amended, a kindergarten teacher requires either a university education in the field of pedagogy, with a focus on preschool pedagogy, or specific further training focused on the training of preschool teachers after obtaining the general certificate of secondary education, a general certificate of secondary education from a secondary school focused on the training of preschool teachers.

As far as commercial services are concerned, according to the trade act, the licensed trade “Babysitting children up to three years of age by a non-parent” requires the specific training outlined above. For persons who wish to operate day care services for children older than 3 years (based on one of the free trades outlined above), no specific qualifications are required.

As discussed above, one of the main problems of private childcare services is the absence of basic quality standards as far as group size, staff-child ratio, etc. are concerned. Currently, no such standards are available and our search for such facilities on the internet showed, that indeed, the range of the provided caring services is wide. Though most of the facilities we found on the internet (for children aged under 3) were rather small scale facilities (for 12 children on average), the staff-child ratio varied among the various facilities from 3–6 children per caring person. Hence, the question remains, when, or rather, whether at all, the bill on “child groups” will pass the Czech parliament.

Affordability

In the following, we will provide information on the costs of the previously described different forms of childcare which are offered in Brno.

Table 3.2 Overview of the National Average and Median Income for Men and Women by Educational Attainment (in CZK\(^{14}\)) in 2011

<table>
<thead>
<tr>
<th>Education</th>
<th>Average Income</th>
<th>Median Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>overall</td>
<td>men</td>
</tr>
<tr>
<td>Overall</td>
<td>26 881</td>
<td>30 192</td>
</tr>
<tr>
<td>Basic and unfinished</td>
<td>17 007</td>
<td>19 352</td>
</tr>
<tr>
<td>Secondary without GCSE</td>
<td>20 375</td>
<td>22 482</td>
</tr>
<tr>
<td>Secondary with GCSE</td>
<td>26 924</td>
<td>30 426</td>
</tr>
<tr>
<td>Undergraduate education (including Bachelor)</td>
<td>31 001</td>
<td>36 089</td>
</tr>
<tr>
<td>University education</td>
<td>45 909</td>
<td>53 086</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2011

\(^{14}\) The average exchange rate in 2011 was 24.586 CZK per 1 EUR.
In order to provide a more differentiated picture as far as the share of costs for childcare in the family income are concerned, we will draw on the national income figures presented in Table 3.2 (first and foremost the median income), differentiated by educational attainment.

**Public nurseries**

The fee for the 3 Brno nurseries is set by the Brno City Assembly and until the end of 2011 used to be differentiated according to the income of the child’s parent(s), starting at CZK 800 (EUR 32) (for parents with lower income) and reaching up to CZK 4,500 (EUR 180) per month for full-time care. The fee for part-time care or care limited to 5 days a month was calculated from the highest fee. As of January 1, 2012, the City Assembly set a new general rate for full-time care, amounting to CZK 6,000 (EUR 240) per month. That means the fee was raised and its social grading abolished. The fee for part-time care or care limited to only several days a month is calculated accordingly.

Put in relation to the average median income, this amounts to 26.5% and in case of a two-income family to 13.4% of the monthly family income. For a female single parent, the nursery fee amounts to 30% of her income. Taking the various educational levels into account, for a two-income family with basic or unfinished education, the nursery fee corresponds to 18.4% of their income, for a two-income family with secondary education with GCSE this percentage amounts to 12.3% and finally, for a two-income family, were both partners have university education, the share is 8.7%. In case of a female single parent the percentages related to these 3 educational levels amount to 42% (basic or unfinished education), 27.3% (secondary with GCSE) and 20.7% (university education). These relations show that the predominant target group for the Brno nurseries are parents with university education. In our interviews with the persons in charge for and related to the Brno nurseries, it was also repeatedly emphasized that the women who make use of the nursery services have a university education and are career oriented.

**Public kindergartens**

As far as fees for public kindergartens are concerned, according to Education Act § 123 act no. 561/2004 Coll., public kindergartens are allowed to collect fees for their services. These are set by the kindergarten’s headmaster at the beginning of the school year for the whole year. The Decree No. 14/2005 Coll. on pre-school education limits this fee to a maximum of 50% of the real average costs/child of the previous year (with the exception of wages). According to the Education Act, it is also possible to waive this fee, especially for socially deprived parents. Furthermore, the last year of kindergarten before the child reaches mandatory school age (that is, the year during which the child reaches the age of 6 years) must be provided free of charge.
The fees differ among schools, and also according to location. They range from approximately CZK 300\textsuperscript{15} a month in smaller municipalities to CZK 600–700 in the city of Prague. The level in Brno is somewhere in between, at around CZK 400–600 a month. In addition to the schooling fee, parents have to pay for the food provided, approximately CZK 30 a day. That means the overall cost of childcare in public kindergartens in the city of Brno is about CZK 1100–1200 (EUR 44–48) a month (for full-time care). For a two-income family with basic or unfinished education this amounts to 3.7%, for a female single parent at this educational level, it makes up 8.4% of the median income. Hence, these public services are rather accessible for lower income groups.

**Commercial services**

When it comes to commercial childcare services, it is not surprising that the fees for these facilities substantially differ from those of public services. If we take as an example the 10 private facilities (we found on the internet) providing care for children under 3 years (and above, as well) in Brno, the fees range from CZK 6500 (EUR 260) to CZK 8400 (EUR 336) for a month of full-time care. Hence the share of these services in the income of different income groups is at least as high as those calculated for the Brno nurseries. That is, these services are potentially available only for the higher income groups (university education), provided that these are double-income families.

Finally, the most expensive (but at the same time the most flexible) commercial service are child-minders. The prices of the nine agencies we found on the internet, range from approx. CZK 110 to CZK 180 (EUR 4.4–7.2) per hour, depending on whether it is for child minding on a regular basis or for occasional child minding (which is more expensive). An agency charges around CZK 12,500 (EUR 500) to arrange a child-minder to work for a family. While parents make a contract with the child-minder individually, some agencies have certain conditions, such as minimum hourly rates. Prices for child-minders who are not provided by an agency cost around CZK 80 to CZK 110 (EUR 3.2–4.4) per hour, depending on their qualifications and whether their service is provided on a regular basis or only occasionally.

**Accessibility of childcare services in Brno**

Regarding accessibility of the various types of childcare services in Brno, we will discuss their opening hours as well as the relation between offered and demanded places (as far as information/data are available on that).

In Brno, the opening hours of the 3 public nurseries are from 6:30 a.m. until 5 p.m., which can be adapted to the needs of the parents. During the week the nurseries are open from Monday to Friday, all year. As far as the relation of supply and demand for places in the 3 Brno nurseries is concerned, according to the interviews with the persons in charge at the Brno municipality, only recently (in

\textsuperscript{15} The average exchange rate in 2013 was 25.974 CZK per 1 EUR.)
The demand for places slightly exceeds the number of places offered. In this regard, the rather high fee (discussed above) also plays a role in limiting the demand for these services.

The usual opening hours for public kindergartens are mostly from 6:30 a.m. to 4:30 p.m. In Brno, only two kindergartens provide special opening hours: one (with a capacity of 28 places) has prolonged opening hours until 6 p.m. and the other (also with a capacity of 28 places) provides residential care for the whole week (Monday to Friday). The children there do not necessarily have to stay for the whole week, but they can stay there overnight – e.g. in case the parents have to work shifts or have to work late in the evening (e.g. doctors). These additional services are financed by the municipality, that is, the state only subsidizes facilities in relation to their basic operation (mostly starting at 6:30 a.m. until 4:30 p.m.) and the rest is financed by the municipality (Interview No. 4).

According to the Decree No. 14/2005 Coll. on pre-school education, during the summer holidays kindergarten operation can be interrupted for up to two months. The kindergarten’s headmaster decides this and it has to be announced to the parent(s) at least 2 months ahead of time. Based on a written request from the parent(s) at least 30 days before the kindergarten is temporally closed, the headmaster is obliged to find a place for the child in another kindergarten.

Though from a financial point of view a place in a public kindergarten is affordable for all income groups, due to a baby boom over the last few years, a significant mismatch between the number of kindergarten places demanded and offered has developed. Hence, looking for a kindergarten place has become more complicated. During the last few years, the number of kindergarten applications which did not get a kindergarten place has strongly increased. According to the data provided by the Institute on Information in Education, in the Czech Republic the number of rejected applications increased six fold from 2005 (6,810 rejected applications) to 2010 (39,483 rejected applications). In the city of Brno, the situation is even worse: while in 2005 351 applications were rejected, in 2010 this number reached 4,896, which is 16 times as high as in 2005. Partly this is related to the fact that parents started applying for a kindergarten place at several facilities in order to improve their chances for getting a place (Interview No. 4). However, this situation indicates there is a limited accessibility of kindergarten places. It also indicates that parents are increasingly finding it difficult to find a kindergarten place in a facility which is either near their home or their workplace. Thus, they are now lucky to find a place at all (at the moment when they wish to return to the labour market).

In this regard, it is also interesting to note, that there are some places in Brno where new blocks of flats have been built to which many young families have moved. As the building of these blocks of flats is faster than the development of public facilities, in these locations there are specific problems with kindergarten facilities. Hence for the parents of children living in these locations, finding a place in a public kindergarten is even more complicated and it is rather probable, that they will have to travel longer distances to these facilities (Interview no. 4).

The commercial services available in Brno offer more flexible and, in some cases, longer opening hours (e.g. until 7 p.m.). The most striking difference is
probably in the greater flexibility to the extent in which children can be enrolled. While in public facilities it is rather difficult to limit a child’s attendance, for example to one or two days a week, more or less all of the facilities we researched on the internet (in relation to the licensed trade) offer a great variety of regular enrolment as well as the possibility of occasional child minding. One nursery also regularly offers its services at the weekend (once a month, both during the day and also in the evening).

Of course, the most flexible services offer child-minders who are potentially available for 24 hours (offers include the minding of sick children, minding if the family goes on holiday, accompanying children if they have to see the doctor, etc.).

Similar to the nurseries subsidized by the Brno city administration, the fees for private, profit based services importantly limit the demand for these services to higher income groups. At the same time however, the offer of these services is limited by the legal and organizational barriers which still make it rather difficult to establish and run private childcare facilities, especially for children under the age of 3 years. The fact that the bill on “child groups” did not pass the parliament and its future destiny remains unclear, has further prolonged this substantial problem.

Public spending on childcare services in Brno

There is no obligation for a municipality to establish nurseries in its territory. This exclusive autonomy also holds for financing. Hence, the 3 Brno nurseries are financed exclusively from the municipality’s budget and are not subsidized by the state budget. It is up to the municipality (as the nurseries’ founder) to what extent the nurseries’ clients have to pay for the provided services (Štěpánková, Jaklová 2006; Svobodová 2007; Interview No. 12). In 2010, the Brno municipality funded the three Brno nurseries with the overall amount of CZK 8,726,000 (EUR 349,040). For the year 2012, expenditures of CZK 6,981,000 (EUR 279,240) were budgeted. Due to the cuts in the municipality’s subsidies for the nurseries, the monthly fee for nurseries was raised for 2012 (cf. the information presented above). For 2010, this means expenditures per child aged 0–2 (also including those not attending nurseries) of CZK 677 (EUR 27.08) and of CZK 79,327 (EUR 3173.08) per place in a nursery

The financing of public kindergartens, which are registered with the ministry for education, youth and sports, is regulated in § 160 and 191 of Act No. 561/2004 Coll., Education Act, as well as in the Decree No. 14/2005 Coll. on pre-school education. The basic financing principle is that expenditures which are not directly related to education are financed by the facility’s founder (e.g. the municipality, region, religious organization) and those expenditures which are directly related to education, are covered by the ministry. Private facilities which are not registered with the ministry of education, youth and sports do not get the above mentioned expenditures.

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16 Our own calculationas based on information on the Brno-city budget 2010 and 2012 provided by theheadofthe Budget-Department atthe Brno municipality as well as on data provided by the ÚIV.
Mothers – Grandmothers – Daughters?

subsidies and are not bound by the Education Act in their provision of services. In 2010 the Brno municipality funded the public kindergarten system in Brno with the overall amount of CZK 169,436,000 (EUR 6,777,440). For 2010, this means expenditures per child aged 3–5 (including those not attending a kindergarten) of CZK 15,773 (EUR 631) and of CZK 15,364 (EUR 615) per child attending a kindergarten in Brno.17

The overall expenditures for childcare services for children aged 0–5 (nurseries and kindergartens) amount to CZK 178,162,000 (EUR 7,126,480) that is, CZK 7,539 (EUR 302) per child aged 0–5 and CZK 480 (EUR 19) per inhabitant (as of December 31, 2010).18 The overall expenditures of the city of Brno amount to CZK 12,208,004,000 (EUR 488,320,160), hence expenditures on childcare services for children aged 0–5 amount to 1.5% of Brno’s overall expenditures.19

Apart from the expenditures related to nurseries and kindergarten facilities, NGO activities might also gain financial support for their work and/or concrete projects from the Brno municipality. Since 2008, in relation to the adoption of the Brno family policy conception, the assembly of the city of Brno also adopted the option to provide grants “for the support of families.”20 The priorities for the selection of projects for this financial support are as follows: support of the functioning and cohesiveness of the family, prevention of the social exclusion of parents caring for children, support of the reconciling of professional and family roles, leisure activities for families.21 Since the introduction of this option, the budget reserved for these projects has increased almost fivefold (from CZK 300,000 (EUR 12,000) in 2008 to CKZ 1,405,000 (EUR 56,200) in 2010), however by 2011 it has been cut back slightly (CZK 1,395,000 – EUR 55,800).22

3.4 Conclusions – Childcare for Pre-school Children in Brno

The major issues and problems, which also fundamentally characterize the current overall childcare situation in Brno, are the lack of childcare capacities in public kindergartens (related to the recent baby boom), the lack of a developed system of alternative facilities and services based on clearly and centrally outlined quality standards, and the limited financial accessibility of private childcare services. This

17 11,028 – This figure includes all children aged 2–6 attending a kindergarten in Brno (also those with postponed school attendance), based on information provided by the Institute for Information on Education (ÚIV). http://stistko.uiv.cz/vo/41.asp?pokres=vusc%3D%27CZ0622%27&pzdiz=&pty p=&psprur=&agri=1
18 Our own calculationas based on information on the Brno-city budget 2010 and 2012 provided by the head of the Budget-Department at the Brno municipality as well as on data provided by the ÚIV.
situation is not new. It has been developing over the last few years, and it is not unique to Brno, but rather relevant for the Czech Republic as a whole. Hence, the ability of local politicians to change it, is limited. In this respect, on the local level, the municipality made some efforts to raise the capacities of kindergarten facilities and to support (at least on a basic level) the development of alternative childcare facilities (e.g. through grants). In this respect it is nevertheless also necessary to point out that the efforts in Brno to raise kindergarten capacities have been oriented first and foremost towards maintaining the status quo.

At the same time, these efforts have been limited by a lack of national measures. Currently, the municipalities have hardly any practicable alternative to establishing kindergarten facilities (registered in the school register, which demand quite high financial investments), which would allow them to flexibly expand their offer of childcare services (the baby boom is expected to end by next year) and/or offer more capacities for children under the age of 3. A basis for the establishment of such alternative care services (operated by the municipality as well as by private for-profit or non-profit organisations) is provided in the bill on childcare groups. The proposed measures would bring about some important basic improvements regarding the development of such alternative childcare facilities – first and foremost easing the establishment of alternative childcare facilities based on at least basic standards of quality – and hence a certain support of reconciling work and family life. The question remains when these changes will finally be introduced. Moreover, it remains open to what extent they will work in practice (especially with respect to the creation of alternative – commercial and non-commercial – childcare facilities) as this is more or less left to private initiatives. Especially for mothers with children under three, the situation will continue to remain complicated for some time. Even if the bill were to pass the parliament in 2014 and worked to promote the creation of alternative facilities, this will also take some time. Furthermore, as for children under 3 the offer is more or less completely dependent on alternative forms, it also remains unclear to what extent these services will be financially accessible for lower income groups.

Given the national ideal of care, which expects mothers to stay at home for at least three years while caring for a child, and the institutionalisation of this ideal in Brno outlined in this chapter, the question arises, how do women living in Brno manage to reconcile paid work with their caring responsibilities, especially those women who did in fact return to the labour market before their child turned three. That is, we were interested in the reconciling strategies of women, who, in their decision to return to the labour market, go against the ideal of care prevailing in the Czech Republic and the city of Brno. In Chapter 5 we will draw on the results of two focus groups of employed women with pre-school aged children living in Brno in which they discuss their reconciling strategies and their related decision making.
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Other sources

**Conducted Interviews (Brno, October 2011)**

<table>
<thead>
<tr>
<th>Interview No.</th>
<th>Role</th>
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<tbody>
<tr>
<td>1</td>
<td>Head of the Office for City Strategy at the Brno municipality</td>
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<tr>
<td>2</td>
<td>Responsible for the creation of the city strategy and regional cooperation at the Brno municipality, associated with the office for City Strategy</td>
</tr>
<tr>
<td>3</td>
<td>Head of the Department for the Implementation of the ESF at the local Southern Moravian branch of the Labour Office</td>
</tr>
<tr>
<td>4</td>
<td>Head of the Pedagogical Organizational Department at the Division for Education, Youth and Sports at the Brno municipality</td>
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<tr>
<td>5</td>
<td>Responsible for requalification at the local Southern Moravian branch of the Labour Office</td>
</tr>
<tr>
<td>6</td>
<td>Chairperson of the Brno Deputy Mayor’s Advisory Board for Families</td>
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<tr>
<td>7</td>
<td>Head of the Department of Cooperation and Development at the Division of Social Care at the Brno municipality</td>
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<tr>
<td>8</td>
<td>Head of an elderly care facility</td>
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<td>9</td>
<td>Head of the Division for Health at the Brno municipality</td>
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<td>10</td>
<td>Chairperson of the social-democratic women</td>
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<tr>
<td>11</td>
<td>Responsible for families / family policy at the Division for Health at the Brno municipality</td>
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<tr>
<td>12</td>
<td>Head of the Centre for Specialized Children’s Health Services in Brno</td>
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<tr>
<td>13</td>
<td>Head of the Commission of the Brno City Council for Health and Social Issues, ODS</td>
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CHAPTER 4
The Local Welfare System – Elder Care

In this chapter, we examine the development of elder care policies and services in Czechoslovakia under communist rule. We present the changes after 1989 as well as the current situation in these areas, with a special focus on Brno. This chapter also presents information on the coverage of elder care services in Brno and discusses their quality, affordability, accessibility and financing. For this purpose, we draw on available statistics and literature, on key policy documents as well as on our interviews with pertinent Brno city administration representatives. This chapter aims at providing an overview of current elder care policies and services in Brno, as well as an evaluating of how they potentially influence women’s labour market participation. Hence, we will introduce the context in which women living in Brno who have an elderly dependent make decisions regarding their work and caring responsibilities. This will be analysed in Chapter 6.

4.1 Historical Background – The Development of Elder Care Policies and Services in Czechoslovakia under Communist Rule

Contrary to child care services and policies under communist rule, which during the last decade have been studied in great detail (cf. Chapter 3), comparable literature on elder care services and policies is rather scarce, both in international comparative research as well as in local Czech publications. Therefore, the first part of this chapter will be not as comprehensive as in the chapter on childcare. Nevertheless, we will provide a rough sketch of the most important trends and changes in relation to elder care during the communist regime in Czechoslovakia.

Similar to the case of policies and services for pre-school children, the design of elder care policies and services also changed during the communist regime. Using Leitner’s typology of familialism, Maříková and Plasová (2012) focus on continuities and changes in this policy area in Czechoslovakia between 1948 and 1989 as well as on related post-socialist developments in the Czech Republic. As they argue, the assumed role of the family in elder care policies changed over the decades of communist rule and developed from certain de-familializing tendencies in the 1950s, via a return to the family in the 1960s towards an explicit familialism in the 1970s and 1980s and finally to an implicit familialism in the post-socialist area (Maříková and Plasová 2012).

The authors support their argument by an analysis of key legal changes during the given time period as well as with data on the potential coverage of the population of 65+ and 80+ in residential elder care facilities: Though the statistical
data are available only from 1959 on, based on the general political atmosphere in the 1950s this first period of the development in elder care policies and services can be characterized as supporting institutional residential care for the elderly. The goal in this phase was to overcome the “traditional” family and to free it – or rather, women in it – from their care responsibilities to enable their labour market participation. Additionally, the support of residential elder care facilities, targeted first and foremost at lone elderly, promised to contribute to the solution of the housing problem prevailing at that time. As a result of these trends, at the beginning of the 1960s the statistical data show the highest potential coverage (over 20%) of available residential care in the population 80+. The availability of home care service, on the contrary, was at that time at its lowest level. The offer of the latter started growing only at the end of the 1960s (Maříková and Plasová 2012). As outlined by Maříková and Plasová (2012), this went hand in hand with an increased focus on the role family members and other close persons played in elderly care. According to a 1964 regulation the use of home care services was available only to those elderly people who were not cared for by a family member or other close person (most importantly neighbours). This explains how elder care responsibilities were gradually moved back into the purview of the family.

The next important change toward an explicit familialism of elder care took place in February 1976 with the introduction of a repetitive optional benefit (without a specific name). This benefit reacted to the then common situation in which a person cared for a close dependent (predominantly elderly) family member and due to these care responsibilities could not hold gainful employment. The amount of the benefit was bound to a kind of subsistence minimum and paid the difference between this subsistence minimum and the income of the dependent elderly and his/her carer (Maříková and Plasová 2012; Niederle 1996). However, because this benefit was optional, it is not clear to whom it was actually granted and based on what criteria.

In addition to the partial compensation for the loss of income, in 1975 the time spent caring for a close family member started being acknowledged as working time for the calculations of the pension of the care giver. In subsequent years only minor changes were made, mostly related to the definition of the group of close persons who could be cared for. In 1984, a basic change related to calculating the benefit was enacted – the benefit was then related to the pension of the person in need of care and could be granted up to the amount of this pension (however pension and benefit together were limited to a maximum amount). Finally, in 1988, the benefit was named “benefit for the care of a close person”. The group of persons who could be cared for was further broadened and the benefit was adapted to the number of persons cared for (Maříková and Plasová 2012; Niederle 1996). These were the last changes to the benefit before the end of the communist regime.

The mid-70s saw a decrease in potential residential care coverage for the 80+ population as the “benefit for the care for a close person” widened. By the end of the 1980s, coverage for this group reached a level of approx. 12% (Maříková and Plasová 2012). During this same period, the availability of home care services
gradually increased and finally reached a level of approx. 30% for the same population.

Despite some coverage in residential elder care services (especially in the 1960s and the first half of the 1970s) for the population over 80, there remained few options for care givers to make alternate arrangements. This was especially constrained by the limited capacities of home care services and the low quality of residential care services. Hence, the system for elder care in communist ruled Czechoslovakia could be characterized as balancing between an explicit and implicit familialism (cf. Maříková and Plasová 2012).

What remains to be emphasised is the fact that the care work within the described policy and service context was strongly gendered, that is, it was never questioned that care work is women’s work. Systemically, this was supported by the fact that the compensation for informal care work for a close family member (in the form of the “benefit for the care for a close person” mentioned above), did not fully compensate for the loss of income. As women tended to have lower incomes, the compensation for the care work did not motivate men to become involved in care work on a full-time basis (Janoušková and Saxonberg 2011).

4.2 The Czech Republic and Brno after 1989

Policy framework

After the fall of the communist regime, the familializing trends of elder care policies and services continued and the family’s responsibility in caring for its frail elderly members was further reinforced. The general discussions on the basic principles of elderly care as related to the political changes, led to a consensus that the provision of quality elder care services which would allow a person to age with dignity should be based on the following principles: deinstitutionalization, decentralization, and a certain professionalization of the services offered; a pluralisation of service providers as well as a greater autonomy of the elderly in choosing how they are cared for and who cares for them (Maříková and Plasová 2012) was also emphasised.

These principles are further outlined in two policy documents which form the current policy framework for the provision of elder care in the Czech Republic. The title of the document, “Conception for the support of the transformation of institutional social services into other types of social services, provided in the natural community of the user and supporting the user’s social integration in the society” (MPSV 2007), is the outline of the central idea which guides the current developments in the provision of elder care in the Czech Republic.

The document focuses on the “deinstitutionalization” of the system of social services, which in the Czech context is defined as the transformation towards the provision of social services focused on the individual support of the person’s life in his/her “natural environment”, meaning within the family. As the main legal
regulation for achieving this goal, the document presents social services act No. 108/2006 Coll., which came into force on January 1st, 2007. The main goal of this law is that social services should be used only by those persons who really need them, to the extent to which they need them, and according to quality norms that comply with international trends and the latest scientific findings. That is, the main trend in the provision of social services is the transformation of the system, which was mainly based on an either/or choice in relation to institutional care, into a system which allows for an individual mixture of professional care and informal care, with various levels of support, preferably in the family context (MPSV 2007). Thus, in this key policy paper, institutional, residential elder care is seen as a kind of last resort for cases in which a frail elderly person has almost fully lost his or her self-sufficiency and hence cannot be cared for in the family environment (cf. also MPSV 2008).

Though the above mentioned document outlines various groups of stakeholders who are influenced by the changes, it does not mention women as the main potential providers of informal care in the family environment. Nor does it deal with the issues of reconciling work and caring responsibilities for these women. This topic is discussed in the National Programme for the Preparation for Ageing 2008–2012 (MPSV 2008). In this document, the family, partners and children are seen as the main providers of care. In this regard, one of the principles outlined in this document is a “gendered approach”. Based on this approach, the fact that (according to this document), approximately two thirds of informal care givers (in the family) are women, is acknowledged and thematized – for example with respect to the problematic of reconciling work and caring responsibilities for these women. At the same time however – as also pointed out by Maříková and Plasová (2012) – this fact is not related to measures which aim at changing this situation towards greater gender equality, e.g. by actively supporting a greater involvement of men in the informal care work. Hence, though women's greater share in care work within the family is acknowledged, it is to a certain extent also taken for granted.

**Care Benefit – Informal Care**

One of the main measures used to achieve the goals outlined in the strategic documents presented above was the introduction of the care benefit as part of the act on social services which came into force in 2007. This benefit allows users – that is the elderly in need of care – to choose the services which they need and, at the same time, allows them to be integrated in their “natural environment” (MPSV 2007). Both social services and the care benefit are provided to all Czech citizens (and others, such as foreigners, asylum seekers, etc. according to a special law), independent of their participation in the social insurance system. The provision of social services and care benefits depends on the individual needs of the particular disabled and/or elderly person (§ 2).

The benefit is paid directly to senior citizens and the chronically ill and allows them to decide whether they will use the benefit to pay for informal home care or to pay for professional social services. The benefit is available to those older than
one year who are dependent on the help of others and whose care needs are likely to last longer than one year. The amount of the benefit is based on the “dependence level” of the potential beneficiary, which is evaluated by a social worker (from the municipality) and a doctor (GP or a specialist). Their judgement of a person’s health and self-sufficiency is based on the testing of 36 activities which are outlined in the social service act. The unmanageable activities are counted up and one of four dependence levels is assigned, thus determining the amount of the benefit. The four dependence levels are as follows: I. low (with a care benefit of CZK 800 / EUR 32), II. moderately grave (with a care benefit of CZK 4000 / EUR 160), III. grave (with a care benefit of CZK 8000 / EUR 320) and IV. total dependence (with a care benefit of CZK 12 000 / EUR 480). The beneficiary must use the benefit to pay for care (informal or formal) and a public inspector checks to see how the benefit is used (Rážová 2006: 9–11).

According to a representative survey from 2006, 24% of Czech families care for an elderly family member or have former experiences with such care. 28% expect that in the coming 5–10 years they will have to arrange care for a senior family member. 60% of the respondents, by contrast, indicated that they neither have experience with care nor do expect it in the future. Hence 40% of the surveyed Czech families have been or are somehow concerned with care responsibilities for an elderly family member. About 80% of the respondents indicated that they are willing to arrange and provide care in the family environment (Jeřábek et al. 2013: 34; 59–60). This willingness to provide informal care is confirmed by data on the provision of the care benefit. Table 4.1 presents the available data for the national level as of July 1st, 2010 on whether care is provided on an informal or formal basis. According to the presented data, exclusively informal care clearly prevails for all grades of dependence, which in another approx. 10% of cases is supplemented by professional care services. With the exception of total dependency, in all the categories, informal together with combined care even exceeds 80%, and also for the category of total dependency, the share is still more than two thirds.

| Table 4.1 Share of Care Allowance Beneficiaries as of July 1st, 2010 According to the Grade of their Dependence |
|---------------------------------------------------------------|-------|-------|-------|-------|
| Care is provided only by a relative or close person (informal care) | 78%   | 74%   | 71%   | 56%   |
| Care is provided only by a registered care residence            | 9%    | 15%   | 18%   | 31%   |
| Care is provided only by a registered field or non-resident care service | 1%    | 1%    | 1%    | 1%    |
| Combined form of care                                          | 12%   | 10%   | 10%   | 12%   |
| Total number of beneficiaries                                  | 112 000 | 87 000 | 59 000 | 36 000 |

Source: Ministry of Labour and Social Affairs

1 The indicated benefits refer to the care benefit for persons over 18 years.
The Ministry of Labour and social affairs does not, however, collect gender disaggregated statistics on the persons who provide informal care (information provided by the section for statistics at the Ministry of Labour and Social affairs). Nevertheless, according to the Generations and Gender Survey 2005, in the Czech Republic 66% of informal long-term carers were women, while only 34% were men (Svobodová 2006). Hence the provision of informal care is clearly gendered. In this regard, paying the care benefit directly to the senior citizen or chronically ill bears potential problems, as this person might keep the money for himself and then expect a (female) family member to care for him/her for free, in line with traditional gender roles. At the same time, the adult woman might feel pressure to take care of a family member without compensation.

In relation to the presented data, it is further interesting to note, that according to earlier surveys related to this topic, the large majority of informal carers continue with gainful employment. The representative survey from 2006 mentioned above, again provides quite detailed data on this point: 27% of those who were providing care at the time of the survey and 15% of those, who had earlier experiences with care, gave up their employment. As the survey further shows, this decision was related to the type of care provided. While only approximately 10% of those, who provided supportive care gave up their employment, more than one third (35%) of the informal carers providing indispensable care gave up their jobs (Jeřábek et al. 2013: 100–101). The findings of Veselá (2002: 7) furthermore suggest that the decision to give up one’s job to provide informal care is not a matter of course: the need to give up their employment would be a reason for an institutional care arrangement for approximately 66% of daughters and 77% of sons. The results presented by Jeřábek et al. (2013: 100–101) also show the clear impact of informal care on the spare time informal carers have available: around 51% gave up their hobbies and their holidays and approx. 60% gave up spending time for themselves and relaxing.

Hence, the available data clearly suggests that informal care is provided mainly by women in combination with gainful employment. Reconciling employment with the informal care arrangement is achieved by cutting back free time and time for relaxation. In Chapter 6 we will discuss in more detail the strategies of informal carers for reconciling work and care and how they perceive and experience the effects of informal care on their life.

Nevertheless, there is still a considerable portion of informal carers, who, in order to provide care, gave up their employment. As noted before, even though the policies encouraging family care for the elderly are officially gender neutral, when families decide who will stay at home to provide care for frail elder family members they usually take into consideration the fact that women often have lower incomes than men (the Czech Republic has a traditionally high gender pay gap of approx. 25% – cf. Chapter 2), since the care benefits are too low to replace much of the income loss that the family would suffer if the (usually) higher-paid man stayed at home to care for the family member. Moreover, the lifespan of men is shorter than women and men often marry younger women. Thus wives more often find themselves having to care for their ill husbands when their husbands retire (Rubášová 2005). These factors strongly suggest that in the group of informal
carers who leave the labour market, women are even more overrepresented than in the group of informal carers who reconcile care with gainful employment. Moreover, the study results presented by Veselá (2002) cited above, suggest that daughters, in comparison to sons, are more willing to leave their employment to provide care. This brings up a number of questions about the circumstances under which these women provide care – e.g. what role early retirement plays as a strategy for arranging for informal care and what implications has this for the female informal carers. To what extent is the women’s exit from the labour market a result of the lack of part time jobs? While examining these questions is central to further the understanding of the situation of female informal carers in general, the main research focus of the FLOWS project and hence this publication, is rather the problem of reconciling gainful employment and caring responsibilities.

The provision of elder care services in the Czech Republic and Brno

The Social Service Act (No. 108/2006) defines specific types of social services. This definition of social services for the elderly applies to all social service providers in the Czech Republic. Home care (§ 40) includes not only physical care (e.g. assistance in self-care and hygiene) but also “assistance in running the household” and “mediating contacts with the social environment”. Day-care centres for the elderly (§ 45) provide “social therapeutic activities” and “assistance with asserting rights, justified interests and dealing with personal matters”. Senior houses (§ 49) not only provide physical care but also “mediating contacts with the social environment”, “social therapeutic activities”, “social activation” and “assistance with asserting rights, justified interests and dealing with personal matters”.

Within this national legal framework, the actual provision of these services is organized on the regional and local level. In this regard, a key point concerning the relationship between the local and the national welfare system is the distribution of responsibilities between the central and the local level. The degree of autonomy on the local level depends on the degree of decentralization. In this regard, two major forms of decentralization can be observed (cf. Mosley 2003): administrative and political decentralization. The described care benefit is related to administrative decentralization, which means that national policy objectives are delegated to bureaucratic managers in local offices. The state delegates the administration of the care benefit (payments, needs assessment, etc.) to local labour offices (within the agenda of MPSV). The provision of social services by contrast is related to political decentralization. Political decentralization refers to the delegation of responsibilities to local political subjects with their own resources. The Brno municipality supports social services providers (NGOs and churches) with financial grants from its own budget. Furthermore, the municipality itself can serves as a provider of social services. In the case of Brno, this provision of care services focuses especially on institutional and home care (as will be outlined in more detail below). Additionally, the municipality also organizes the assessment of local service needs through the community planning.

2 We would like to thank our reviewer for raising these questions.
of social services. Thus, local community plans are the main strategic documents for the provision of social services to the elderly. Finally, the registration of social services and inspection of quality is in the agenda of the regions. Hence, in the provision and control of elder care services, all administrative levels are involved to different extents. While the definition and legal framework of social services and their provision is regulated nationally, the registration and control is done by the regions and finally the assessment of needs for social services, their planning and financing on both the regional and/or the local level.

As a tool for the latter, the social service act defines a “Plan for social service development” (community plan). It is obligatory for regions and voluntary for municipalities and has been outlined by the National Action Plan for Social Inclusion 2006–2008 as a tool for the “Support of social service decision making processes on the local and regional level and the development of partnerships in social inclusion policy” (MPSV 2006: 19). Although the plan is voluntary, the City of Brno has been implementing it since 2005 (building on earlier experiences with community planning). These plans play a very important role in the distribution of financial grants because the financing of services (by non-governmental providers) and the distribution of European funds for this purpose are tied to these plans and their priorities (Interview No. 8). At the same time, the community planning process involves social service users, providers and municipal officials and allows all these groups of stakeholders to express their needs and interests as well as to comment on and negotiate the local social service priorities (Interview No. 7; KPSS 2007). Currently, the “Community Plan of Social Services of the Brno Municipality 2010–2013” (KPSS 2009) is the main local strategic document for the provision of elder care services in Brno.

**Welfare Mix in Brno**

Providers of social services may be legal subjects (e.g. NGOs, churches), persons or municipalities, regions and ministries. The following table provides an overview of the types and numbers of social services provided in Brno by different service providers and outlines the local welfare mix in elder care services. Additionally, two private facilities with low capacity (each about 20 beds) exist in Brno (Interview No. 7).

**Table 4.2 Structure of Social Services for Elderly in Brno (2011)**

<table>
<thead>
<tr>
<th>Type of social services</th>
<th>Municipality</th>
<th>NGOs</th>
<th>Churches</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>abs.</td>
<td>%</td>
<td>abs.</td>
<td>%</td>
</tr>
<tr>
<td>Home care</td>
<td>6</td>
<td>43</td>
<td>5</td>
<td>36</td>
</tr>
<tr>
<td>Elderly homes</td>
<td>9</td>
<td>60</td>
<td>5</td>
<td>33</td>
</tr>
<tr>
<td>Special regime homes</td>
<td>5</td>
<td>71</td>
<td>2</td>
<td>29</td>
</tr>
<tr>
<td>Day care centres</td>
<td>5</td>
<td>71</td>
<td>1</td>
<td>14</td>
</tr>
<tr>
<td>Centres of respite care</td>
<td>5</td>
<td>56</td>
<td>3</td>
<td>33</td>
</tr>
</tbody>
</table>

Source: Zpráva 2012
In terms of capacity, the city of Brno is the most important provider of social services on the local level. It provides not only the large majority of residential care services (9 elderly homes, including both services of elderly homes and special regime homes\(^3\)), but is also the main provider of home care services (95% of the capacity of home care services). NGOs run one third of elderly homes, special regime homes and centres for respite care in Brno. Churches, finally, play a role especially in the area of home care and elderly homes.

Table 4.3 Capacity\(^4\) of Social Services in Brno in 2011 According to Different Types of Providers

<table>
<thead>
<tr>
<th>Type of provider</th>
<th>Home care</th>
<th>Elderly homes</th>
<th>Special homes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>abs.</td>
<td>%</td>
<td>abs.</td>
</tr>
<tr>
<td>NGOs</td>
<td>235</td>
<td>3</td>
<td>193</td>
</tr>
<tr>
<td>Municipality</td>
<td>7,409</td>
<td>95</td>
<td>1,280</td>
</tr>
<tr>
<td>Churches</td>
<td>175</td>
<td>2</td>
<td>43</td>
</tr>
<tr>
<td>Total capacity</td>
<td>7,819</td>
<td>100</td>
<td>1,516</td>
</tr>
</tbody>
</table>

Source: Zpráva 2012

Based on the presented numbers, we can conclude that in the area of elder care in Brno, municipal providers play the most important role in residential and home care. NGOs and churches supplement the elder care with residential care and home care.

In order to evaluate these numbers in more detail, we will take a closer look at the extent to which these capacities cover the need for such services in Brno. In this regard, it is however hard to define who is in (potential) need of these services. In 2006, an expert group investigated the conditions of the elderly in Brno for the purpose of community planning of social services. The report written by Kateřina Kubalčíková provides a definition of elderly in Brno which forms the basis for the community planning of social services in the coming years. According to this definition, the elderly are defined as “seniors permanently dependent on the assistance of another person due to the lack of their functional potential” (Kubalčíková 2006: 7). Hence, it is not possible to simply characterize this group of people based on age. Yet, the register of social services distinguishes two age groups: young seniors 65–80 years and older seniors 80+ years (Registr 2012). Social service providers also have to decide who they will provide their services to (at registration). In Brno all ambulatory, field and institutional care services are available to users over 65 years (PSP 2012a). Based on these considerations and taking into account the data provided by Maříková and Plasová (2012), in the

\(^3\) One social service provider can provide more than one type of social service in one facility. Very often elderly homes and special regime homes are provided together in one place.

\(^4\) The numbers presented in this table are taken from the annual report on social services provided in Brno (Zpráva 2012). However the data presented in this report are only of limited comparability, as the report presents the number of actual users for the municipality funded services and the capacities for the services provided by non-public providers (churches and NGOs). Despite these limitations, we decided to use these data for analysis as no alternative is available.
following, we will calculate the potential coverage of the population of 65+ and 80+ in residential elder care facilities. For this purpose, the table below (Population in senior age at the local, regional and national level) gives an overview of the population in potential need of the described services living in Brno.

Table 4.4 Population by Senior Age at the Local, Regional and National Level 2010

<table>
<thead>
<tr>
<th>Population (31 December 2010)</th>
<th>Brno</th>
<th>South Moravian Region</th>
<th>Czech Republic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>371,371</td>
<td>1,154,654</td>
<td>10,532,770</td>
</tr>
<tr>
<td>Population 65+</td>
<td>66,299</td>
<td>186,690</td>
<td>1,635,826</td>
</tr>
<tr>
<td>Women 65+</td>
<td>39,907</td>
<td>112,665</td>
<td>977,605</td>
</tr>
<tr>
<td>Men 65+</td>
<td>26,392</td>
<td>74,025</td>
<td>658,221</td>
</tr>
<tr>
<td>% of 65+ in the whole population</td>
<td>17.85</td>
<td>16.17</td>
<td>15.53</td>
</tr>
<tr>
<td>Population 80+</td>
<td>17,322</td>
<td>46,137</td>
<td>386,512</td>
</tr>
<tr>
<td>Women 80+</td>
<td>11,701</td>
<td>31,875</td>
<td>263,816</td>
</tr>
<tr>
<td>Men 80+</td>
<td>5,621</td>
<td>14,262</td>
<td>122,696</td>
</tr>
<tr>
<td>% of 80+ in the whole population</td>
<td>4.66</td>
<td>4.0</td>
<td>3.67</td>
</tr>
</tbody>
</table>

Source: ČSÚ 2012b, 2012a, 2013a, 2013b

As the table above shows, the elderly in Brno comprise a larger part of the population than on the regional and national average. In 2010, there were 66,299 people over 65 who represented almost 18% of the total population. This trend will continue over the next few years and experts predict that the share of elderly in the population will reach almost 30% (KPSS 2009). This potential increase in the demand for/need of elder care services in Brno might lead to a limited availability of these services. This problem is specifically important in Brno, as the share of 65+ and 80+ in the Brno population is clearly above the average.

In 2011, the capacity of institutional elder care beds numbered 2,185 in Brno. That year, 7,819 people used home based elderly services (Zpráva 2012). Departing from these numbers in Brno, 11.8% of the population older than 65 years used home care services and 3.3% of the population in the same age group used institutional care (elderly homes and special homes) in 2011. For the population 80+ the shares are 45.1% (home care services) and 12.6% (institutional care). Compared to the numbers provided by Maříková and Plasová (2012) for the Czech Republic in general – that is, around 10% (80+) and approx. 2.5% (65+) for institutional care as well as around 30% (80+) and approx. 8% (65+) for home care – the potential coverage by elder care services in Brno is much higher. This is also related to the fact that Brno as a regional centre (as the capital of the South Moravian Region) offers elder care capacities not only for the city’s own citizens, but also to the elderly living in the region.
4.3 Quality, Affordability, Accessibility of Elder Care Services in Brno

Quality of social services

The most basic quality criterion for the provision of social services in general, which also applies to elder care services, is their registration, as outlined in the Social service act, and consequently their authorization. Each provider registers for a particular type of service. The associated registers of social service providers are administered by the regional administration, according to the provider’s place of service provision (PSP 2012b) – the elder care services provided in Brno have to be registered with the administration of the South Moravian Region.

Qualification requirements for the staff providing services also help to guarantee certain quality standards. Social services are provided by social workers, and those social service workers need to have special qualifications which they must update regularly, through life-long learning courses. The basic educational requirement for social workers is a bachelor’s degree (after 3 years of study) in the subject of social work or social policy. Alternatively, the educational requirements for social service workers are met if they have a general certificate of secondary education in combination with a requalification course on social work accredited by the Ministry of Labour and Social Affairs. This course must contain at least 150 lessons and include theoretical and practical components (§ 37 of the Decree No. 505/2006 Coll., Implementing provisions of the Act No. 108/2006 Coll. Social Services, as amended).

In addition to the registration of social services and the required qualification for professional carers, the Annex 2 to the Decree No. 505/2006 Coll., on Implementing the Provisions of the Social Service Act, outlines another tool for quality control by defining three main categories of standards: procedural, personnel and operational. Based on these criteria, every provider establishes standards in accordance with their particular type of service. These standards are monitored by the inspection of social services on the part of the Regions and the MPSV. The inspections focus on the conditions as well as the quality of social service provided (PSP 2012c). Since the introduction of the Social service Act in 2007, these standards are binding (previously, they were only recommended by the Ministry of Labour and Social Affairs).

In this respect, it is still interesting to note that there are no laws regulating the staff-resident ratio in institutional care. According to the main national strategic document (MPSV 2007: 9), the staff-resident ration amounts on average to 1:1.5 which includes not only professional carers but also other (administrative, service) workers, and hence is not relevant for evaluating the quality of the provided care.

Affordability of elder care services

The fees for social services and elder care services are regulated according to the Social Service Act. Some types of social services are provided for free (primarily
consultations and day-care centres). However most of the elder care services are institutional or field services for which the elderly must pay. Elderly (and disabled) people may apply for the care benefit which they can use for financing informal or formal care. Decree No. 505/2006 Coll. (on Implementing the Provisions of the Act No. 108/2006 Coll. Social Services) specifies the maximum price for an hour of home care at CZK 100 (4 EUR) and the price of one day/month of institutional care at CZK 330/9,900 (13/396 EUR). In Brno, there are 14 professional agencies that provide home care. The price of an hour of care ranges from CZK 70 to 150 (2.8–6 EUR). Municipal care agencies offer lower prices than NGOs or churches. Some agencies have higher prices for care provided at weekends (which exceed the legal price limit). The most common price for one hour of care amounts to CZK 100 (PSP 2012a).

Based on these numbers, we can now calculate how many hours of home care services are affordable for dependent elderly who receive the care benefit (which is also a prerequisite for the entitlement to certain social services) in relation to the four dependency levels:

I. low (with a care benefit of CZK 800 / EUR 32): two hours of home service a week
II. moderately grave (with a care benefit of CZK 4,000 / EUR 160): 10 hours of home service a week
III. grave (with a care benefit of CZK 8,000 / EUR 320): 20 hours of home service a week
IV. total dependence (with a care benefit of CZK 12,000 / EUR 480): 30 hours of home service a week

Depending on the individual case and situation of the dependent elderly, these home care services potentially contribute to a better reconciling of care responsibilities and gainful employment. The question, however, is whether – especially in the cases of grave and total dependence – the available hours of home care allow the main carer in the family (in the majority of cases a woman) to combine their care responsibilities with full-time gainful employment. In this regard, the fact that part-time work is not very widespread in the Czech Republic (cf. chapter 1) can further complicate successful reconciling.

Institutional, residential elder care includes two types of care facilities: elderly homes and special homes. In Brno, there are 17 elderly homes which are operated by the city districts (10 of them), by NGOs (5) and churches (2). Two special homes are provided by NGOs and five by municipalities. The maximum amount for the provision of services in elderly and special homes is regulated by law and set at a maximum of 140 CZK/day for meals and 160 CZK/day for the stay in the facility, that is all in all 300 CZK/day and approx. 9,000 CZK/month. Elderly homes in Brno offer social services for monthly prices between CZK 6,720–9,870.

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5 Prices greater than 100 CZK (4 EUR) are paid mostly at weekends, at holidays and at other times that are unusual working times.
6 The indicated benefits refer to the care benefit for persons over 18 years.
7 Special regime homes (according to the Social service act, § 50) are homes for elderly (or younger) people with specific needs, most often for people with Alzheimer’s disease.

These fees have to be paid by the elderly, however they also have the right to apply for the care benefit, which – according to the level of dependency – they can use to buy certain additional care services. Compared to the average old-age pensions of pensioners in the South Moravian region in 2010, which amounted to 10,003 CZK (400 EUR) and was slightly lower than the average pensions in the Czech Republic (10,123 CZK / 405 EUR) (ČSÚ 2011), the fees range from 67% – 98% (for elderly homes) and 67% – 91% (for special homes) of the average old-age pensions. In this respect, it is further important to note, the law also regulates the use of the old-age pensions for paying for a stay in a special or elderly home: 15% of the old age pension should be left to the elderly for his/her own needs. Differences between the fee charged by the elderly or special home and the elderly’s old-age pension available for paying it are either financed through subsidiaries by the MPSV or by the care facility. However at the same time, the social service provider is allowed by law to ask for the payment of part of these costs from those persons who are obliged to provide for the persons’ subsistence (that is, parents, children, husbands, wives).

**Accessibility of elder care services**

The person with care needs usually has to apply for a social service. Part of the application is a medical statement (degree of sickness) including diagnosis, medical history, etc. (MPSV 2012a). As outlined before, home care, senior houses and day care centres for the elderly are services for which users have to pay a part of the costs. The fees can be covered by the care benefit. The confirmation of the entitlement to receive the care benefit (or at least an application for the benefit) is a part of the application for the social service. The described conditions of application also apply for home based services and for institutional care.

The key issue related to the accessibility of elder care is the capacity of these social services. As discussed in the previous section on the welfare mix of elder care services in Brno, the potential coverage of residential elder care services in both age groups (65+ and 80+) is significantly higher than on national average. However, these capacities are not only provided to the elderly living in Brno. This is underscored by the fact that institutional care is characterized by high numbers of unsuccessful applicants. The only data available in this respect are for the regional level, that is, for the South Moravian Region. In 2011, 9,763 applications for institutional care in elderly homes in the South Moravian region were rejected whereas 2,964 used elderly homes that year (MPSV 2012b, cf. table 4.5). Hence, based on these numbers, the demand for institutional elder care services exceeds the offered capacities by more than three times. However, these data are biased by the fact that people know the problem of insufficient capacities and submit applications in advance, often at a time when they do not yet need a place. According to experiences of social service providers, the waiting times for a place in an elder care facility are about 2 years (Domov 2012).
Table 4.5 Unsuccessful Applications in Residential care in the South Moravian Region in 2011

<table>
<thead>
<tr>
<th></th>
<th>Elderly homes</th>
<th>Special regime homes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of users</td>
<td>2,964</td>
<td>2,008</td>
</tr>
<tr>
<td>Unsuccessful applications</td>
<td>9,763</td>
<td>3,466</td>
</tr>
</tbody>
</table>

Source: MPSV 2012b

Opening times are different for ambulatory, field and institutional care. Home care and ambulatory social services (e.g. day care centres) for the elderly are commonly provided on working days from 8 a.m. to 4 p.m. (in certain cases until 5 or 7 p.m.). Homecare is also provided at weekends by 86% of providers. Some providers, however, offer only the delivery of prepared meals at weekends. The institutional services provide non-stop care for elderly users (KPSS 2009). The opening hours are partly regulated by the Decree No. 505/2006 Coll. on Implementing the Provisions of Act No. 108/2006 Coll. on Social Services. Every provider specifies opening times according to the needs of users and according to the capacity of the social service during the process of social service registration. The regional authority considers whether the opening times (and capacity, etc.) are sufficient for the given type of social services (e.g. elderly homes, home care, etc.) and decides about the registration of the particular social service. There is no regulation related to the number of hours that can be provided to one user on one day. Hence, the main potential limitation to the use of these services is the ability of the person-in-need to pay for a specific number of care hours.

We do not have detailed local data available on home care services. According to the data provided by Maříková and Plasová (2012) for the Czech Republic, the number of clients per carer providing home care services tripled between 1990 and 2006. Thus despite the good accessibility of these services, this trend might mean a worsening in the quality of provided services.

Public spending on elder care services in Brno

Social services for the elderly are most heavily funded by the municipality. In the last five years, between 47% and 63% of all financial subsidies for social services were used for elder care. The following table gives an overview of the financial subsidies (grants) to non-public providers over the last four years. About one third of these subsidies are targeted at institutional care. As mentioned above, non-public providers offer first and foremost non-institutional elder care services.

Table 4.6 Municipal Subsidies for Elder Care Provided by NGOs and Churches (Registered Social Services)

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>CZK</td>
<td>22,029,000</td>
<td>22,565,000</td>
<td>28,220,000</td>
<td>27,430,000</td>
<td>27,790,000</td>
</tr>
<tr>
<td>EUR</td>
<td>793,495</td>
<td>904,699</td>
<td>1,067,120</td>
<td>1,084,618</td>
<td>1,130,318</td>
</tr>
</tbody>
</table>

Source: Division of Social Affairs at the Brno municipality
Public social services provided by municipalities are financed by the Brno City budget. Data from 2010 are available from the Report on the activities of the statutory city of Brno in the year 2010 (Magistrát 2011) and are summarized in the following table.

**Table 4.7 Operating Expenditures Funded from the City Budget in 2010**

<table>
<thead>
<tr>
<th></th>
<th>Home care</th>
<th>Elderly homes and special regime homes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CZK</strong></td>
<td>79,016,000</td>
<td>259,109,000</td>
</tr>
<tr>
<td><strong>EUR</strong></td>
<td>3,124,397</td>
<td>10,245,512</td>
</tr>
</tbody>
</table>

*Source: Magistrát 2011*

Based on these basic data, we can now calculate and compare some key figures related to the presented expenditures. In this respect we will focus on the expenditures by inhabitant, by elderly 65+ as well as by elderly 80+ (as of December 31st, 2010) and compare the financing of elder services in general (all providers), of elder care services provided by the municipality as well as municipality home care services vs. residential services – as outlined in Table 4.8

**Table 4.8 Elder Care Expenditures in Brno by Inhabitant, Elderly 65+ and Elderly 80+ (in CZK⁸)**

<table>
<thead>
<tr>
<th></th>
<th>Municipality spending for all service providers</th>
<th>Municipality spending for services provided by the municipality</th>
<th>Municipality funded home care services</th>
<th>Municipality funded residential care services</th>
</tr>
</thead>
<tbody>
<tr>
<td>per inhabitant</td>
<td>984</td>
<td>910</td>
<td>212</td>
<td>698</td>
</tr>
<tr>
<td>per elderly 65+</td>
<td>5,514</td>
<td>5,100</td>
<td>1,192</td>
<td>3,908</td>
</tr>
<tr>
<td>per elderly 80+</td>
<td>21,104</td>
<td>19,520</td>
<td>4,562</td>
<td>14,958</td>
</tr>
<tr>
<td>per client</td>
<td>36,540⁹</td>
<td>36,315¹⁰</td>
<td>10,665¹¹</td>
<td>136,230¹²</td>
</tr>
</tbody>
</table>

*Source: Authors’ calculations*

The most striking result of these calculations is the ratio of municipally funded home care to residential care services, which is interesting especially in regard to the aims outlined in the Social Security act. More than three quarters (77%) of the municipality’s funding of elder care services is related to residential care services. The ratio raises the question of whether the goal of de-institutionalization of care

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⁸ The average exchange rate in 2010 was 25.29 CZK per 1 EUR.
⁹ Municipal spending for all service providers (including grants) 365,555,000 CZK divided by the total number of clients using elderly services by all providers.
¹⁰ Municipal spending for services provided by the municipality, that is, home and residential services 338,125,000 CZK divided by the total number of clients using municipality services (home and residential care).
¹¹ Municipal spending for home care services 79,016,000 CZK divided by the number of clients using home care services.
¹² Municipal spending for residential care services 259,109,000 CZK divided by the number of clients using residential care services.
services outlined in the Social Service Act has been successfully implemented in Brno. Especially if this point is related to the fact that the waiting times for a place in an elder care facility are rather long.

Municipal subsidies are, however, only one source of financing of social services in Brno. All social service providers ask the MPSV for state subsidies. Non-public providers (NGOs and churches) ask for grants from various foundations, private donators, European grants, etc. to be able to meet social services demands in terms of quality and capacity.

4.4 Conclusions – Elder Care Services in Brno

The major issues which importantly characterize the current overall elder care situation in Brno are of whether the care benefit works as it should and what impact this has on informal (predominantly female) carers, as well as the problem of capacity in institutional elder care facilities. As far as the former is concerned, the information presented in this chapter, rather suggests that even though the care benefit seems to allow the elderly to buy care services, it remains unclear to what extent this benefit supports the informal carers’ reconciling of care work with gainful employment. In this respect, the central question is, whether this benefit is high enough to allow access to professional home care services to the extent that the informal carer is able to maintain full time employment, especially in cases of grave or total dependence. This is especially important as the level of the care benefit for this dependence level only partly compensates for the loss of income if the informal carer has to reduce working hours or even quit his/her job.

The relevant policy documents, however, rather ignore this central point. Though the current policy framework partially recognizes the informal carers’ problem of reconciling of work and care, it does not propose measures which would support a greater gender equality (that is a stronger engagement of men in informal care work). Rather, women’s greater share in informal care work is taken for granted. Hence, the problem of reconciling their care work with (full-time) labour market participation essentially remains a private issue.

At the same time, the predominantly female informal carers have only a very limited range of alternatives to informal care (in combination with professional home care) and its reconciling with full-time labour market participation: neither does the level of the care benefit compensate informal carers at a level that would allow them to leave their job or reduce their working hours, nor does the system of elder care services provide sufficient capacities in institutional care facilities. The latter is especially a problem of time. The long waiting times of approximately up to two years do not provide much space for reacting to unexpected changes in care needs. Hence, even though the strategic policy documents define institutional elder care facilities as a kind of last resort, for cases where the dependent elderly loses his or her self-sufficiency to an extent that can no longer be handled in the „natural“ family environment, the presented information suggests that these institutions do not work in this way. From this standpoint, the current common
approach of applying for places in elder care facilities (long) before an urgent need arises is a strategy of dealing with this inflexibility, which, at the same time, increases the problem of long waiting times.

These issues are not just a simple matter of local elder care policies; rather they are importantly related to the national policy framework for the provision of elderly care, most importantly to the design of the care benefit: even in the case of an elder’s complete dependency, it pays only for a maximum of 30 hours of professional home care a week. This means in cases where a dependent elderly person has completely lost his/her self-sufficiency and needs more or less 24 hours care, the informal carer is forced to reduce her (his) employment and still has non-stop caring duties for the rest of the day (without spare time or a compensation for lost income). What can be done at the local level is to increase the support of institutional care facilities and to make institutional care alternatives easier and more quickly available. This is much more expensive than promoting professional home care support, however, and thus it is a matter of financial resources; currently, already more than three quarters of elder care spending in Brno goes to institutional care facilities. This fact complicates calling for extending this funding. Moreover, an extension of institutional elder care facilities partly contravenes the basic idea of the current policy framework, that is, the support of care in the elder’s natural environment. Thus, options for change at the local level are importantly limited by the national policy framework.

Given the elder care policy background outlined in this chapter, the question arises, how informal carers living in Brno manage to reconcile paid work with their caring responsibilities and how they evaluate the current system. In chapter 6 we will therefore draw on the results of two focus groups, which were organized with employed women with elder care responsibilities living in Brno to take a closer look at the questions discussed in this chapter and to elaborate on the respondents’ decision making on care and work, as well as their reconciling strategies.

In this sense, the two chapters of part II have provided key information on the institutional and policy context of women’s care work, for both pre-school children and the dependent elderly in Brno. As the evaluation of the related policy areas has shown, both the policy context and the related provision of care services have potentially constraining effects on the integration of women to the labour market (especially in the case of care responsibilities for pre-school children younger three years) and their successful reconciling of gainful employment and care responsibilities. Therefore, in the last part of the book, we turn to women with care responsibilities living in Brno in order to garner more detailed information on their situation and how they manage it.
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Other sources

Conducted Interviews (Brno, October 2011)

Interview No. 1 Head of the Office for City Strategy at the Brno municipality
Interview No. 2 Responsible for the creation of the city strategy and regional cooperation at the Brno municipality, associated with the office for City Strategy
Interview No. 3 Head of the Department for the Implementation of the ESF at the local Southern Moravian branch of the Labour Office
<table>
<thead>
<tr>
<th>Interview No.</th>
<th>Role Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Head of the Pedagogical Organizational Department at the Division for Education, Youth and Sports at the Brno municipality</td>
</tr>
<tr>
<td>5</td>
<td>Responsible for requalification at the local Southern Moravian branch of the Labour Office</td>
</tr>
<tr>
<td>6</td>
<td>Chairperson of the Brno Deputy Mayor’s Advisory Board for Families</td>
</tr>
<tr>
<td>7</td>
<td>Head of the Department of Cooperation and Development at the Division of Social Care at the Brno municipality</td>
</tr>
<tr>
<td>8</td>
<td>Head of an elderly care facility</td>
</tr>
<tr>
<td>9</td>
<td>Head of the Division for Health at the Brno municipality</td>
</tr>
<tr>
<td>10</td>
<td>Chairperson of the social-democratic women</td>
</tr>
<tr>
<td>11</td>
<td>Responsible for families / family policy at the Division for Health at the Brno municipality</td>
</tr>
<tr>
<td>12</td>
<td>Head of the Centre for Specialized Children’s Health Services in Brno</td>
</tr>
<tr>
<td>13</td>
<td>Head of the Commission of the Brno City Council for Health and Social Issues, ODS</td>
</tr>
</tbody>
</table>
CHAPTER 5
Women’s Strategies for Reconciling Paid Work and Care Responsibilities for Pre-school Children in Brno

In this chapter we present the key results of two focus group discussions (one with women with higher educational attainment and one with women with lower educational attainment) which were organized in March 2013 with employed women with pre-school children living in Brno. In our analysis, we primarily focus on how these women manage to reconcile their gainful employment with their care responsibilities. After an overall outline of the method of focus group discussions, the presentation of our results begins with how meaningfully the respondents perceive their employment. We then move on to their reconciling strategies and based on that will analyse their decision making on both their labour market integration as well as their care arrangements.

Focus Group – Method

The focus group (FG) discussions (cf. e.g. Morgan 1996; Myers 1998; Wilkinson 1998) were organized to gain insight into the decision making processes of women at the micro level, to analyze how mothers with pre-school children make decisions about work, care, reconciling work and family lives as well as to interpret what kind of policy changes they would propose and desire. These were the key questions discussed in the FG.

The literature on FG concentrates mainly on design, participant selection and organization (e.g. Greenbaum 1998; Hennink 2007; Kitzinger & Barbour 1999; Krueger 1998a, 1998b; Krueger & Casey 2000; Morgan 1997). Based on this theoretical background, we conducted two focus group interviews: one with mothers having a low level of education (ISCED 1-3) and one having a high level of education (ISCED 4-8). In both groups all the mothers had at least one pre-school child and all of the mothers were employed. That is, all of the respondents were employed either full or part-time (based on temporary or permanent working contracts), or were self-employed. In order to ensure a certain diversity of childcare experiences/decisions, a quota related to the age of the child and, based on the experiences from our pilot groups, the form of the mothers employment (in order to prevent a group made up predominantly of self-employed mothers) was applied. The recruitment was organized by a social research firm with whom we cooperated on the organization of the focus groups. Additionally, two stand-by participants were recruited in order to make sure that 8 participants would take part in the focus group. Both focus group discussions were fully transcribed and analyzed based on an interpretivist approach (Sayre 2001) seeking to understand how the FG participants make their decisions in the context of and in interaction
with relevant macro structures of welfare state provision and what meanings they ascribe to these structures.

Both focus groups followed a pre-defined schedule which focused on four central topics: women’s work; childcare arrangements; facilitators of, and barriers to, mothers’ working lives; facilitating women’s working lives and policy change. The questions related to these topics are outlined at the end of the chapter, together with a list of all of the participants. The following presentation of results and their analysis is primarily related to the discussion of the first 3 FG themes. The policy recommendations which were brought up by the FG respondents during the discussion will be integrated in the concluding chapter of this book.

The presented design of the FLOWS focus groups importantly adds and contributes to existing research on the topic of mothers’ return to the labour market after parental leave in the Czech Republic. Earlier related qualitative research (cf. e.g. Křížková et al. 2011; Bartáková 2009) focused on general patterns of how and when women manage to return to the labour market after having a baby. As this research showed, in the majority of cases mothers perceived their return to work as a conflicted situation, where childcare values interfered with structural and institutional factors. Predominantly, this conflict was solved by postponing the mothers’ return to the labour market (Křížková et al. 2011; Bartáková 2009). The research design presented above, by contrast, puts special emphasis on those factors, which enable an early return. That is, by concentrating on mothers, who returned to the labour market before the end of the maximum length of parental leave benefit support (before their child’s third or fourth birthday), the research aims at identifying those factors which enabled the mothers to resolve the conflicted situation in favour of a return to the labour market. Hence, it further elaborates a point which has so far partly remained underresearched in the Czech Republic. Moreover, the participants of the FLOWS focus groups, which were held in Spring 2013, had already partly made their decisions in the context of the new parental leave benefit legislation or at least had had the possibility of changing to this new model. Hence, though this was not the primary focus of the presented research, it also provides information on this point, and therefore adds to the earlier research, where the respondents’ decision making was related to the single 4 year model (Bartáková 2009) and to the 2008 reform establishing 3 different tracks (Křížková et al. 2011).

5.1 The Meaning of Work

In both focus group discussions, the respondents brought up a wide range of reasons for why they are in gainful employment. The reasons cited were the intrinsic, financial and social aspects of their work. However, while the discussion in the group with higher educational attainment centred on intrinsic aspects of work (like self-realization and fulfilment), the group with lower educational attainment discussed more intensively issues related to financial necessity and

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1 The names of the respondents have been changed.
financial constraints. In this respect there was a striking difference between the groups in that a large majority of respondents with lower educational attainment faced a very insecure labour market situation before or during their pregnancy (none of the FG participants from this group actually returned to the work they had before their pregnancy). In this situation, the fear of unemployment became a central motivation for returning to the labour market before their children reached the age of three. In contrast, the majority of FG participants with higher education returned to their former jobs. These differences show that women with lower educational attainment often face a more insecure situation in the labour market (e.g. fixed term contracts) and are more at risk of their employers bypassing the protective regulations for pregnant workers outlined in the labour code. The data presented in Chapter 1 show, that for women with children aged 3–5, that is, for women returning to the labour market after having a baby, the risk for unemployment in Brno is twice as high as for women without children in the same age group. In this respect, the focus group discussions showed that women with lower educational attainment are even more aware of this risk. Nevertheless, also respondents with higher educational attainment remarked on this problem. While the FG participants with lower educational attainment worried more about meeting their basic economic needs and were scared of being unemployed, the FG participants with higher educational attainment were more motivated by a desire to preserve a certain standard of living. Statements of Marta and Hilda (from the group with lower educational attains), and Milena (from the group with higher educational attainment) exemplify this contrast:

**Moderator:** … did it occur to you that you were at home too long and that it could be a problem to go back afterwards?

**Marta** (27/2/LE): Well, overall to find work after, yeah, because I know people who have been out of work for several years, and I said I don't want that. I would definitely regret it. So I just asked around for temporary work, but there was no temporary work, and then this position became available, so I expressed my interest in it and took it.

**Hilda** (27/2/LE): … I really went to work because I said to myself that there's no work, so I am going to get a head start looking for a job, so I don't end up at the unemployment office. I also took that job mainly because, well, since I am an operator, I can choose when I go. The working hours there are pretty flexible, because they are there until 9 p.m., so when my husband comes home from work, then I can go.

**Milena** (31/2/HE): Partly for financial reasons, so that my husband and I can take a vacation. I don't know; sometimes just to have more.

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2 The information in brackets indicates the age of the respondent, the age of her youngest child as well as her educational attainment (LE – lower educational attainment, ISCED 1-3; HE – higher educational attainment, ISCED 4-8).
Because that income of 7,600 CZK\(^3\) just brings you down financially. We have a loan to pay off, just like almost everyone else today. That was another reason.

At the same time, the participants of both groups agreed that currently, in times of financial crisis, the situation for women with preschool children on the labour market in Brno is not easy and all of them appreciated having a (more or less) secure job. Given this situation, several respondents of both groups reported that they just seized a particular opportunity to return to the labour market.

Intrinsic factors that make work meaningful (like self-realization and fulfilment, further development, the use of one's education, etc.) were more important for the FG respondents with higher educational attainment. In part, this may be related to the fact that a majority of the FG respondents with lower educational attainment – as they stated – were just happy that they had found any kind of job that would allow them to earn a living. That is, for them escaping the threat of unemployment and/or the possibility of reconciling work and care was more important than the nature of their work (e.g. Johana started working as a gas station attendant, and Hilda found a job as an operator in a call centre). However for participants in both groups employment was meaningful, as they contrasted it positively with their childcare and household duties. For both groups, gainful work is related to receiving a different (more positive) kind of recognition from their jobs, than for their work in the household and in relation to childcare. The statements of Milena, Helga and Hilda serve as typical examples for this point.

**Milena** (31/2/HE): Because probably like my colleague here, being at home doesn't make me happy.

**Moderator**: Why, why not?

**Milena** (31/2/HE): I'd say that I'm not the type of mother that is going to be with one child, or two, at home for six years. That's just not…

**Moderator**: And what are you missing there, or why?

**Milena** (31/2/HE): That monotony. And the chance to meet people that are taller than a meter. I mean that in quotation marks. /laughter/

**Helga** (42/2/HE): Work fulfils me, too. You know, I help people, and essentially at home, just like my colleague here said, everything is just automatic. You know, my husband doesn’t thank me for anything. That’s really what fulfils people more.

**Hilda** (27/2/LE): If I may, I’d like to say something similar. Really, I was at home with my first daughter for almost six years, so I went back to work earlier voluntarily because of being among people, and I no longer enjoyed being at home.

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\(^3\) The average exchange rate in 2013 was 25.974 CZK per 1 EUR.
Hilda’s comments point to another vital aspect making the respondents’ work meaningful – the importance of social contact. The FG participants appreciated working with their colleagues. Participants from both groups saw the possibility of socializing at their job as being especially meaningful and they contrasted this with their feelings of isolation when they stayed at home with their children. This very positive perception of their labour market participation as meaningful is related to the tradition of women’s full-time employment discussed earlier (cf. Chapter 1), which was established in the country during communist rule and remained important after the fall of the communist regime (Čermáková et al. 2000; Křížková 2003).

At the same time, this (traditionally) rather strong orientation towards work, as well as the awareness (especially of the FG respondents with lower educational attainment) that long parental leave increases the risk of unemployment, stands in clear contrast to the ideal of childcare prevailing in the Czech Republic and Brno (cf. Chapter 3) and hence creates a potential dilemma for the respondents. In the following we will take a closer look at the respondents’ strategies for reconciling gainful employment with care responsibilities and present how they managed to solve these normative tensions between prevailing childcare ideals and their work orientation. Subsequently we will discuss the key factors in the respondents’ decision making about their labour market integration and care arrangements and how the decision making has been supported and/or constrained by local childcare policies.

5.2 Prevailing Care Arrangements

Children aged 0–2

Despite the prevailing ideal of personal home-care, ideally by the mother, until the child reaches the age of three (as outlined in Chapter 3), some of the FG respondents returned to work earlier; hence they had to find a childcare arrangement that allowed them to do so. For the group with lower educational attainment, the most important childcare arrangement was care by close relatives (most importantly the child’s grandmother or great-grandmother, but also aunts) or arrangements where the respondents shared their childcare duties with their partners based on flexible and/or part-time working arrangements. Private childcare institutions were more affordable for women with higher educational attainment (though they also complained about the high fees). Nevertheless, even for this group the most popular childcare arrangement was care by close family members. In some cases, the respondents shared their childcare duties with their partners by working flexible hours. Some of the participants also used institutional childcare; however, they did so mostly on a part-time basis.

The most important reasons for choosing the respective childcare arrangements are availability, trust in the carer/caring institution and ideas about the well-
being of the child. The reasons vary in importance between the two focus groups, especially when it comes to childcare arrangements for children under three. For the respondents with lower educational attainment, financial availability plays a central role and limits them more or less to childcare arrangements where close family members play a central role in care or to working time arrangements between the partners. The following comments by Lea and Jolana are good examples:

**Moderator:** ...so basically you only considered having a relative babysit?

**Lea** (28/2/LE): Yes, yeah, only like that.

**Moderator:** So then, you didn't seek out any other possibilities... didn't get any information?

**Lea** (28/2/LE): Well, yeah, there was no other possibility, because you have to be three to go to kindergarten, and that is if, like this woman said, if they accept your child, because today it's a horrible problem, because there aren't enough kindergartens, and so on. And so there is no other possibility besides this one.

**Moderator:** What about the rest of you?

**Jolana** (32/2/LE): Well, I totally agree with her, totally. I mean, it just never occurred to me to find anything out at all, because that would be a waste of time. No one will take my two-year-old, and I didn't have enough to pay some girl to babysit, or for a nursery school.

At the same time, the respondents present these arrangements as favourable, as the care is provided by people whom they fully trust and additionally provide children and other close family member with an opportunity to socialize. Hence care stays within the family, which is considered to be important for the good of the child, especially for children under the age of three. The statements of Marcela, Jolana and Johana are good examples for this point:

**Marcela** (20/1/LE): Well, definitely, the family works. It's not a stranger, and the child forms a kind of relationship to the family, not only to their parents, but to all the other members.

**Jolana** (32/2/LE): ...I have faith in them and I can leave and I don't have to call in two hours: “Are you alive? Did you cross the street ok?”

**Johana** (39/5/LE): Well, the biggest positive really is that it's family. That grandma is babysitting...She likes her grandmother; her grandmother likes her and she has dogs at home.

In the higher education FG, this latter point that care stays within the family is the central reasoning for the respondents’ childcare arrangements. Here, as well, childcare arrangements within the family environment are presented as being the
most favourable for children under the age of three. In the following quotes, Petra and Jitka also use the argument that their children are not only their children (together with their partners), but also part of a larger family circle and that the members of this larger circle also have a “right” to be with the children and “enjoy” them. The children should be able to socialize within this wider family.

**Petra** (34/2/HE): *I just wanted to add that I believe that it doesn't matter if a child is not with his mother a few hours per day. I think both mother and child must have a rest from time to time. And of course if you have parents (I have a mother-in-law), you have to give others in the family space. That child isn't only mine or my husband's. I take it as a plus that grandmothers and grandfathers can babysit.*

**Jitka** (30/3/HE): *Let them enjoy it too.*

Petra's quote also exemplifies another central point. By placing the care arrangement in the wider family circle and/or actively involving the partner in the care arrangement, the respondents reject essentialist understandings of motherhood, which define the mother as the central (and often only) caring figure for children under the age of three. Rather, the choice of the carer is related to existing relationships of trust and the idea that caring tasks should remain within the family. Nevertheless gender is relevant, given the fact that the child's grandmothers play a key role here. At the same time the respondents of both groups reported that it is vital for them not to get trapped in the role of a “superwoman”, who is able to handle everything – job, household and childcare duties – on her own, without the help of her partner. Hence, the respondents perceive and accept their partners as competent to actively (and fully) participate in childcare duties.

The clear preference for care arrangements within a closer family circle is moreover supported by a certain distrust in institutional childcare for children under three years. This was first and foremost articulated in the FG with higher educational attainment (in the group with lower educational attainment, institutional childcare was precluded mainly for financial reasons and no detailed discussion of the quality of these services developed) and is exemplified by the following statements of Alena and Petra.

**Alena** (39/2/HE): *For me maybe, if I may, it's about development. Because today I see first and second graders who don't even know what a cow is. Now, one first grader announced that a cow has a calf with a reindeer. You have three, four, maybe five years to show kids colours and animals and so on, and I doubt that in nursery schools they sit with children on their laps with a book reading nursery rhymes. They can't possibly manage to do that.*

Alena contrasts institutional childcare to individual care by the parents or a close family member. For her, the quality of institutional care can never equal
home care when it comes to supporting and stimulating the child’s development. In this regard, Alena assumes that an institutional arrangement cannot provide individualized care comparable to a family arrangement and implicitly refuses the idea/possibility of professional high quality childcare for children less than three years of age. This picture of institutional childcare for children under three refers to and assumes the “mass care” provided in communist nurseries (cf. Chapter 3). In the following quote, Petra distrusts nurseries in a similar way and defines them rather as a last resort for parents who are under financial pressures and thus have to return to work.

**Petra (34/2/HE):** I think that as long as the parents have the option, children should be at home until they are three. I don’t think that crèches are good things, but that’s just my personal opinion. But if it’s because of money, well, then that parent has to go to work, and that child has to go to a crèche. I understand it. Luckily, I am in a position where finances aren’t forcing me to go to work full time and aren’t forcing my child to go to a nursery school. When I do the math, it wouldn’t pay off financially.

This negative perception of and distrust in institutional care might partly be related to the fact that nurseries under the communist regime, but also after its fall, have been (institutionally) defined as a health care institution simply overseeing children, without any specific further added value for the child. The main legitimization for nurseries under communism was the unburdening of mothers from childcare duties in order to allow them an early return to gainful employment (cf. Chapter 3). This is a picture that was partly also presented by the FG respondents, when talking about nurseries (e.g. Petra, Alena). Similarly, other private childcare institutions which provide care for children up to the age of 3 are not perceived by the FG respondents as providing some kind of general added value. Rather, some of the respondents (e.g. Linda, Jitka) questioned the quality of these institutions in comparison to public kindergartens. This might also be related to the fact that, from a legal point of view, these private childcare institutions have to fulfill first and foremost organizational and hygiene standards, but are not bound by quality standards relating to the program and care they provide for the children (as are public kindergartens).

The preference for care arrangements in the circle of close family members is further underscored by those FG respondents who (partly) deviate from the norm. For example, FG participants who use part time institutional childcare explain that they do so in order to meet certain needs that cannot be met within the family care arrangement. These needs include socialisation or sports opportunities for the child – Jitka; the child wanting to attend the same institution as his/her sister/brother, or, in the context of the overall childcare arrangement, the desire to unburden a relative caregiver such as a grandmother – Jitka and Helena.
Jitka (30/3/HE): … her grandmother does take care of her, but it is different. She needs to be in a group of children. So we started to look for nursery schools on the Internet. Some private nursery… And now she goes to a nursery school that is near the woods and there is absolute peace and quiet there, and it’s very sports-oriented. Yeah. Because she is the kind of person who needs to have energy.

Helena (30/2/HE): … I actually sent my second child earlier. You see, he was used to us always bringing little Jana to school, so he wanted to go too… he was crying to me the last few months that he wanted to go too. So he was absolutely satisfied that finally he could go to nursery school, too.

Hence, the available childcare institutions for children aged 0–2 are perceived and presented as good solutions only in relation to individual cases and specific situations, in which they provide a certain added value, which cannot be provided within the wider family, or which importantly complement the otherwise preferable family arrangement.

That is, the way the majority of FG respondents present and reflect their childcare arrangements importantly overlaps with the national ideal of care in terms of refusing full-time institutional childcare for children under the age of three and favouring individual care by close family members, whom they trust. Hence, when it comes to how the respondents perceive the childcare needs of their children, they highly emphasize the child’s need for a stable emotional relationship with the person who cares for them and actually see the overall development of their children as best supported in a care arrangement within a circle of close family members. By doing so, the respondents keep up the basic anti-institutional orientation of the national ideal of care in relation to childcare for children under three years (cf. Chapter 3). At the same time, they question the fundamental idea of motherhood and the need for full-time care by the mother, which is related to this ideal. Based on that, the respondents stretch and bend this ideal of care by replacing personal full-time care by the mother, either through a care arrangement that involves both partners or another close family member. This renegotiation of the prevailing ideal of care, however, does not remain without social sanctions. Several respondents reported that during their decision making on whether or not to return to work, they were confronted with accusations that by returning to work before their children reached the age of three they would be neglecting their childcare duties. For example, Petra reported that her mother-in-law blamed her for leaving her children alone with their father at a very young age, as she believed that he was not able to handle them. This shows that questioning the fundamental idea of motherhood potentially produces negative social feedback. We will turn in more detail to the ways the normative and/or policy context constrain the respondents’ decision making on their labour market participation and their care arrangements in part 5.3. However, before we do that, we will take a look at the prevailing care arrangements for children aged 3–5.
Children aged 3–5

The perception of institutional childcare changes diametrically (in both groups) when the discussion comes to public kindergartens. In relation to this public institution, the overall idea prevails that kindergarten provides children with certain advantages that family care is not able to provide – most importantly, socializing with other children. This socialization was repeatedly cited as an important justification for institutional childcare outside the family. Hence, kindergarten is clearly the preferable and ideal childcare solution for children at the age of 2.5/3 years, because the child is able to socialize in a collective. This cannot happen within the family. The following quote by Alena gives a very good example of this:

Alena (39/2/HE): *If I could say something. I have spent nine years at home since my first child and I have always said that the Germans invented kindergarten and that besides nursery schools Germans also invented concentration camps. So basically I never wanted my children to go to kindergarten. My firstborn, he went to kindergarten because, well, he had to. Only for the last year. And my second child, because I got that wonderful offer from that recruitment agency, I sent him to nursery school when he was four, and the tears were just rolling out of me, just squirting out, and here I was, excuse the expression, like a bitch, leaving that boy there in that horrible institution. But he was very happy and so I figured out that I am not an uncaring mother, that I am not a bitch, and that what I was doing was giving him a group to belong to. And still today whenever we go down Kotlářská Street, he points and says, “That’s where I went to kindergarten!”*

From this point of view, the child’s need for socializing within a collective of children of their own age group is a central childcare norm (cf. Chapter 3). Traditionally, this idea has been especially related to kindergarten and the age of 3 years, though some respondents also identify this need with younger children at the age of approx. 2 or 2.5 years. Hence, for children in the age group 3–5, the focus group respondents of both groups agree that a place in a public kindergarten is the ideal care arrangement, and at that age it is important for the good of the child. Moreover, during the FG discussion, the fact that some of the respondents used the childcare provided in kindergartens as a kind of benchmark for evaluating and mainly criticizing private childcare facilities providing care for children under 3 years, shows the respondents’ trust in these institutions.

However, in both groups the FG participants strongly agreed that the capacity of these institutions is often limited and not all respondents were successful in finding a place in a public kindergarten when they wished to do so. Before the recent baby boom, the system also allowed parents to place their child in kindergarten at the age of three. However, in recent years this has become more and more complicated even for children at the age of 4. This situation is seen as
very problematic and the lack of kindergarten places was a central topic in both groups.
The alternative for this age group is private childcare institutions. They are, however, offered at a considerably higher price than public institutions. This first and foremost limits accessibility for the FG participants with lower educational attainment and at the same time puts normative pressure on them, as they basically agree with seeing kindergarten as an important childcare institution. This is exemplified in the following quote by Lea:

**Lea** (28/2/LE): *Like Marta said, I think that it’s important for a child to be in a group. I mean there is that disadvantage that he is constantly sick, but otherwise belonging to a group of children is really important, so I would like to provide that for him. I even thought, you can pay for a nursery school for one day or something, but maybe, like, I don’t know. It’s just…*

Participants of the higher education group also discussed the problem of financing this kind of childcare and complained about the high prices. As a result, these participants perceive private childcare rather as a part-time care option, which, compared to a full-time arrangement, is cheaper and hence financially easier.

Thus it is shown that in relation to childcare for children aged 3–5, the focus group respondents present and reflect their childcare arrangements within the national ideal of care and perceive kindergarten as a valuable childcare institution. Based on this perception they problematize the lack of kindergarten capacity, which complicates their return to the labour market. Though many of the FG respondents returned to the labour market before their child reached the age of 3, still, some of them were dependent on the availability of a (public) kindergarten place to be able to restart their gainful employment. The following case of Linda is a good example in this respect:

**Moderator:** *And did the fact that you have had a kindergarten since then have any influence? Or…*

**Linda** (26/3/HE): *It was more like if I didn’t have the opportunity of kindergarten, I wouldn’t even be able to afford it.*

**Moderator:** *So, your daughter was in kindergarten, so you considered going to work, right?*

**Linda** (26/3/HE): *Hmm. It was more luck, because it’s not exactly easy to find a kindergarten in Brno.*

As she had no alternatives available (like care by a close family member or sharing caring duties with her husband, paying for a private childcare facility), she did not have much choice about whether or not to return to work early. Rather, for her, a public kindergarten place was the key prerequisite for returning to work. Linda’s example shows how the current lack of kindergarten places contributes to an insecure situation where women (and men) with pre-school children often
do not know when they will be able to return to work. This also makes it harder to look for a job.

This problem of a lack of capacity in public kindergarten and the related selection criteria were discussed repeatedly in both focus groups. In this respect the FG respondents also mentioned bribery as one possible way to solve this dilemma. Jitka (HE) and Lea (LE) talked about the possibility of “sponsoring” the kindergarten in order to secure a place for the child. The other respondents agreed that they also heard of such practices, where the head of the kindergarten hands over a list of items the kindergarten currently needs to “interested” parents. Though the respondents saw this as a problem, at the same time they understood that parents agree on “sponsoring”. Jitka admitted that for her, buying such items is still more advantageous than paying the high fees of a private kindergarten. Blanka was also able to place her child to a public kindergarten at the age of 3 mainly because of the intervention of some (not further specified) acquaintances. Based on these experiences and rumors about bribery, the respondents also had the impression that they could not fully trust the point system by which children are ranked and selected for the available kindergarten places.

5.3 Decision Making on Labour Market Integration and Childcare Arrangements

Based on the above discussion of the respondents prevailing care arrangements, in this final section of our analysis we will now focus on those factors which appeared to play an important role in the respondents’ decision making on their labour market integration and childcare arrangements. These are: the availability of close family members (the child’s grandmother, great grandmother, aunt etc.) and their willingness to participate in the childcare arrangement, flexible work arrangements (flexible working hours and/or part time work), the active integration of the child’s father in the care arrangement, and finally, the availability and accessibility of institutional childcare services (private and public). The importance of these factors differs depending on the age of the child, hence, in the following we will discuss these four points with respect to their importance in the decision making of respondents with a pre-school child aged 0–2 and 3–5.

The availability and willingness of close family members and flexible work arrangements

For the large majority of the respondents in both FG discussions, the availability and willingness of a close family member to take over a certain part of the care work or the possibility of sharing the care responsibilities with a partner were decisive about their return to the labour market before their child reached the age of 3 years. 13 out of the 16 FG respondents returned to the labour market before their child turned 3 years, 10 of them did so based on a care arrangement which relies mainly on the care of a close family member (most importantly the child’s
grandmother, but also great-grandmother or aunt) and in 3 cases the return was made possible through an arrangement where the partners were able to share the childcare responsibilities based on flexible work arrangements (in the form of part-time work and/or flexible working hours). Hence, the key factor which contributed to their return to work was the availability of these care arrangements (e.g. the child's grandmother retired, one respondent moved to Brno to live close to her mother-in-law, they had or found a job with flexible working hours). The following quotes of Jitka, Petra, Alena and Hilda very well exemplify this point:

**Jitka** (30/3/HE): … So my parents, who are already retired, told me: “Go.” So I went after two years, so now of course my daughter didn’t get into a kindergarten, so she goes to a private one. Everyone is happy and satisfied – my daughter and me, too.

**Petra** (34/2/HE): Our biggest decision was to move from Prague to Brno. Because my husband is from Brno, and when we found out we were expecting twins we realized that first of all we had a small apartment in Prague, and second of all that I would also need help. So because of our children we moved to Brno so that we would have babysitting and some help.

**Alena** (39/2/HE): But the fact that he is a programmer, we have agreed upon a perfect schedule. Even though I sort of started back to work after a year, which might sound absolutely horrible, I had already stopped breastfeeding. I nursed for 12–13 months, and afterwards only at bedtime. So, in the morning he was home, and at noon we “exchanged” our child in front of work you could say, because he works 300 meters from me, and then I went home. /laughter/ Well, it really sounds horrible that I have been working full-time essentially since my child was one. But it was that he wanted to accommodate my wishes and he is the one who works long hours into the night, so somehow we will get over it, and then we will deal with kindergarten.

**Hilda** (27/2/LE): … And I also took that job mainly because, well, since I am an operator, I can choose when I go. The working hours there are pretty flexible, because they are there until 9 p.m., so when my husband comes home from work, then I can go.

What is interesting here, from the point of view of women’s decision making on when to return to the labour market after having a child, is the fact that the majority of women did so only because they had a private or family care arrangement available. In this respect, available grandparents were given as key facilitators for returning to the labour market and the reconciling of work and family life. On the one hand this mirrors specifics of the local system of institutional childcare, which for children under the age of three offers only private institutions, which have higher costs than state-kindergartens. On the other hand, this points also to
the local childcare norms and the related opinion that until the child reaches the age of three, it should be cared for in the family environment, which we discussed in the previous section.

Furthermore, the experiences of the FG respondents show how essential flexible working arrangements are for reconciling work and childcare duties, especially for children aged 0–2. They allow the respondents to be, to a large extent, independent from both the support of other close family members and the (non-existing) availability of public/private childcare institutions. In the two particular cases, the flexible working arrangements even allow a more or less equal sharing of childcare duties among the partners. Hence, in these cases, reconciling work and caring responsibilities is the concern of both partners and not perceived as the problem of women alone (as is so often the case and generally leads to reproducing gender inequalities). In the context of the current system of parental allowance, which pays only a flat rate and which hardly provides an incentive for fathers to alternate with the mother on parental leave, such working arrangements provide an even more important framework for the sharing of childcare duties between the parents. Such solutions are not the norm in the Czech Republic, however, as flexible working hours have only just started being supported by companies on a broader basis. Furthermore, such positive forms of working flexibility are not available in all jobs, and in typically feminized sectors/jobs, forms of negative working flexibility prevail (cf. Dudová 2008).

For the respondents with lower educational attainment, this problem is further intensified by their often precarious situation in the labour market. Hence they are, to a certain extent, caught up in a situation where, on the one hand, they feel the very urgent need to return to the labour market (based on their fear of unemployment after the end of their parental leave) and, on the other hand, they have few available working arrangements that would allow them to return to the labour market in the form and to the extent which they would prefer. This often makes it necessary to compromise on the work they do (that is, they do not necessarily return to a job they are trained to do, but rather to any job that allows them to reconcile care and employment. Hilda’s situation is an excellent example of this. Before becoming pregnant she was a nurse; after having her baby she started working in a call centre.

**The active integration of the child’s father in the care arrangement**

When it comes to the question concerning the role of fathers and their changing role in childcare, the FG respondents largely agreed that there have been important changes over the last decades, most importantly in the way they relate to their childcare duties. With regard to this point, respondents mentioned that today fathers are more prepared to help and to get involved in care work. At the same time it was pointed out that they also have more opportunities to do so (e.g. be at the birth, attend preparatory classes with the child’s mother). The respondents also mentioned that though this trend certainly exists, it does not apply to all men in general. Talking about their own experiences as well as experiences of acquaintances and friends, they reported, on the one hand, prevailing traditional
models, with a male breadwinner who does not get involved much in childcare; on the other hand, they also reported examples of a more shared responsibility for gainful employment, childcare and household duties.

Nevertheless, most of the respondents saw a certain effort on the side of their partners to become involved and to spend time with their children, even if they work a lot. The respondents also agreed with the idea of men taking parental leave. According to them, the ideal solution would be to have both partners alternate, with the father becoming involved at a later stage (when the child reaches a certain age – e.g. 1.5 or 2 years). In relation to this discussion, the FG respondents described prevailing prejudices, including those of employers, against men taking parental leave. Marta, for example, reported that she and her partner had planned for him to take parental leave. When her partner notified his employer, the employer reacted by raising his income in order to keep him. Matylda was also convinced that her partner’s employer would not allow him to take parental leave. From this discussion it also became clear that, for a majority of the FG respondents, one justifiable situation in which a man can take parental leave is when a woman earns more than he does and, hence, the family would be better off in keeping the woman’s income. Respondents from the group with higher educational attainment discussed the problem of prevailing gender stereotypes and stereotypical expectations towards fathers in general. Petra, for example, reported that her mother-in-law blamed her for leaving her young children alone with their father, as the mother-in-law believed that he would not be able to handle them at such a young age. Similarly Milena’s (female) colleague pointed out to her that she should be glad that her partner is looking after the children at all (implying that she is expecting a lot from him). Alena reported that her first marriage failed because she earned more than her husband, who was not able to handle this fact. These examples point to prevailing gender stereotypes related to the perception of gender roles in family, work and care. Against the background of these prevailing stereotypes, the FG respondents pointed out that communication on these matters among the partners is crucial. At the same time, they also thought it was important that women actively involve men in child caring and household duties and not present themselves as “superwomen” who are able to do everything on their own (household, childcare, work).

As all FG respondents were employed women with a pre-school child (the key selection criterion for the focus group), their shared positive perception of the involvement of fathers in care duties can be interpreted in two different ways: either, the employment of women importantly contributes to their perception of fathers as important partners in childcare duties, or, women who perceive fathers as competent to actively (and fully) participate in childcare duties are more prepared to return to the labour market before their child reaches the age of 3.

In this respect, the focus group data suggest that, apart from the availability of the family childcare arrangement (most importantly the child’s grandmother or great-grandmother), the involvement of fathers in the childcare duties is another important factor for a successful and early (at least within the Czech context) return to the labour market. This is also supported by the fact that in some cases, the childcare arrangement is based on a more or less equal sharing of childcare
duties between the partners because of flexible working hours and/or part-time arrangements by both partners. Hence, within an institutional context, which in the Czech Republic still enforces family care until the child reaches the age of three years, such individual strategies, specifically related to the involvement of the father, are key to allowing the women an early return to the labour market.

The availability and accessibility of institutional childcare services

The two focus groups showed that the characteristics of the Czech system of institutional childcare importantly constrain decision making and available options in relation to both when to return to the labour market after having a child and how to reconcile work and childcare duties. Practically speaking, only private childcare institutions exist for the age group 0–2. They offer their services at considerably higher prices than public kindergartens for children aged 3–5. This problem was perceived in a very similar way by both focus groups and the main difference was that the high fees make institutional childcare more or less financially inaccessible to lower income groups, while the FG participants with higher educational attainment saw them as being available, for example, in the form of part-time care. Hence the institutional framework for pre-school childcare in the Czech Republic importantly (re)produces the central Czech childcare norm: that institutional childcare is suitable only for children older than three years. To a large extent this norm is also part of how the FG respondents in both groups perceive available childcare options for their children aged 0–2. Institutional childcare for children aged 0–2 is seen by the respondents with higher educational attainment as a supplement to family care (in case the individual situation of the child demands that) or a last resort in a situation in which a woman has to return to the labour market due to financial pressures. Institutional childcare for children aged 0–2 is seen by the respondents with lower educational attainment as simply unavailable from a financial point of view. Hence, again in both groups, the respondents see their room for decision making about when and how to return to the labour market not so much constrained by the current (limited) offer of institutional childcare for children aged 0–2 but first and foremost by the lack of availability of flexible working hours and/or part-time jobs that would allow them to earn a living (as outlined above). As a result, the respondents (in both groups) are, for the most part, satisfied when they manage to find a childcare arrangement where the child is cared for in the broader family context or when caring duties are split between the partners (based on flexible working hours and/or part-time work arrangements). Hence, based on the current prevalent ideal of personal care by the mother, or – according to the majority of the FG respondents – by the parents or a close family member, the lack of institutional childcare for children aged 0–2 is perceived only as a minor barrier for the respondent’s return to the labour market. This is also related to a lingering general distrust in these institutions.

For the FG respondents, childcare institutions become more attractive when their children reach the age of approx. 2 or 2.5 years and hence they start demanding financially available (both groups) childcare for children at this age.
At the same time, this demand is related to current changes in the organization of the parental allowance which is now potentially available until the child reaches the age of 2. The strongest demands for improvements were articulated by the FG respondents in both groups in relation to the kindergarten system, where a current lack of capacity leads to problems in placing children aged 3–4 years. This high demand for childcare is related to the second strong childcare norm in the Czech Republic—that children from the age of 3 need collective socializing in a larger group of same-aged children.

Hence from the point of view of the FG respondents and how they perceive childcare options available in the current institutional context in the Czech Republic, their room for decision making about when to return to the labour market and how to reconcile employment and childcare, is first and foremost constrained by the lack of kindergarten capacity for children aged 3–4. This opinion is shared by the respondents of both groups. For those women who had no alternative care arrangements available which would allow them to return to the labour market before their child reaches the age of 3, the availability of a public kindergarten place is the central prerequisite for returning to work. This is substantially complicated by the current insecurity about whether a place will be available or not. At the same time, also for women who managed to return to the labour market based on an alternative childcare arrangement before their child turned 3, the availability of a public kindergarten place for their child might still mean an important change: some of the respondents, for example saw this as an opportunity to return to a full-time job.

5.4 Conclusions

The considerations presented above show a very clear picture on how the current structural, institutional and value context constrains women's decision making (in both groups) about their return to the labour market and the way they reconcile work and care responsibilities for children aged 0–2. What both focus groups showed to be the key factor for a successful, and in the context of the Czech Republic, rather early return to the labour market (that is, before the child reaches the age of 3 years) is the availability of a caring arrangement based on close family members (most importantly, the availability of the child's grandmother or great-grandmother). This is, however, a factor which the FG respondents have little control of – this was also reflected in the way the respondents talked about their return to the labour market (especially in the group with higher educational attainment), in the sense that they returned because the grandmother became available for care.

Alternatively, an earlier return was made possible by a care arrangement based on a more or less equal sharing of caring duties between the partners because of flexible working hours and/or part-time working arrangements. Given the prevailing care norms in the Czech Republic which see family care as crucial for children aged 0–2 and the reluctance of the Czech state to subsidize institutional
child-care for children in this age group, the support of this latter possibility (that is an extension of the possibilities of flexible working hours and of part-time jobs) seems essential for women to return earlier to the labour market. At the same time however, this bears the risk that it will be primarily women who will work in part-time jobs and that they will remain stuck in these jobs even after they stop being important for their reconciling strategies. In this regard, it is central to note that the respondents demanded part-time jobs first and foremost in relation to reconciling work and care responsibilities for children aged 0–2. With the child attending kindergarten, they would also return to full time employment. Moreover, flexible working hours and part-time arrangements (that provide the employee with positive work flexibility) are often more available for women with higher educational attainment.

Even though the large majority of the FG respondents managed to return to the labour market before their children turned 3 due to alternative childcare arrangements, public kindergarten still remains central to their labour market integration. For some of the respondents who had no other arrangements at hand, only the availability of a public kindergarten place enabled them to return to work when their child turned 3. For other respondents, the fact that their children started attending kindergarten meant the opportunity to return to their full-time job. That is, public kindergartens play a central role in the reconciling strategies of the FG respondents and hence the current lack of kindergarten places substantially complicates and constrains the way they manage childcare and gainful employment. From this point of view, the support of the extension of kindergarten capacities on the local level is a key way to improve the possibilities of reconciling work and family life in Brno (c.f. Křížková et al. 2011 for similar results).

Finally, the results of the focus group discussions also showed the key role an “acceptable” childcare arrangement plays in a woman’s return to the labour market. The respondents’ presentation, rationalization and legitimization of their choices takes place in the discursive environment of the nationally and locally institutionalized ideal of care (cf. Chapter 3). This discursive environment potentially supports and constrains certain ways of presenting, rationalizing and legitimizing choices related to childcare and labour market participation. The respondents in both focus groups, who returned to work before their child reached the age of three, presented their return as dependent on the fact that a care arrangement within the wider family became available (e.g. the child’s grandmother retired and agreed to care, the child’s aunt or another close family member agreed to care). An early return to work was also possible if the (existing) work arrangements of the partners (the availability of part-time and/or flexible working hours) allowed it. Hence, the respondents in both groups explained and legitimizied their early return to work, not in terms of their motivation to go to work at this specific point in time, but rather as related to the availability of a childcare arrangement within the closer family environment, which they perceive as favourable for their children (c.f. Křížková et al. 2011 for similar results). Thus, in the Czech context, it seems not to be legitimate for mothers of children aged 0–2 to freely articulate their work orientation. They can do so only in combination
with a childcare arrangement that is at least partly in line with the prevailing ideal of care. This shows, on the one hand, how welfare states might act as “moral agents” (Wolfe 1989 cit. in Kremer 2005) and on the other, how nationally and locally institutionalized ideals of care are (re)negotiated in the context of mother’s micro decision making about employment and care.

While the results of our focus group discussions clearly show that, currently, the described ideal of personal care by the mother until the child reaches the age of three prevails (c.f. Křížková et al. 2011 and Bartáková 2009 for similar results), there are also some indications that this ideal of care is changing. One of the strongest indicators of this is seen in the fact that the ideals of care for children aged 0–2 and children aged 3–5 do not complement one another the way they did before. Due to the lack of kindergarten capacity it is currently rather complicated for mothers to place their child in kindergarten at the age of 3 and consequently to return to the labour market (as the ideals of care suggest). At the same time, due to the recent economic crises, it is getting harder and harder for women to return to the labour market after such long absences. As our focus group discussions showed, the respondents clearly identified this problem and reacted with efforts (especially in the group with lower educational attainment) to return earlier. Hence, the actual (working and caring) reality of women becomes more and more disconnected from the ideals of care institutionalized and promoted in Czech family policies.

At the same time, the institutional background is changing. The last reform of the parental leave allowance (which came into effect in January 2012) broke with the norm of threeness for the first time. In relation to institutional childcare the option for two years of leave was economically equalized with the other, longer options and the limitations to institutional care apply only until the child reaches the age of 2 years (as a prerequisite for drawing parental leave allowance). This opens new possibilities for parents, for example, to choose the 3 year option and to use the parental leave allowance to pay for childcare in the last year. In regard to that, it is interesting that when asked for potential improvements, focus group respondents demanded financially available (that is publicly financed) institutional childcare for children starting at the age of 2. In compliance with this, the government is about to introduce a new form of childcare institution, which should regulate the provision of childcare services for children up to the mandatory school age (0–5) both on a for-profit and non-profit basis (though these plans have been significantly delayed by the governmental crisis in June/July 2013 and the subsequent early elections). Its main aim is to provide the possibility, especially for municipalities, companies and NGOs, to offer non-profit childcare services. This opens up space for establishing a new tradition of institutional childcare, which overcomes the still prevailing ideas of care related to the communist nurseries. These developments point to changes in the ideal of care in the sense of a greater openness towards institutional childcare for children under three, which will also support women’s early return to the labour market.
REFERENCES


Topics and questions of the FG discussions

**THEME 1 WOMEN’S WORK**

(W1) Will you tell us first a little about your work and what it means to you.

(W2) What are the things about working that are rewarding and make you feel good?

(W3) Are there any negative aspects to your work?
I would like to ask have any of you had to make a key decision about participation in work in the last five years and to describe that a little please.

**THEME 2 CHILDCARE ARRANGEMENTS**

(C1) What kinds of childcare options were available to you and how did you find out about them?

(C2) Why did you choose your present form of childcare? I would like to find out more about how happy you are with it, and what are the positive and negative aspects of it?

(C3) Is your working life, and especially your time and commitment to work, influenced by the childcare that is available to you?

**THEME 3 FACILITATORS OF, AND BARRIERS TO, MOTHERS’ WORKING LIVES**

(MW1) What role do fathers play in childcare and domestic work now, in what ways have their roles changed since you were a child?

(MW2) Is there any other person in your family or social network who helps or makes it difficult for you to continue in employment? (Please prompt if necessary: see below)

(MW3) Are there any aspects of your working conditions (time, flexibility, leave arrangements, location and so on) that have a negative effect on your family life?

**THEME 4 FACILITATING WOMEN’S WORKING LIVES & POLICY CHANGE**

(P1) What changes in family life, in the workplace, or in your local area would make the life of a working mother easier?

(P2) Are there any policy changes (for example, childcare, taxation, social welfare) that you would make to improve women’s working lives?

(P3) If you were looking for work now, do you think there are many opportunities in the workplace for women at present?

(P4) In an ideal world, what would your perfect mix of work and family life be like?

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**Focus group – Participants**

**ALENA** is 39 years old, has university education and works in a full-time job (40 hours) as a teacher, educational adviser and specialist for the prevention of sociopathic occurrences (in schooling). She has 3 children (aged 2, 10 and 14), who are cared for (especially the youngest) by herself, her partner and the child’s grandmother. During maternity and parental leave, she more or less kept her job in the form of a part-time contract (both in order to secure it in times when it is not easy to find a job, and because of her specific training, because of which it would be hard for the school to find a replacement during her absence). Alena is divorced and cohabiting with her current partner. The two older children are from her first marriage, the father of the youngest child is her current partner. Her partner works in a full-time job as a programmer and has a university education.

**BLANKA** is 27 years old, has a university education and works full-time (40 hours) as an economist in the public sector. She has one child aged 4, who is cared for by her and who attends kindergarten. After being on parental leave until her daughter reached the age of three and started attending kindergarten, Blanka returned to hear former work. She is

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4 The names of the respondents have been changed.
married and her husband works in a full-time job as a financial manager in the private sector and has a university education.

HELENA is 30 years old, has a university education and works full-time (40 hours) as a pharmacist (in the private sector). She has two children (aged 2.5 and 5), the youngest is cared for by the grandmother and attends a private kindergarten. After she stopped breast feeding, she started to work occasionally in a pharmacy (shifts on Saturday), later on, she also started to work there regularly. Helena is married and her husband is a self-employed lawyer (on full-time basis) and has a university education.

HELGA is 42 years old, has a university education and works full time (40 hours) as a paediatrist (in the public sector). She has two children (aged 2 and 10), who are cared for mainly by their father and their grandmother. She returned to work when the youngest child reached the age of two (at the time of the FG her son was 2 years and 3 months). One of the central factors enabling her return was the fact that her mother retired and agreed to mind the child. Helga is married; her husband has a university education and works full time as a state officer.

JITKA is 30 years old, has a university education and works full-time as a head of department at a public health insurance company. She has one child (aged 3), who is cared for by the grandmother and who also attends a private kindergarten (3 days a week). Jitka returned to work when her daughter was two years old, both for financial reasons (as she is a single mother) and in order to keep her position. Before her daughter turned 3, she was only cared for, by her grandmother. At the age of 3 she started attending a private kindergarten (as there was no place in a public one). Jitka is divorced and currently lives on her own.

LINDA is 26 years old, has a university education and works full-time (40 hours) as a translator in a company. She has one child aged 3 who attends kindergarten, and who is cared for by herself and the father. She returned to work when her child reached 3 years and was accepted in kindergarten. Linda is married; her husband has a university education and works full-time as a civil engineer.

MILENA is 31 years old, has a university education and works part-time (16 hours a week) in a school library information centre. She has one child aged 2, who is cared for by her husband and her. Milena returned to work when her child was nine months old, after she stopped breast feeding. She returned to her former employer, however only on part-time basis. She plans to return to full-time work and start teaching again (in addition to her work in the information centre) when the child turns 3. She is married; her husband has a university education and works part-time as a musician in an orchestra.

PETRA is 34 years old, has a university education and is self-employed (approx. 30 hours a week) in her own pastry shop. At the same time she occasionally teaches English. She has three children aged 2 (twins) and 9, who are cared for by her, their grandmother and their father. Petra started her business after the birth of her twins. For her, parental leave until the child reaches the age of 3, represents an ideal time to develop a business. In case it doesn't work out, she is going to look for a job when the twins turn 3 and start attending kindergarten. Petra is married; her husband has a university education and works full-time as a civil engineer.

IRENA is 30 years old, has a secondary education with GCSE (general certificate of secondary education), is self-employed and works almost full-time (35 hours) as a financial adviser in the private sector. She has one child aged 3, who is cared for by her sister, her aunt and the grandmother. Before she went on maternity/parental leave, she
worked as a sales representative, however got dismissed during her trial time, hence she was not able to return to this job. Currently Irena is expecting her second child. She is married and her husband works in a full-time job as an IT-developer in the private sector and has a secondary education without GCSE.

LEA is 28 years old, has a secondary education without GCSE and works full-time (40 hours) as a shop assistant in a drug store in the private sector. She has one child aged 2, who is cared for by her mother. When her child was 4 months old, she returned to selling ice cream (which she also did before the birth of her child as she had lost her former job during her pregnancy and was not able to find something else). After this seasonal job ended, she found her job in the drug store. Lea is married and her husband works in a full-time job as a technician and has a secondary education without GCSE.

MARTA is 27 years old, has a secondary education with GCSE and works full-time (40 hours) as a system analyst in the private sector. She has one child aged 2.5 who attends a private kindergarten and is cared for by her mother, the child’s father and family members. When her child was 1.5 years old, she returned to work. For a half year the child was minded by Marta’s sister in law, at the age of two her child started attending a private kindergarten. Before she got pregnant, Marta worked as an administrative officer in an insurance company. However, as she was a temporary replacement for a woman on parental leave, she was made redundant when the former employee returned (and she was on maternity leave). She managed to get another job at the same insurance company. Marta is married and her husband works in a full-time job as a sales representative and has a secondary education without GCSE.

JOLANA is 32 years old, has a secondary education with GCSE and works full-time (40 hours) as a carer in a private childcare institution. She has one child aged 2, who is cared for by her partner and her sister. Jolana returned to work, when her child was approx. 1.5 years old. Before her pregnancy she worked in the administration of an insurance company. Though she had a permanent contract, the company did not keep the position for her (the person who replaced Jolana during her parental leave obtained a permanent contract, which means that there is no chance for Jolana to return to that company). Therefore, when she was offered a position in a private childcare institution, she accepted. Jolana lives with her partner, who works in a full-time job as a blue-collar worker in the private sector and has a secondary education without GCSE.

MARCELKA is 20 years old, has a secondary education without GCSE, is self-employed and works full time (40 hours) as a hair dresser in the private sector. She has one child aged 1.5, who is cared for by her mother. Marcelca got pregnant before she finished school. When her child was 8 months old, she started working. Marcelca lives with her partner, who works in a full-time job as a car mechanic in the private sector and has a secondary education without GCSE.

JOHANA is 39 years old, has a secondary education with GCSE, and works full-time (40 hours) as a gas station attendant in the private sector. She has one child aged 5, who is cared for by herself and her mother. Johana returned to work when her child was 1.5 years old. Because the company where she worked before her pregnancy went bankrupt, she took a job at a gas station where a friend of hers worked. Johana lives with her partner, who works in a full-time job as an administrator in the private sector and has a secondary education with GCSE.

MATYLDAA is 38 years old, has a secondary education with GCSE, and works part-time (20 hours) as a pedagogical assistant. She has 2 children (aged 4 and 8), the younger one
attends kindergarten and is also cared for by her husband. Altogether, she stayed 7 years on parental leave (starting in 2004) and returned to work when her younger child was 3 years old and started attending kindergarten. Matylda is married and her husband works in a full-time job as a cook in the public sector and has a secondary education without GCSE.

HILDA is 27 years old, has a secondary education with GCSE, and works part-time (20 hours) as an operator in a call-centre. She has 2 children (aged 2.5 and 5), the younger one is cared for by her, her husband and her mother. Altogether, she stayed approx. 4.5 years on parental leave and returned to work when her younger child was 2 years old. Before her pregnancy she worked as a nurse. Hilda is married and her husband works in a full-time job in a rental shop in the private sector and has a secondary education with GCSE.
CHAPTER 6
Women’s Strategies for Reconciling Paid Work and Care Responsibilities for Dependent Elderly Family Members in Brno

In this chapter we present the key results of two March 2013 focus group discussions with employed women who care for a frail elderly person and live in Brno. One focus group is comprised of women with higher educational attainment and the other is comprised of women with lower educational attainment. Our analysis primarily focuses on how these women manage to reconcile their gainful employment with their care responsibilities. After a short introduction, presenting the method of our research and relating it to previous research in the Czech Republic on this topic, our results begin with how meaningfully the respondents perceive their employment. We then move on to their care arrangements and how these arrangements mirror prevailing elder care norms. Based on this, we will analyse their decision making about both their labour market integration and their care arrangements.

Focus Group – Method

The focus groups (FG) interviews (e.g. Morgan 1996; Myers 1998; Wilkinson 1998) were organized to gain insight into the decision making processes of women at the micro level; to analyze how women with care responsibilities for a dependent elderly family member make decisions about work, care, reconciling work and family lives as well as what kind of policy changes they would propose and desire. These were also the key questions discussed in the FG (cf. the outline of the focus groups’ topics and questions at the end of the chapter).

The literature on FG concentrates mainly on design, participant selection and their organization (e.g. Greenbaum 1998; Hennink 2007; Kitzinger and Barbour 1999; Krueger 1998a, 1998b; Krueger and Casey 2000; Morgan 1997). Based on this theoretical background, we did two focus group interviews: one with women with elderly care responsibilities having a low level of education (ISCED 1-3) and one with a high level of education (ISCED 4-8). In both groups all of the respondents had care responsibilities for a dependent elderly close family member who needed care and support in everyday life and all of them were in employment. That is, all of the respondents were employed either full or part-time (based on a temporary or permanent working contract), or were self-employed. In order to ensure a certain diversity of care experiences/decisions, a quota related to the care arrangements (personal informal care, the use of professional home care services, institutional care) was applied. The recruitment was organized by a social research firm, with whom we cooperated for organizing the focus groups. Additionally, two stand-by participants were recruited in order to make sure that 9 participants would take part in the focus group. Both focus group discussions
were fully transcribed and analysed based on an interpretivist approach (Sayre 2001), seeking to understand how the FG participants make their decisions in the context of and in interaction with relevant macro structures of welfare state provision and what meanings they ascribe to these structures.

The presented design of the FLOWS focus groups importantly adds and contributes to existing research on the topic of informal care for frail elderly family members in the Czech Republic (cf. e.g. Jeřábek et al. 2013; Přidalová 2007a,b; 2006; Veselá 2002; Tošnerová 2001). In this regard the most striking and important characteristic and difference of the research presented in this publication is the analysis of the provision of care by informal carers and their decisions about the provision of care within the current institutional and structural context of elder care. Jeřábek et al. (2013) and Přidalová (2007a,b; 2006) by contrast focused first and foremost on examining and explaining the care decision and experience of informal carers on a rather individual level. Though they take into account and discuss the influence and power of prevailing care norms on how their respondents decide about, perceive and provide care for their frail parents, they do not take into account how these care norms are also reproduced through elder care policies and the provision of (public) elder care services (cf. Chapter 4 in this publication). This in turn shapes and influences the respondents’ care decisions (Přidalová [2007a] does, however, discuss this limitation in her conclusion). Thus, the following analysis does not primarily focus on the respondents’ individual experience of care, but rather on how they perceive and experience the effects of providing informal care on their life. We do so mainly in relation to the informal carers’ strategies for reconciling work and care responsibilities. Though our research focus adds importantly to the earlier research on informal elderly care, it nevertheless also has its limitations, the most important of which is that it does not take into account the situation of informal carers who left their employment in order to care. Hence, though in the following we will discuss what factors support women in order to reconcile work and care, our research does not provide answers as to why women leave their employment to care and how this impacts their lives.¹

6.1 The Meaning of Work

In both FG discussions, the respondents brought up a wide range of reasons for why they are in gainful employment. The reasons cited were the intrinsic, financial and social aspects of their work. However, differences between women with different educational levels arose, mainly in respect to the first two aspects. While in the group with higher educational attainment intrinsic aspects of work played a more central role (e.g. self-realization, self-development, pleasure and meaningfulness) the group with lower educational attainment put a stronger focus on issues related to the economic necessity of work. The following quotes of Marie, Julie, Mája and Gita exemplify this point:

¹ We would like to thank our reviewer for pointing out these limitations.
Marie² (57/86/LE)³: Well, I don’t know anyone who would go to work just for fun without getting paid. So, probably for money too, of course. But nonetheless it’s work I like doing.

Julie (52/75/LE): We have to be glad to have a job. At least that’s the way I see it, because I’m afraid that if I didn’t have this job, well with the experience I have had, with a husband at home who has a university degree and who isn’t stupid or lazy, yet still at 59 years old he can’t find a job. So I am quiet and work, and if they tell me to come to work on Saturday, I thank them and come, because I also work in a foreign company. Our management is also foreign. So you have to look at it like this, that today the situation on the labour market is so difficult...

Mája (46/75/HE): I wouldn’t want to be just a housewife. I couldn’t handle it if all day I had to just clean, wash, iron, take care of the family. You need to get out amongst people. And otherwise I like the job. I always wanted to work with children, so it’s also a bit of a hobby. Of course the financial part is important too.

Gita (49/69/HE): Because I consider that to be a normal regimen. That I wake up in the morning. I go to work. Because once upon a time work made humans out of monkeys, so I tell myself that it might change me too. You need money, so that I can pay to relax. It’s also true that after, when I hear someone’s opinion that I have two degrees, and therefore I could do something about it, instead I go study something so I don’t have to, I guess. /laughter/ Like I enjoy work. Whatever, any kind of education, any kind of new things interest me.

The respondents, especially those with lower educational attainment, perceive their job as key to achieving a certain financial security in their lives. With the exception of one respondent (Vilma, who is already retired and works part time), all respondents are in full-time employment. The fear of unemployment, together with structural factors, plays an important role in their perception of work. Since the caring benefit amounts from 800 CZK (32 EUR) to 12,000 CZK (480 EUR) per month and employers in the Czech Republic rarely offer the possibility of flexible working arrangements such as part-time jobs or flexible working hours, the caregiver (most often women) has to keep her full-time job in order to earn a living (cf. Chapter 1 and Chapter 4). Hence women either lack the option of reducing their working hours or they cannot afford to do so for financial reasons. Nor is it possible for them to leave their job to provide care on a full-time basis. Despite the fact that the financial motivation for paid employment tends to be secondary for the respondents with higher educational attainment, it is still an

² The names of the respondents have been changed.
³ The information in the brackets indicates the age of the respondent, the age of the dependent elderly for whom they care and their level of educational attainment (LE – lower educational attainment, ISCED 1-3; HE – higher educational attainment ISCED 4-8).
important issue for them, especially as the caring benefit is too insufficient to allow women to leave their jobs. Furthermore, in both focus groups the respondents reflected uncertainties on the labour market related to the financial crises, but also to their age – the large majority of FG respondents (12 out of 16) was over 45 years old and perceived their position on the labour market as potentially insecure. The above quote by Julie exemplifies this fear.

However, what turned out to be a key aspect in making work meaningful for the respondents of both FG discussions are the social contacts at their work place. This is particularly true when they do not have children at home and spend most of their free time providing care. In this regard, for many participants, their work is an important opportunity to take their minds off things at home, especially the care for the family and the elder who in many cases lives in the respondent’s household. The following quote by Linda illustrates this aspect very well:

**Linda** (40/67/LE): *And sometimes people go to work, you could say, to relax, to unwind. Because at home… it’s the same thing over and over – the kids – mom, there is always something you have to take care of, take care of them. So often I look forward to work, where you can really have a good talk with someone.*

Since the respondents dedicate most of their spare time to caring duties, their work is an opportunity for change and to a certain extent compensates for their lack of spare time. The respondents’ labour market participation takes on the meaning of leaving behind their caring duties. For the respondents, their “spare” time (in the sense of relaxation) is related to the time that they spend in their gainful employment. They connect it with the opportunity to chat with colleagues, have a rest (from caring duties) and take their minds off their care-related worries. Thus, to a certain extent, the fact that they started caring for a dependent family member meant that their employment and free time changed their usual meanings. From this point of view, the fact that the FG respondents of both groups saw their labour market participation as a matter of course, forming an important part of their lives, is not only related to the tradition of women’s full time labour market participation described in Chapter 1, but also constitutes a certain strategy on the part of the informal carers to cope with their care responsibilities. These strategies are in accordance to earlier quantitative research – cf. Chapter 4 as well as Jeřábek et al. (2013) and Veselá (2002).

### 6.2 Elder Care Arrangements and Dominant Care Norms

The two focus group discussions showed a rather heterogeneous picture of caring needs and arrangements, within which the FG respondents play different roles (cf. the short description of the respondents and their care arrangements at the end of the chapter). The majority of the respondents have taken over caring for one close family member and, in some cases for two. The care needs of these
elderly dependents span a wide range of individual situations, from specific care related to illnesses such as dementia, diabetes, and post-injury recovery, to more general, everyday assistance including personal care, household help and social contact. Thus, the time invested in caring varies. Based on the experiences of the focus group respondents we will present how the FG respondents perceive their care responsibilities and their care arrangement as well as discuss to what kind of care norms and values they relate them to. We will do so based on three different types of care arrangements for frail elderly family members represented in the focus group discussions – informal care, informal care in combination with professional home care services and residential care.

For the respondents, caring for their close dependent family members is strongly related to normative considerations of how these relatives should be cared for. In this respect, there was a broad consensus in both groups that the most central point is to enable their dependent elderly family members to stay in the home/family environment as long as possible. The following quote of Matylda exemplifies this very well:

Matylda (41/65/LE): Because it’s better for that person. They’re used to it.
Moderator: Yeah. They are in their own environment.
Matylda (41/65/LE): It’s like you transplant a fully-grown tree.

Hence for the FG respondents in both groups, this is a central reason why they are involved in care and they perceive their support of their frail family members as related to very similar values and feelings: Nina speaks about “human behavior”, Vilma uses the term “basic decency”. Gita even mentions that she “considers it as a completely normal thing”; for Lada and Jarmila it is a “matter of course”; and Pavla speaks about the “natural development of things”. Moreover, the respondents share a strong conviction that care is a family duty; therefore, the needs of the elderly should be met first and foremost within the family environment – for similar results cf. for example Jeřábek et al. (2013) and Přidalová (2006; 2007a). The following quotes by Diana and Linda give good examples for this point:

Moderator: And do you think that you have an obligation to take care of your relatives?
Diana (51/77/LE): Well, as far as my parents go, yes.
Linda (40/67, 67/LE): Well, I know for example that my parents took care of their parents. Also my husband’s mother took care of her parents, her dad and mom, all the way until the end. Until they died. She switched back and forth with her sister. Maybe my husband sees an example in them, that that is just the right way. If we have the opportunity, if we are able to take care of them and they want us to, well then there is no problem.

That is, close family relationships lead to the feeling of filial obligation and relate the decision making about care arrangements to the idea of reciprocity of
care between parents and children. As the following quotes by Mája and Pavla show:

**Moderator:** … Mája, what is your situation like? What was the decision to provide care yourself, and not anyone else, like?

**Mája** (46/75/HE): Because my brother-in-law and sister-in-law don’t live in Brno and my husband works several jobs, it was pretty apparent who was going to do it. /laughter/

**Moderator:** Well, that it was left to you, but you didn’t have to.

**Mája** (46/75/HE): I didn’t, but just like everyone else has said, they are your relatives after all. They’re parents. So we can’t just leave them. My conscious would…

**Pavla** (30/80/HE): And they took care of us, so we should take care of them.

**Mája** (46/75/HE): My conscious would never allow me to do that.

The respondents reason that since their parents provided care for them, they have a certain right to receive care from them. The explanation of the decision for informal care is based on the feeling that the elderly deserve to be cared for at home since they cared for the younger generation before. At the same time, this perception is also related to a potential future reciprocity. In this respect, the FG participants see their informal care as an investment in their own future, as they expect their children to continue this pattern and take care of them when they are older. For example Lada, Isabela, Ilona, Gita and Evelína agree that through their caring they want to set an example and teach their own children how to behave towards their parents. They want to reproduce these norms and socialize their own children to accept them – for similar results cf. for example Jeřábek et al. (2013) and Přidalová (2006; 2007a). This is also outlined in the following quotes by Nina, Julie and Ilona:

**Nina** (41/65, 66/LE): … maybe I will be in a similar situation in 25 years. What would I want? For my children to throw me into a nursing home? Would I be a burden on them? Or how would I want them to behave towards me?

**Moderator:** That’s exactly what I am asking. How it is. Is it our responsibility, or…

**Julie** (52/75/LE): I think that our behaviour sets an example for our children, and I assume that when they see that I can take care of mom, that they also won’t shove me somewhere and they won’t just come to visit.

**Ilona** (47/75/HE): Well, I didn’t have much time to make a decision. It was a done deal for me. Either put mom in an institution, but I didn’t know where, or take her home.

**Moderator:** This here is what interests me. How did you decide, you personally, whether you would take her home or you would put her in an institution?
Ilona (47/75/HE): I had made up my mind. I had made up my mind that I wouldn't put her in an institution.

Moderator: Why?

Ilona (47/75/HE): Because she took care of my grandfather, who died when he was almost 102 and just because I saw her take care of her relatives or of her father and how I was supposed to put her somewhere where she was guaranteed to die.

That is, in both groups there was a very strong consensus that care work is a family duty and the ideal care arrangement is provided in the family environment and/or a familiar environment. Though in many cases the women respondents can fall back upon the help and support of other family members in their caring tasks, they nevertheless mostly carry the main responsibility for the care arrangement and do not perceive the support of other family members as a matter of course. Lada for example very well exemplifies how the FG respondents approach caring. For her, care tasks are a natural part of her life and not only of hers, but in general of a woman’s life. In this regard, the role of the husband (or male partner) is to tolerate the partner’s caring tasks and/or support her, rather than to take over the main caring responsibilities.

Lada (39/60/HE): I decided that since I am an only child… I don't have a father… My mom is alone, so of course I just had to take care of her. And because back...

Moderator: Why did you say “of course”? You could have considered other ways, right?

Lada (39/60/HE): Well, I just wanted to say that this year it will be 14 years already since I took care of grandma, like the mother of my mother, who was also sick with cancer. At the time I was on maternity leave. So for one year it was like I took care of grandma and therefore I just couldn't see it any other way. For me it was a matter of course when I had taken care of my grandmother, well I would help my mother too. But the truth is that because she came to live with our family, well I had to talk it over with my husband. But I have to say, my husband agreed to it and really didn't express any negative opinions about the idea. But it is true that we expected that her disease would take a turn for the better a little bit, so we'll see what awaits us, how it is. How it will be.

Hence, the described normative context of filial obligation, reciprocity, responsibility as well as being a good example for one’s own children strongly motivates (or even forces) women to care for their close relatives (especially in case of parents and parents-in-law). According to the FG participants, the main responsibility for care is in the hands of the family. They did not discuss individual responsibility and they also see the responsibility of the state as only secondary or supplementary to those cases where the family can no longer handle the care alone. From this point of view, ideal care arrangements are those that provide
care within the family. However, when needed, care can be supplemented by professional home care services.

The question of supplementing informal care with professional home care services became an issue for many of the FG respondents due to changes in the care needs of their dependent elderly family members. Often a combination of several factors lead to this decision, e.g. exhaustion of informal carers, a worsening of the mutual relationship, the working conditions of the carer, the recommendation of the general practitioner. In the following quote this is exemplified by Julie, who speaks about the moment when her family decided to make use of professional social services (a visiting nurse).

**Julie (52/75/LE):** We used to be able to handle it ourselves, and then we found out that it was too much for us. I was able to get out of work, and then afterwards I had to work extra hours really hard. So after a meeting with the general practitioner, we started to deal with it, so that we could have a little relief, so that we weren’t so tired from rushing around and so mom wasn’t stressed. Because sometimes she viewed it negatively, too. When we ran home and didn’t know where to start first. If I have to check the medicine that I also got ready for her, if she really took it like she was supposed to. Or maybe the food that I cooked for her. If she didn’t leave it in the microwave when she put it in there to heat up and then didn’t know what she was doing and just sat and waited for us to come home. Well, now I am calmer. I can handle everything better and I don’t have to worry that I’ll come home and that sometimes there will be … a problem.

At the same time, this quote shows how strong the norm of caring within the family is, as Julie’s situation had to reach a certain point of unmanageability before they decided to make use of home care services. Matylda’s relationship with her mother was similarly improved by the use of professional care services:

**Matylda (41/65/LE):** I confused my mother with a child. Right from the start I simply tried to take care of her as if I was raising children. And I just mixed up that relationship really... all of a sudden I caught myself treating her like a child and we were even already, as they say, at the edge. We had a few good fights. And once that caregiver started working, well that like cleaned the situation right up. The air was cleared, and now we take it differently. The fact that a third person has come on to the scene has rather enhanced our relationship. The relationship is so...

**Moderator:** The tension let up a little.

**Matylda (41/65/LE):** Yes, yes. I was stressed and afraid at the same time, if I could handle it all. Once that third person was there, it just got everything off my chest. So, it’s sort of better now.
As the two quotes of Matylda and Julie show, these home care services can help to handle the care situation better and relieve the informal carers from certain pressures. This use of home care services is in line with the basic normative framework of providing care in the family environment, as it enables keeping the dependent elderly person within the familiar environment. The decision to make use of residential elderly care services, by contrast, is deeply contested. This appeared in both focus group discussions in relation to the question of changing care needs in the future and with regards to how the two respondents who actually had their dependent elderly family members in institutional care presented and legitimated this fact.

As far as the former is concerned, when reflecting on the potential worsening of the care needs of their dependent elderly family members, the FG respondents noted that the potentially decisive factor in their decision to send their parents to a retirement home would be when they no longer had the physical ability to continue in their role as primary caregivers. An important point they discussed in this regard was when the elderly dependent becomes bedridden and/or requires permanent professional medical care – as the discussion between Julie, Nina, Vilma and Matylda shows below:

**Moderator:** … When does it kind of go beyond this borderline, when does it…?

**Julie** (52/75/LE): When the state of health requires, for example, constant medical care and surveillance.

**Nina** (41/65,66/LE): I would say I have experiences with a bedridden patient. When it gets to the point where it does not work without the supervision of a doctor anymore. But I would say, that I would be very careful in choosing where, to what kind of institution, to what kind of facility. Because as I would say, we have this kind of experience, that these people really suffered bedsores.

**Vilma** (64/90/LE): When the person is bedridden and one is all alone, then you can't handle that.

**Julie** (52/75/LE): You can't lift him. And if you lift him several times a day, your back will start hurting.

**Matylda** (41/65/LE): If I had the money, then I would probably pay for a home nurse, I would like to cover 24 hours and if I really did have the money for that, then I would again pay for this home nurse and I would try to keep the person at home, so that my mom would be as much as possible in her home surrounding.

As this quotation shows, even in the environment where the elderly person completely loses his/her self-sufficiency, the norm of homecare remains intact – as exemplified in Matylda's wish to finance 24 hour home care. The norm is further enforced by negative experiences with institutional care and a related lack of trust in these institutions (Nina). Hence, institutional care is perceived as a last resort for cases which exceed the respondents' caring abilities and possibilities of
financing more extensive home care. However, institutional care has to be selected carefully as the quality of provided care is ambiguous for the respondents.

Given this general perception of institutional elderly care, the actual decision to put an elderly dependent family member in institutional care is very hard for the respondents. The related pressures are very well exemplified by the case of Darina, who was the only respondent in the group with higher educational attainment who has a close relative in institutional care. She admits that it was a very difficult decision for her to place her mother in an elderly home, which she however had to take, as her family realized that they could no longer manage to provide enough care for her mother who is suffering from depression and dementia.

**Darina (60/80/HE):** Difficult decisions, because I never imagined that essentially what happened would happen. And because I was already taking care of my husband’s parents. It has been a while, when dad was still alive, well he always told me after two months: “Please, we have to send her back to the psychiatry ward so they can think of something new or fix her medication.” Because the states she would get in were horrible. And, after dad died and it was all up to us. … to put it briefly, it became unbearable. And I still haven’t been able to come to grips with it, so at least we decided that we would visit her every day. We try to get there on Friday and Saturday. But as I am saying...

**Moderator:** That you don’t have the strength.

**Darina (60/80/HE):** It didn’t work anyway. I recall, that not even dad, when he was basically home with her, that he wasn’t even capable of dealing with her, and we always had to go there, go shopping, cook. Saturdays and Sundays of course.

**Moderator:** And Darina what was your final decision like?

**Darina (60/80/HE):** Well, it was up to only me and my sister.

**Moderator:** So there are two of you.

**Darina (60/80/HE):** Yes. Part of the family definitely agrees with it, another part is definitely against it. But I always say anyone who hasn’t tried it, well they would probably...

**Moderator:** Surely. That’s why I am asking...

**Darina (60/80/HE):** They don’t know what it’s like.

The way Darina presents her decision (and how she repeatedly returned to the issue during the FG discussion) suggests that she feels guilty about it and perceives it as a kind of failure to fulfill her care responsibilities, which she compensates for by visiting her mother daily. Marie elaborates on the difficulty in making such a decision. She is the only respondent in the FG with lower educational attainment who had her relative in an elderly home. The central difference between her and Darina was that Marie did not have to take the decision on her own; it was her father, who decided that he would like to stay in an elderly home. The way Marie talks about this care arrangement emphasizes that she would not have made this decision on her own, as she sees it as a certain moral failure:
Marie (57/86/LE): Like to put your parents in a nursing home. You don’t do that. It’s horrible.

Additionally she mentions that this decision was a response to his social needs (after his wife had died) and mobility problems. Marie also argues that he did not eat enough food and did not drink regularly. Now he is under some sort of “surveillance” in the retirement home.

Marie’s way of presenting her father’s decision to move to an elderly home again very clearly exemplifies the central and prevailing norm which importantly frames the respondents’ decision making on care arrangements. As outlined in this section, based on the ways the FG respondents perceive and present their care arrangements, the central norm in elder care is to enable the frail elderly to stay in the home/family environment as long as possible. From this point of view ideal caring arrangements are those that provide care within the family. While the use of professional home care services to support the informal care giver is in line with this norm, institutional care is seen as breaking it. The latter is further reinforced by the respondents’ negative experiences with the quality of institutional care and related social services. Hence, the FG participants see institutional care as a last resort, in cases where they are no longer able to handle the care at home. However, what exactly defines manageable care is ambiguous, and therefore the related decision making is perceived as very difficult and at risk of being evaluated (by others) as moral failure – for similar results cf. for example Přidalová (2006, 2007a).

The focus of this section, on the ways the FG respondents perceive their care responsibilities and their related care arrangements, showed that the identified perceptions are equally important for the respondents of both focus groups, independent of their educational attainment. This suggests that the identified elderly care norms are widely accepted. Moreover, they are in accordance with the central strategic policy conceptions for elder care presented in Chapter 4, which similarly emphasize the individual support of the person’s life in his/her “natural environment”. However, this general agreement on basic care norms does not automatically mean that the policy context fully supports the carers’ strategies in relation to decision making about their labour market integration and elder care arrangements. This is especially relevant as these central policy documents only superficially reflect that care work in the family environment is first and foremost done by women (cf. Chapter 4). Hence, in the following section we will focus on this point.

6.3 Decision Making on Labour Market Integration and Elder Care Arrangements

The elder care arrangements of the respondents in both focus groups show that the extent of care needs on the part of the dependent elderly family member is not necessarily the only factor which influences the form of the care arrangements.
Rather, the focus group discussions brought up a range of factors, independent of the care needs of their family members, which basically influence the respondents’ care arrangement. In this respect, in the following we will discuss: the respondent’s relationship to the frail elderly, their family and housing situation, their working conditions, the care benefit, the perceived quality of social services and the accessibility of information on care services.

The relationship to the frail elderly dependent

As outlined in detail in the previous section, the idea of generational reciprocity plays a central role in the respondents caring decisions. Hence, a close kinship, especially parental, is a major motivation for informal care in the family environment and for the great efforts to keep the frail elderly family member in the family environment as long as possible. This is exemplified by the case of Evelína and how she perceives the decision making about the care arrangement for her ex-mother-in-law:

_Evelína_ (57/81/HE): _And then grandpa (my former father-in-law) came back from the hospital, and then he was at home about half a year. But we had to leave grandma (my former mother-in-law) there, because he saw it too, that he absolutely wouldn't be able to handle it with her. That it was impossible. Because it was truly bad and then again on the other hand considering that it was my former mother-in-law, that decision was easier for me to make then if I had to deal with my own parents, I guess._

At the same time however, the decision to provide informal care influences the relationship between the informal carer and the elder. The relationship between the respondents and their parents was an especially sensitive topic, full of emotions in both focus group discussions. It seemed that for some respondents it was the first opportunity to talk about such personal matters. Several of them experienced the changing roles, of those who care and those who are cared for, as difficult to understand and deal with for both sides. These emotional aspects of care potentially intensify the pressure of norm and obligation for the respondents. This is exemplified in detail in the following part of the FG discussion:

_Matylda_ (41/65/HE): _I confused my mother with a child. Right from the start I simply tried to take care of her as if I was raising children. And I just mixed up that relationship really… all of a sudden I caught myself treating her like a child and we were even already, as they say, at the edge. We had a few good fights. And once that caregiver started working, well that cleaned the situation right up. The air was cleared, and now we take it differently. The fact that a third person has come on to the scene has rather enhanced our relationship. The relationship is so…_

_Moderator_: _The tension let up a little._
Matylda (41/65/HE): Yes, yes. I was stressed and afraid at the same time, if I could handle it all. Once that third person is there, it just got everything off my chest. So, it’s sort of better now.

Moderator: How does providing care influence how you deal with your relationship?

Vilma (64/90/HE): …Of course today she’s already used to having me there when she knows that I will leave, because she will then have peace and quiet, the evening news, etc… but it’s just that they are like ashamed, that someone has to take care of them.

Julie (52/75/HE) nods/

Vilma (64/90/HE): That’s the way it is, but I say, it’s until they get used to it. You see, that’s the way I got it somehow, because my dad died around six years ago. He was 86 and he had cancer that progressed so quickly that within a half year he was just gone, and they sent him to a sanatorium, but then he literally begged us not to send him anywhere, that they leave him at home so that we can take care of him. So truly, what a tough half year it was because he just really lay in bed the whole time. When you see your own father begging you not to send him anywhere, to let him stay at home…

Moderator: Yes, that is very difficult.

Vilma (64/90/HE): That’s when you first realize that is very hard, I can say. Before they get used to it, as you are saying, like they are children. You can spank a child, you can, but some old people are just plain bad. You want to help them but they want to do it themselves, so it’s just so…

Julie (52/75/HE): Because they don’t want to admit at all that they can’t manage anymore, that they are dependent on our help. Because they still see the children in us.

With regard to these often complicated relationships some of the respondents report, much like Matylda, that the involvement of professional caring services in the care arrangements helped to improve the relationship. Hence, the development of the caring relationship is also related to the respondents’ decision making about the involvement of home care services.

The family and housing situation

As outlined in the first section of this chapter, all FG participants reconcile work and care at the expense of their free time. Still, their successful reconciling importantly depends on the help of a broad network of informal supporters who help them to manage the care at home (apart from social services). In the first place it is the family: children (especially daughters) or partners and even other members of the broader family cooperate in caring – especially the respondents’ friends and friends of the elderly, who contribute to caring by visiting the elderly or helping them in acute situations when the main carers (usually daughters or daughter-in-laws) are at work. This shows that elder care requires a well-organized
cooperation and a network of supporters who are “on the phone” and are available to help in acute situations.

Moreover, in the cases of the FG respondents, the housing situation was often a factor which played a role in the decision making about whether to use home care services or not. In those cases, where the respondents provide care on their own (without the help of professional home care services, the dependent elder already lived with them, moved in, or lived very close to the informal carers, which made the care work easier. When the elder lived further away from the respondents, by contrast, home care services were often used (for example providing meals).

The working conditions

Working conditions also play a central role in supporting women in their informal care. Flexible working hours are very helpful as Marie and Linda mention. Also Vilma, who works part-time, is able to adjust her working hours (whether she works in the morning or afternoon). Finally, Isabela, who works as a programmer, even has the option of working from home. Arranging flexible working hours is, by contrast, especially difficult for those who work as doctors (Darina) or teachers (Mája, Ilona). In general however, flexible working hours and/or part time work are not very common in the Czech Republic (cf. Chapter 1).

On a more informal level, Linda, Nina, Lada, Isabela Pavla and Jarmila appreciate their understanding bosses and colleagues who support them in reconciling their caring duties with their work. Only Gita claims that her boss is not very supportive and, rather, complicates her caring tasks – for example, she is not allowed to make private phone calls during her working time (she had to teach her mother how to send SMS).

The care benefit

Although both the ministerial strategy (MPSV 2007) and informal carers support the central norm of enabling the elderly to stay in his/her natural environment as long as possible, current elder care policies do not enable women to stay at home or to decrease their working hours to work part-time. In this respect the FG participants argue that the care benefit is too low to compensate for the loss of income and the bureaucratic steps needed to get the benefit are too complicated. In this respect, the FG participants also criticize the process of examination and decision making about the benefit level. According to them, it is not objective and does not correspond to the actual situation of the elderly. As outlined in detail in Chapter 4, the level of the care benefit is based on the elderly person’s “degree of dependency,” which is determined by a social worker in co-operation with a doctor, and depends on the elderly person’s degree of self-sufficiency. However, some of the respondents (e.g. Lada) have the impression that this evaluation aims at keeping the level of the benefit as low as possible. Thus, for her, the bureaucratic requirements are too high, seeing as how she will probably end up with the lowest level of benefit anyway.
**Lada** (39/60/HE): What about care benefits? I found out on the Internet where it was written that you have to meet ten points to get two thousand, the lowest amount. So you have to meet…

**Gita** (49/69/HE): I think it’s 800.

**Lada** (39/60/HE): Sorry. 800. Eight hundred. So you have to meet four points. When like I looked at it. I was looking for it. Well, I said to myself I see it, yes. But I have the feeling that they are so strict about really giving you 800 crowns, that I said: “Well, it’d be better for you to keep your money.”

In the FG discussions the care benefit was not mentioned as a specifically supporting factor. Rather, the general consensus was that it is too low to finance appropriate care. Those respondents who use professional home care services experience financial constraints. This lack of money is especially an issue for participants with lower educational attainment, as Diana’s quote exemplifies:

**Diana** (51/77/LE): She gets care benefits of something like 800 CZK, and she needs more so that the caregiver can come more often. Because those services are really expensive and she, because she is sick, really has to put a lot of her money towards medicine.

From this point of view the question arises, whether the care benefit in fact supports the main policy goal of enabling the elderly to arrange the care they need to the extent they need, or if it rather contributes to the prevalence of unpaid informal care. For the informal carers in the focus groups, the caring benefit was definitely not sufficient remuneration, in the sense of compensating them for their care work. Rather, they saw it as a partial contribution to financing the overall care arrangement for their dependent elderly family member.

**The perceived quality of social services**

Home care services are central to reconciling the respondents’ care responsibilities with their gainful employment. The use of these services allows the carers to have more (or at least some) time for themselves and their families. This is the most positive factor for them. Without a visiting nurse, they would more often experience stress, exhaustion, and time pressure. As Nina says in the following quotation, she could not work full time without nursing, which would again mean financial constraints for her.

**Moderator:** If there weren’t these possibilities, how would it work for you?

**Nina** (41/65,66/LE): I would have a part-time job, and my partner and I would have to take care of them. I would have no other option. I definitely would not be able to spend a lot of time at work.
In Brno both private and public nursing services for the elderly are available. The public services provided by the municipality are cheaper, but have conditions that limit use. For example, as Diana pointed out, the extent and frequency of the provided public care services depends on the level of dependency of the elderly dependent (as well as the category of caring benefit). Furthermore, opening hours are short and the period of provided care is limited. The FG participants usually use these services for the delivery of lunches, personal care and household help for several hours during the day. Although the participants do not actively use private services they have an opinion or at least some idea about them. They see private services as more expensive, but also as responding better to the needs of the elderly and carers (longer opening hours, evening and weekend availability, etc.). Since financial constraints play a key role in decision making about the use of care services among the FG participants with lower educational attainment, these participants do not choose private services – as Matylda argues in the following quote:

Matylda (41/65/LE): Well, and at the time we originally wanted to get a private care company. But we would never have been able to pay for it. Mom went into early retirement, so there isn't too much money, because she was collecting lower early retirement benefits and went right into collecting normal retirement benefits and it all really went down to that money. And that's why there's no money there and I don't make so much... so for the time being we leave it to the city district. It's like really cheap and the women there are qualified. So for now we are leaving it to the state-run system. We will see what the future will hold. Like she is getting worse, but slowly, because she has that musculoskeletal problem. So we shall see what happens. For the time being the state option is enough.

When it comes to residential elder care facilities in Brno, the FG participants evaluate them as insufficient. Although the FG respondents see institutional care as the last option, they still see low capacities, long waiting times and low quality of care in elder homes as very problematic. Several respondents agree that the quality of care would improve with more personnel and hence a lower client to social worker/nurse ratio. Further negative issues brought up by the FG participants as related to their negative perception of institutional elder care were favoritism and bribes. The FG participants talked about favoritism and the need/possibility of bribes when they want to shorten waiting times for residential care. In some elder homes, waiting times are up to several years (Darina for example admitted that without favoritism she would not have been able to place her mother into an elderly home without a long waiting time. Evelína tells a similar story related to placing her mother-in-law in an elderly home for people with dementia. These factors underscore the respondents' skepticism towards residential elderly care and complicate their decision making on placing their frail elderly family member in such a facility when they themselves are not further able to care.
Information on available care options

Usually, the FG participants obtained important information about available care services from their acquaintances and friends (who either have their own experiences with care or work at the municipality or in hospitals). The internet is also a useful tool for some of them. However, many of the respondents are dissatisfied with the information they get from their general practitioners or other types of doctors. In this respect, the FG participants describe the information about specific services as a “rare commodity” that they can get only through connections. This is exemplified in the following quotes by Lada, Ilona and Gita:

Lada (39/60/HE): She (my acquaintance) advised me and said that today there is even home hospice here in Brno. But otherwise she didn't have information when I kind of tried to dig deeper. Because mom has fluctuating moods, depending on the situation. So I get the feeling that either I am very curious, or people around me aren't accepting of it, or that there is no need to give information.
Ilona (47/75/HE): That's true. You have to do everything...
Lada (39/60/HE): Everything by yourself.
Ilona (47/75/HE): Find things out like that from people you know.
Moderator: So, you didn't get information about various services from medical personnel or something like that?
Ilona (47/75/HE): Go on!
Lada (39/60/HE): No.
Gita (49/69/HE): I was so lucky that I ran into that one doctor who is always able to help me. On top of that I studied special education myself, so I knew enough about what care is like. I know because of my studies, but otherwise... /shakes head/

Concerning this perceived lack of information, it is interesting that the respondents do not refer to the department of social affairs at the municipality, which is actually supposed to provide them with such information. At the same time, this perceived lack of information also has an important systemic background: the fact that on a practical level social and health needs are interconnected, as the worsening of a person's health and subsequent hospitalization in a health care facility is often related to increasing needs of social services (e.g. the cases of Ilona, Lada and Gita), is not reflected in the organization of social and health care. The interconnection of health and social agendas, as well as the provision of information on both, is insufficient on all levels of elder care policy (from ministries, municipalities to service providers). Hence, the information which the respondents expect to be provided by one source is, in fact, scattered over two different system units and therefore is more difficult to obtain.
6.4. Conclusions

Based on the above outline of the particular factors influencing the decision making of the focus group respondents, we can now discuss the overall picture of the focus group respondents’ decision making about their labour market participation and care arrangements. Decision making on how the FG respondents’ close frail relatives care needs are met is influenced by strong care norms, the most important of which is the aim to enable the elderly dependent to stay in their known home/family environment as long as possible (cf. Přidalová 2006, 2007a for similar results). This norm/aim is part of the governmental strategy for elder care policies and at the same time forms the point of departure for the decision making of the FG respondents.

During the discussions, the force of this norm was especially exemplified by how Marie repeatedly presented and explained the fact that her father moved to a residential home. While she herself would not have taken this decision, her father decided on his own to move there (expecting more extensive social contacts there, which he had lost after his wife’s death). Similarly Darina also repeatedly reflected and explained her (difficult) decision to place her mother in an elderly home. From the point of view of this strong norm of “enabling the elderly to stay in the home/family environment as long as possible”, institutional care is perceived as a last resort, for those cases where the care needs can no longer be met in the family/home environment (bedridden patients, patients that need non-stop medical surveillance). For these cases, especially if the elderly person is a close relative (especially parents or parents-in-law), the norm of “enabling the elderly to stay in their known home/family environment as long as possible” also applies to a certain extent. Some of the focus group respondents (e.g. Matylda) also discuss the possibility of enabling care in the home/family environment for more complicated cases with 24 hour professional care services.

In this regard, the FG discussions brought up two important points which constrain the focus group respondents from achieving a satisfying care arrangement for their frail elderly relatives. Firstly, a lack of trust in institutional care and the perception of this form of care as being of low quality. During the discussions, the respondents repeatedly brought up certain characteristics of institutional care, which they see as problematic (especially too high ratios of patients to carer, long waiting hours, low pay and bad working conditions for the caring personnel). This perception of institutional care not only enforces the norm of “enabling care in the home/family environment as long as possible” but at the same time (as brought up e.g. by Matylda and Darina, but also discussed by Nina) it limits the acceptance of this form of care for more complicated cases (bedridden patients, patients that need non-stop medical surveillance) – e.g. Nina talks about the necessity of choosing institutional care very carefully. Secondly, financial constraints are a central point, especially for the FG with respondents with lower education.

These financial constraints are threefold and reinforce each other. The level of state support in the form of the caring benefit is rather low and within the existing system of defining the benefit level, some respondents see a certain tendency to
keep the level of the granted benefit low. This problem is also reflected in the fact that some respondents report the need to co-finance care/medication for their dependent elderly family members. At the same time, public social services are seen as financially available and their provision is evaluated by the respondents as being sufficient, but also as restricted in relation to the granted caring benefits and the extent of services provided (opening hours, etc.). Private services, which allow a more flexible use, are in turn financially available mainly for the respondents with higher educational attainment, however not necessarily to the extent to which they would perceive as ideal. Finally, in the context of the Czech Republic, part-time work is not widely used/available and if it is available, it is financially often unsustainable. Hence, as reported by the FG participants, there is (apart from the norm of full-time work for women) also an important financial need (especially for the respondents with lower educational attainment) to keep their full-time job, despite caring responsibilities. This need is further enforced by the low level of state support in the form of the caring benefit, which, if paid to an informal carer, does not compensate for the loss of income stemming from the reduction of working hours.

This leads to a clear picture of the respondents’ decision making about their labour market participation. The respondents in both focus groups work full time (with the exception of Vilma, who is already retired, yet continues to work part time) and have to reconcile their duties stemming from gainful employment with their caring responsibilities. As pointed out before, this is mostly achieved by cutting back their spare time. Hence for the FG respondents their job is not simply a financial necessity (especially for the group with lower educational attainment), or a source of self-fulfillment and realization (especially for the group with higher educational attainment), but also provides social contact (for all respondents), opportunities to socialize with other people and to take their minds off from their caring duties. That is, their employment to a large extent compensates for their lack of spare time, even if it means that they need to reconcile work and caring responsibilities.

In this situation, public social services play an important role in allowing women to work. However, these services do not allow them to achieve an ideal work/life/care balance. For many of the respondents with lower educational attainment this ideal balance would be a solution where they have a part-time job that allows them to earn their living in combination with less restricted public care services and/or more financially available private caring services. By contrast, for many of the respondents with higher educational attainment, this ideal balance would be a solution where they can use home care services for their whole full-time working time (only Gita can see a part-time job that would allow her to earn a living as preferable to her current full-time job). This would allow them to find an arrangement where they still have some spare time which is not filled with caring duties.

The respondents took for granted their current lack of spare time as well as how the meaning of spare time and time spent at their jobs has changed. This shows another normative layer in the respondents’ decision making about their work/care arrangements. In addition to the aim of enabling the elderly dependent
to stay in the home/family environment as long as possible, the question of who should provide care is also tied to normative considerations. As described before, the respondents present their personal involvement in the caring arrangement as filial obligation, a question of morality, humanity and decency as well as generational solidarity, responsibility and reciprocity, also in the sense of being a good example for one's own children. Hence, according to the FG participants, the responsibility for care is in the hands of the family. They do not mention individual responsibility and the responsibility of the state stands behind or rather supplements the responsibility of the family. This also provides a further explanation of how the respondents perceive institutional care facilities as a last resort when the family is no longer able to successfully provide sufficient care for the frail elderly family member. At the same time, the experiences of the FG respondents show that family care means first and foremost care by women (daughter or daughter-in-law). Though many of the respondents provide care in cooperation with other family members, they nevertheless carry the main responsibility for the caring arrangements and often also provide the management necessary to keep the care arrangement working.

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**Topics and questions of the FG discussions**

**THEME 1: WOMEN'S WORK**

(W1) Will you tell us a little about your work and what it means to you.

(W2) What are the things about working that are rewarding and make you feel good?

(W3) Are there any negative aspects to your work?

**THEME 2: RESPONSIVENESS TO DEPENDENT ELDERY RELATIVES’ CARE NEEDS**

(EC1) We know that there are many different kinds of care needs and care arrangements. I would like to start by asking you a little about the needs of your dependent elderly relatives and about how those needs are currently being met.

(EC2) You have described a range of care needs and care arrangements. We know that there are many different ways that people respond to the care needs of dependent elderly relatives, for example with contact, assistance, advocacy, personal care and so on. Could you talk a little about your own responses to your dependent relatives’ needs and your decision making about that.

(EC3) Could you say a little about whether the care needs of your relatives have remained the same over time and whether your responses to those needs have changed.

(EC4) Reflecting on your responses to your elderly relatives’ care needs, I would like now to explore ways in which your relationship with your dependent elder relative influenced your responses to their needs.

**THEME 3: RECONCILING EMPLOYMENT, FAMILY LIFE AND ELDER CARE NEEDS**

(R1) What, if any, positive or negative effects have the care needs of your dependent elderly relatives had on your life in general, and on your working life in particular?

(R2) I want to ask you about how public or private care services (ie., formal or non-family) make it easier or more difficult for you to continue in employment.

(R3) In relation to the care arrangements for your dependent elder relative, I would like to ask you about the extent to which the care contributions of family members and others in your social network make it easier or more difficult for you to continue in employment.

(R4) I would like to ask you now about your work and the extent to which your working conditions and work environment help or hinder you in responding to the care needs of your dependent elder relative.

(R5) In the context of your dependent elderly relatives’ care needs, I would like to ask have any of you had to make a key decision about participation in work in the last five years and to describe that a little please.
THEME 4 FACILITATING ELDER CARE, WOMEN’S EMPLOYMENT AND POLICY

(P1) You have spoken about a range of care needs and a variety of responses and arrangements. Now I want to ask you for your views on what you think are the best ways of meeting the care needs of the elderly, especially the frail elderly.

(P2) What changes in elder care policy (taxation, welfare benefits, etc.), care services, employment conditions would help employed women with dependent elder relatives with care needs?

(P3) If you were looking for work now, do you think there are many opportunities in the workplace for you at present?

(P4) In an ideal world, what would your perfect mix of work and care and family life be like?

Focus group – Participants

JARMILA is 39 years old, works full time as an ergotherapist, is single and childless. She cares for her mother (72 years) and they live together. Her mother needs social contacts and assistance (doctors, shopping), otherwise she is independent. Jarmila provides care alone without any professional help.

LADA is 39 years old, works full time as an assistant to an auditor, is married and has 2 children (15, 19). Lada cares for her mother (60 years old) who is an oncological patient and needs “complete care”, i.e. personal care (bathing, meals, toileting, and assistance) and household help. They live together in Lada’s place. Lada provides care alone without any professional help (only with the support of her family). Lada has experience with the care for her own grandmother (14 years ago) who was also an oncological patient. They have not asked for any welfare benefits (they see it as a very difficult administrative process with strict rules).

MÁJA is 46 years old, works as a teacher full time, is married and has two children (10, 17). She cares for her father-in-law (75) who lives in his own home nearby. She cares for him alone; he is almost independent but needs household help, assistance and meals.

PAVLA is 30 years old, works full time as a librarian, lives with her partner and is childless. She cares for her grandmother (80 years) who lives in her own home. (Pavla provides care alone with the support of her partner and her mother.) The grandmother needs assistance, household help and bathing.

DARINA is 60 years old, works full time as a pediatrician (with shifts in a hospital), is married and has 2 children (25, 33). She cares for her mother (80 years) who lives in an elderly home. The mother has dementia and needs complete care. The family members visit her every day and take her home from the elderly home at weekends.

EVELÍNA is 57 years old works full time as an economist, is divorced has 1 child (37). She cares for her mother (81 years) who lives in her own home that is close to the Evelína’s home. The mother is almost independent; she needs mostly social contacts and meals. They order lunches from a professional home care service. Otherwise, Evelina and her family help her mother with such activities as cooking. She has also the experience of having placed of her ex-mother-in-law in an elder home.

4 The names of the respondents have been changed.
ILONA is 47 years old, works full time as a teacher at a basic school, is married and has 2 children (20, 23). She cares for her mother (75 years) who lives alternately in Ilona’s home and in her own home. They arranged for a professional nurse who comes every day while Ilona is at work. The nurse helps with meals, insulin injections, and rehabilitation. Her mother needs social contacts, rehabilitation, assistance, personal care and has diabetes.

GITA is 49 years old, works full time as an assistant of management (she also has additional jobs as a cleaner and trainer of handicapped children). She and her partner live separately and they have no children. She cares for her mother (69 years), who lives in her own home that is close to Gita’s place. They arranged lunches from a professional home care service. Otherwise, Gita provides care alone (her partner doesn’t help her but he “tolerates” the situation). The mother is partly independent but needs “surveillance” and “motivation”, assistance and household help (cleaning, shopping). The situation of the mother rapidly got worse 15 years ago (several heart attacks), now it is getting better. Gita uses sarcasm and irony in her speech.

ISABELA is 46 years old, works full time as a programmer, is married and has a daughter (17). She cares for her father-in-law (81 years) who lives together with Isabela and her family. They hired a professional home carer who provides assistance and makes meals while Isabela is at work. Otherwise, Isabela takes care of her father-in-law with the support of her family (husband and daughter). The father-in-law needs social contacts, meals and motivation (is not interested in anything).

DOMINIKA is 46 years old, works full time as an administrative worker in a small company, is married and has 2 children (17, 25). She takes care of her mother (85 years) who lives alternately in her own home with her husband (Dominika’s father) and in Dominika’s home. They hired a professional home carer for approx. 2 hours a day (the carer provides rehabilitation, personal hygiene, medication, bathing). The mother needs personal care, the father is independent.

DIANA is 51 years old, works as a waitress on a full time basis, is widowed and has three children (22, 25, 27). She takes care of her mother (77 years) who lives 40 km from Brno. At the time of the focus group, her mother was in a respite care (temporary residential care) after she broke her hand. Otherwise they make use of a professional home care service: lunches every day (and shopping, household help) and twice a day a nurse comes with insulin injections.

JULIE is 52 years old, works full time as a clerk in the legal department of a company, is married and has 4 children (11, 28, 29, 32). She takes care of her mother (75 years) who has dementia and needs personal care and assistance. The mother lives in Julie’s house. They hired a professional carer who comes for about 4 hours a day (the carer provides meals, medication, personal hygiene, bathing). The rest of the time, Julie and her brother care for their mother.

LINDA is 40 years old, works full time as a production operator (operator výroby) and is married and has 2 children (7, 11). She takes care of her mother (67) who lives with her and for her mother-in-law (67) who lives in her own house. The mother (with diabetes) needs social contacts, assistance and regular meals. Linda (with the support of her family) provides care for her mother and mother-in-law without the help of professional services. She has also experience with the care of her father who has since died. The mother-in-law needs companionship and household help (meals, cleaning, shopping) because she has spinal problems and had breast cancer.
MARIE is 57 years old, is self-employed and works as a finance consultant on full time basis. She is divorced and has 2 children (19, 31). She takes care of her father (86 years old) who is in an institutional residential care – elderly home (domov pro seniory). The father lost contact with other people after the death of his wife (10 years ago) and decided to go to the elderly home several years ago. The father’s needs include social contacts, household help, personal care (help with hygiene).

MATYLDA is 41 years old, works full time as a postwoman, and is divorced and has two children (10, 20). She takes care of her mother (65 years old) who lives on the other side of Brno in her own house. They hired professional home carer for two days a week (the carer provides household help, small shopping, lunches). On the remaining days, Matylda provides care and assistance (after her job). The mother needs companionship, shopping, meals, personal care (bathing).

NINA is 41 years old, works as a head of a toyshop, lives with her partner and has no children. She takes care of both parents who live in their own home separately from Nina (65 and 66 years old). Her father is immobile after an injury and needs personal care (hygiene, toileting), household help (meals, shopping, transport). Her mother needs less care than her father but she needs personal care (hygiene) and personal help because she walks with a cane. They use a professional home carer (pečovatelská služba) three days a week (personal care, household care, lunches) and on the remaining days Nina and her partner provide care.

ODETA is 53 years old, works full time as an accountant, is married and has 2 children (26, 32 years). She takes care of her mother (83 years). They live together, and they do not use any professional care services. The mother’s needs include social contacts, companionship, personal care (hygiene) and household help (meals, shopping, transport).

VILMA is 64 years old, retired and works part-time (32,5 hours) as a shop assistant. She is married and has 2 children (34, 39). Vilma takes care of her mother (90 years old) alone without the help of professional care services. The mother lives in her own home close to Vilma. The mother needs assistance (walks, doctor, shopping), social contacts and personal care (bathing, meals).

Note: The participants sometimes also talk about experiences of other people and about former caring experiences. So the quotations are not only about the current care that they provide.
CHAPTER 7
What Does the Survey Data Say about How Women Balance Work and Family Life in Brno?

This chapter begins by looking at the career-orientations of women in Brno. Then it examines both attitudes toward and experiences with policies for taking care of children. Finally, it analyzes the issue of care for the elderly and how it influences women.

The survey was conducted in Brno in 2012 among women living there using the random walk sampling method. In total there were 804 respondents. To determine if Brno women were significantly different from Czech women in general, some questions were added to the survey. These questions have been used in some of the best-known international surveys, such as the ISSP (International Social Survey Programme) and the ESS (European Social Survey). Unfortunately, a problem arose in that those who designed the survey for the FLOWS EU project changed the scale from a 5-point scale to a 4-point scale. They did so by taking away the option “neither... nor...” Thus, even though we have these control questions, they are not completely comparable. Nevertheless, it seems that the percentage giving conservative replies seems to be much higher for the country as a whole than in Brno which gives some indication that women in Brno are less conservative than in the country as a whole. For example, to the question “Men’s job is to work and women’s job is to take care of the household,” 47.1% of Czechs agreed or strongly agreed (ISSP 2002 survey), while in Brno only 26.6% agreed or strongly agreed. Another problem, besides the fact that the scales are not exactly the same, is that the last available ISSP survey is 10 years older than our Brno survey. National level attitudes may have changed by now. Next year the ISSP 2012 which deals with gender and family issues is due to be released, making it easier to make comparisons.

7.1 Career Aspirations of Women

As already noted in the introduction, women in the Czech Republic are expected to work full-time until they have children and then they are expected to stay at home until their children reach the age of three, but then they are expected to go back to work full-time again. This differs from the “male-breadwinner/female-part-time-caregiver model “whereby women were expected to interrupt their careers for several years in connection with childbirth and then to work part-time thereafter (Pfau-Effinger 2004, 2005). Thus, the Czech Republic has an unusual combination of the dual-earner model when there are no children or children are over three and the male-breadwinner/female housewife model for
the period in which the child is born until it starts kindergarten. However, even for the periods when the mother works, the country does not have the dual-earner/dual-carer model (Crompton 1999), as the mother is still expected to be the main one responsible for the child-raising and household tasks (Saxonberg and Sirovátká 2006, 2007).

Our survey also indicates that in Brno this pattern emerges. First, when asked “if you had a completely free choice would you prefer a paid job or not to work at all?” only 13.9% answered that they prefer not to work at all. This is much lower than Hakim (2000) predicts in her preference theory, for example, that in industrialized societies about 20% of women are family oriented and prefer not to work, while another 20% are career oriented and prefer to work regardless of governmental policies and around 60% are adaptable and will decide whether to work or not depending on such issues as access to daycare. The Brno survey shows that less than 14% are family oriented.

Second, when asked how much they would ideally want to work, the median reply was 40 hours/week, which is the norm throughout most of the industrialized world today. The mean was slightly lower at 34.9 hours because a few women want to work less than 10 hours which brought down the average. In addition, one woman replied that she would ideally want to work 90 hours, but since the reply is not very believable, it was coded as a missing variable on the assumption that there must have been a mistake either in her answer or in the coding of her answer. Only 11.6% would want to work 20 hours or less and only 18.2% would want to work less than 30 hours. This total comes close to Hakim’s 20% being family oriented, but a woman who wanted to work around 30 hours per week is hardly family oriented in the stricter sense of the word.

Even though most women are work-oriented, the vast majority of them do most of the household work and childcare. Our survey shows that in Brno 76.8% of the women claim to do all or most of the housework, while only 19.3% share equally and 3.9% do little or none of the housework. Of those with children under 1, the mother takes care of the child in 91.2% of the cases and the father in only 3.5% of the cases (although this is much higher than the national average of around 1%; Maříková 2008). Nevertheless, the gender norm in which the mother should stay at home with the child until the age of three seems to be weakening somewhat, as our survey shows. Despite an almost complete lack of public debate on the need for fathers to share in the parental leave time, 15.3% agree that fathers are not capable of taking care of children 6 months to 3 years old, while 50.3% disagree. This indicates that the lack of fathers sharing in the child raising duties is not only a question of conservative gender norms, but also a question of the parental leave system not giving them incentives to share in the leave time. If the Czech Republic introduced an insurance-based system that paid parents a large portion of their previous incomes, so that fathers would not lose much income if they stayed at home with their children and if it also introduced father quotas, then the Brno survey indicates that most mothers would not be against having fathers share in the leave time.
Table 7.1 What is the Ideal Amount of Hours to Work per Week?

<table>
<thead>
<tr>
<th></th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>40.191</td>
<td></td>
<td>***</td>
</tr>
<tr>
<td>Age</td>
<td>−.060</td>
<td>.068</td>
<td>ns</td>
</tr>
<tr>
<td>Political Self-Placement (0=extreme left, 10=extreme right)</td>
<td>.818</td>
<td>.250</td>
<td>***</td>
</tr>
<tr>
<td>Net income in Euros</td>
<td>.004</td>
<td>.003</td>
<td>ns</td>
</tr>
<tr>
<td>Cohabiting (1=yes, 0=no)</td>
<td>.639</td>
<td>1.371</td>
<td></td>
</tr>
<tr>
<td>Educational Level 0-7</td>
<td>−1.968</td>
<td>.489</td>
<td>***</td>
</tr>
<tr>
<td>How much housework (1=all, 5=none)</td>
<td>−.438</td>
<td>.765</td>
<td>ns</td>
</tr>
</tbody>
</table>

(n=201) * p≤.05, ** p≤.01, *** p≤.001

As Table 7.1 shows, not all women want to work the same amount of hours. It turns out that those, who are more rightwing politically want to work more hours. On the one hand, this makes general sense: those who are rightwing in the sense of being market liberal are likely in general to see work as something good for society, while those with more “post-modern” or “post-materialist” values (which is normally associated with the “new left”) might think that other quality of life issues like living in a good environment are more important than working.1 On the other hand, if one perceives rightwing as measuring the degree of conservativeness, then we would not expect conservative women to want to work many hours, since conservatives generally think women should concentrate on the household rather than on having careers.

Interestingly, educational level works in the opposite direction: those with higher levels of education would like to work fewer hours than those with lower levels of education. If the question were whether one would want to work more or less hours than one works today, then the explanation could be that those with higher levels of education have better paid jobs, but also must work more hours. If the question were to be “given the profession that you have today, how many hours would you want to work?” then an explanation could be that those with lower levels of education have lower incomes, so they would want to work more hours in order to increase their income. However, the question was “In an ideal world, how many hours would you prefer to work each week?” Since the question asked about an ideal world, if the respondents generally understood the question correctly, their answers would not be based on the need for getting a certain income (because in an ideal world they would not need an income) but rather how much would they like to work to feel self-fulfilled. Thus, it is reasonable to interpret the negative correlation between educational level and ideal working hours as a sign that those with higher levels of education have more post-modern

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1 For a discussion of post-modern values, see, for example, Inglehart (1997) and Inglehart and Norris (2003).
values and would prefer to have more free time for pursuing hobbies and other activities than paid work.

### 7.2 Attitudes toward Childcare

As discussed in the introduction, because of historical-institutional developments, the norm emerged in which it is seen as “natural” that the mother stays at home with the child until the age of three (see also Hašková and Saxonberg 2010; Hašková, Saxonberg and Mudrák 2012; Saxonberg 2014). As noted in previous chapters, both state and municipal policies encourage this idea, because the parental leave hold few incentives for fathers to share in the leave time and because public daycare for children under three is extremely rare; meanwhile, few families can afford the high prices of private daycare centres.

As Table 7.2 shows, in the vast majority of cases, the mother is the main carer for children under three in Brno as they stayed at home with their children in 91.2% of the cases at the time of our survey. Only a measly 1.8% of children were attending private daycare and none were attending public daycare. In 3.5% of the cases, the father was the one staying at home with the child and in a similar portion of cases the grandparents or other relatives were the main carers. Thus, most mothers follow the “gendered rationality” model (Duncan and Edwards 1999; Duncan and Strell 2004) that states that it is “proper”, whatever the costs, for mothers to be the main carers of their children until the children reach the age of three. In contrast, a full 83.9% of pre-school children above three years of age were attending public daycare (which in the Czech case means kindergartens). Mothers were the main carers in only 9.7% of the cases and grandparents or other relatives in 6.5% of the cases. Along with the decision to send older children to kindergartens while keeping children under three at home, comes the belief among a large portion of Brno mothers that nurseries are of poor quality (32%), while only 6.5% have the same opinion about kindergartens.

**Table 7.2 Who Takes Care of Children Younger than Three-years Old**

<table>
<thead>
<tr>
<th>Caregiver Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>In commercial/private day care centre/nursery</td>
<td>1.8</td>
</tr>
<tr>
<td>I look after my own child at home</td>
<td>91.2</td>
</tr>
<tr>
<td>He/she is looked after at home by myself and the child’s father</td>
<td>3.5</td>
</tr>
<tr>
<td>He/she is looked after at home by their grandparents or other relatives</td>
<td>3.5</td>
</tr>
</tbody>
</table>

(n=57)

But Table 7.2 just shows the actual decisions of mothers (and fathers) without investigating what the mothers really think. Perhaps many would want to send their children under three to daycare, but there are simply not enough public places available, the cost of public care is too high, or they believe that the quality...
of care is too low. As noted in the introduction, the communist-era nurseries had a poor reputation for having been impersonal and run like mini-hospitals, with nurses dressed in white taking care of the children. Parents were not even allowed to enter the nurseries because that was considered a health risk (e.g. Saxonberg 2014). And because the groups of children were rather large, illnesses spread quickly. Consequently, when Czechs think of daycare for children below three, they are likely to imagine the communist-era nurseries rather than more modern, humanist, child-centered nurseries.

Table 7.3 gives more details on the beliefs of the mothers in Brno. It clearly shows that the majority believe in the norm of threeness because 50% think that children under three should stay at home, and an additional 3.6% state that they do not “want” to use daycare. The group of mothers, who are on maternity leave (21.4%) are more ambivalent. Because they are on maternity leave for a younger child, it might seem practical for them to have the older child stay at home as well, since they are already home full-time – especially given the fact that private daycare is rather expensive. On the other hand, they might also think that it is generally good for children under three to stay at home. So it is difficult to know what this group thinks should be done with children under three if the mother is unable to take maternity leave.

<table>
<thead>
<tr>
<th>Main reason</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children that age should be cared for at home</td>
<td>50.0</td>
</tr>
<tr>
<td>I don’t want to use childcare</td>
<td>3.6</td>
</tr>
<tr>
<td>I am on maternity leave</td>
<td>21.4</td>
</tr>
<tr>
<td>Not against the idea of daycare</td>
<td></td>
</tr>
<tr>
<td>There are no childcare services available where we live</td>
<td>1.8</td>
</tr>
<tr>
<td>The quality of childcare services is not good enough</td>
<td>7.1</td>
</tr>
<tr>
<td>Too expensive</td>
<td>7.1</td>
</tr>
<tr>
<td>Child too young</td>
<td>8.9</td>
</tr>
</tbody>
</table>

(\(n=56\))

On the other hand, a group of mothers gave other reasons besides a moral belief that it is wrong to send their children to daycare. 1.8% claimed that the reason they did not send their childcare was that there quite simply were no places available where they lived. Consequently, if there were daycare places where they lived, they might have sent their child there. Another 7.1% claimed that daycare is too expensive, which implies that if it were cheaper they would have sent their child. The same percent replied that they did not send their child to daycare because they do not think the quality is good enough. This means logically that if they believed the quality of services were high, then they would have used them. If they simply believed that all daycare centres in the world must be of low quality because they can never offer as high quality care as the mother, then they most probably would have answered that they think that children at that age should be
cared for at the home. Finally, 8.9% said they believed their child was too young. This means that if their child were older – but still younger than three-years old, then they would have wanted to send their child to daycare.

Altogether, this means that about one-fourth of mothers could imagine sending their children under three to daycare under the right circumstances. Even if this is not an extremely high level, it still comes close to the Barcelona goal of 33% of children under three attending daycare. Moreover, if 25% really attended daycare and the quality were rather good, then it is highly likely that daycare would get a better reputation and an increasing number of mothers would want to send their children there.

One of the reasons why mothers might not want to send their children to daycare is their general lack of trust in the state and local governments’ ability to deliver high quality services. In the political science literature, this is known as the issue of state capacity: do people believe that the state is capable of actually delivering a service? (cf. Rothstein 1992). The respondents were asked to rate how much trust they have for different institutions on an 11-point scale of 0–10, with 0=no trust and 10=complete trust. Table 7.4 shows that levels of trust were quite low for all cases except for childcare. However, it should be noted that the age of the child was not asked, so given the fact that nurseries for children under three are almost non-existent now, most respondents were probably thinking about kindergartens for children over three when answering that question. Even in this case, trust was only barely above the middle point.

### Table 7.4 Trust in Institutions

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust in childcare</td>
<td>739</td>
<td>5.1</td>
</tr>
<tr>
<td>Trust in elderly care</td>
<td>738</td>
<td>4.1</td>
</tr>
<tr>
<td>Trust in the municipality</td>
<td>776</td>
<td>3.3</td>
</tr>
<tr>
<td>Trust in parliament</td>
<td>773</td>
<td>3.1</td>
</tr>
</tbody>
</table>

(scales 0–10, 0=no trust, 10=complete trust, 5=middle score)

Given the fact that Brno mothers have very little trust in the city and national governments, it is not surprising that they would not trust them to be able to deliver high-quality childcare for children under three – especially since they are even skeptical of the ability of the public sector to provide quality childcare for pre-school children above three in an area where well over 83% of such children were in fact attending public nurseries.

In order to see which factors influence attitudes toward sending children to daycare, a dummy variable “possible” was created, to represent the 24.9% of mothers, who would possibly consider sending their children to daycare.
Table 7.5 Logistic Regression for Possibly Being Willing to Send One’s Children under Three to Daycare

<table>
<thead>
<tr>
<th></th>
<th>Coef.</th>
<th>Std. Err.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>3.94</td>
<td>.19</td>
<td>.314</td>
</tr>
<tr>
<td>Left-Right self-placement (0–11, 0=extreme left, 10=extreme right)</td>
<td>−.09</td>
<td>.155</td>
<td>.559</td>
</tr>
<tr>
<td>Age</td>
<td>−.10</td>
<td>.10</td>
<td>.332</td>
</tr>
<tr>
<td>Educational level (1–7)</td>
<td>−.07</td>
<td>.37</td>
<td>.851</td>
</tr>
<tr>
<td>Trust in parliament</td>
<td>1.29</td>
<td>.79</td>
<td>.153</td>
</tr>
<tr>
<td>Trust in the municipality</td>
<td>−.92</td>
<td>.69</td>
<td>.181</td>
</tr>
<tr>
<td>Trust in childcare</td>
<td>−.31</td>
<td>.19</td>
<td>.093</td>
</tr>
</tbody>
</table>

Log likelihood = −25.556882

(n=52)

As Table 7.5 shows, none of the independent variables are statistically significant at the .05 level. However, trust in the childcare system is statistically significant at the .10 level. Considering the small number of women in the sample with children under three (52 in total who answered all the questions), then one could decide to accept the .10 level as significant, which is often done in cases when the number of cases is below 100. In addition, when performing a logistic regression with only trust in daycare as the independent variable (and thereby increasing the degrees of freedom and increasing the number of observations to 55), then trust in childcare almost becomes significant at the .05 level. The probability of the answer being just a coincidence is .051. In other words, this is reason to believe that the issue should be explored more fully. If a larger group of people were studied, then it is likely that the relationship between trust in daycare and willingness to send one’s child there would become statistically significant.

The daycare system and parental leave system make it difficult for mothers to balance work and family life. Many would consider sending their children under three to daycare under the right conditions (about one-fourth), but few do under today’s conditions. Even though it seems many women accept the current system based on the “national ideal of caring” (Kremer 2006) in which the mother should stay at home with her child until the age of three, fully 38.6% admitted that the current childcare arrangements only partly meet their needs or do not meet their needs at all. Interestingly, there was no statistically significant relationship between claiming that current daycare arrangement meets one’s needs and being open to the possibility of sending one’s children under three to daycare.

A problem of the current family policy arrangements is shown by the fact that less than one-third of all mothers in Brno are able to return to their previous jobs. As Table 7.6 shows, a small difference exists according to educational level. Those with higher educational levels are slightly more likely to be able to return to their previous job than those with lower educational levels.
Interestingly, the one factor that seems to make it easier for women to return to their previous position is if they are married or living with a partner. Table 7.7 shows that women, who are cohabiting with a partner are more than five times more likely to return to their previous jobs. None of the other variables are statistically significant.

Table 7.7 Logistic Regression for Returning to Previous Job after Parental Leave

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>−4.49</td>
<td>1.39</td>
<td></td>
<td>***</td>
</tr>
<tr>
<td>Cohabiting (1=yes, 0=no)</td>
<td>1.71</td>
<td>5.55</td>
<td>.84</td>
<td>*</td>
</tr>
<tr>
<td>Educational Level 0–7</td>
<td>.23</td>
<td>1.26</td>
<td>.19</td>
<td></td>
</tr>
<tr>
<td>How much housework (1=all, 5=none)</td>
<td>−.12</td>
<td>.88</td>
<td>.42</td>
<td></td>
</tr>
<tr>
<td>Trust in parliament</td>
<td>.35</td>
<td>1.42</td>
<td>.35</td>
<td></td>
</tr>
<tr>
<td>Trust in the municipality</td>
<td>−.03</td>
<td>.97</td>
<td>−.03</td>
<td></td>
</tr>
</tbody>
</table>

Log likelihood = −49.413522

Finally, even though the grandparent model is not so widespread in Brno and they are no more likely to take care of the children than the father is (see Table 7.2), many of the grandmothers who take care of their grandchildren maintain that this responsibility has limited the type and amount of paid work they can do. A large minority of 42.4% responded that they either strongly agree or agree that taking care of their grandchildren had limited the type or amount of paid work they could do.

7.3 Taking Care of the Elderly

Women’s ability to participate is not only dependent on the availability of childcaring arrangements but it is also influenced by policies of caring for the elderly (e.g. Eichler and Pfau-Effinger 2009; Outshoorn 2008). As noted in Chapter 1, Czech policies toward caring for the elderly had already begun to move in a familializing direction during communist rule. The goal of the reforms was premised on families doing most of the work of caring for the elderly (Maříková
and Plasová 2012). In practice this means that daughters have to be willing to make sacrifices in their careers to take care of their parents or parent-in-laws.

Our survey asks the question of what type of care the respondents think would be the best if an elderly parent could no longer manage to live on his or her own. As Table 7.8 shows, the majority favor non-institutionalized arrangements. The largest portion (32.1%) thinks that they or one of their siblings should invite the parent to move in with them. A sizable minority of 40.2% prefers institutionalized arrangements of either having their parent move into a nursing home (29%) or having their parent receive healthcare services (11.2), which presumably means getting home visits from nurses, social workers or other types of “home helpers.”

**Table 7.8** What is the Best Type of Care if the Elderly Parent Can No Longer Manage to Live on His/Her Own?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>I or one of my brothers or sisters should invite my father or mother to live with one of us</td>
<td>32.1</td>
</tr>
<tr>
<td>I or one of my brothers or sisters should move in with my father or mother</td>
<td>6.5</td>
</tr>
<tr>
<td>One should move closer to the other</td>
<td>14.1</td>
</tr>
<tr>
<td>My father or mother should move into an old people’s home or nursing home</td>
<td>29.0</td>
</tr>
<tr>
<td>My father or mother should stay at home and receive visits there, as well as appropriate health care and services</td>
<td>11.2</td>
</tr>
<tr>
<td>Don’t know</td>
<td>7.1</td>
</tr>
<tr>
<td>Total</td>
<td>100.0</td>
</tr>
</tbody>
</table>

(*n=794*)

When asked, however, what the elderly parents actually are doing, it turns out that only 10.9% have moved into nursing homes (compared to the 29% that expressed the preference) and only 8.2% have the aid of home helpers (compared to the 11.2% preference). Thus, it seems that there is a clear gap between how much institutionalized care is desired and how much is actually provided.

**Table 7.9** Why do You Provide Care and Support for Your Elderly Relatives?

<table>
<thead>
<tr>
<th>Main reason</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Because they did not wish to leave their home</td>
<td>17.7</td>
</tr>
<tr>
<td>There are no places available in a residential or nursing home</td>
<td>11.3</td>
</tr>
<tr>
<td>The quality of care in residential and nursing homes is not good enough</td>
<td>6.5</td>
</tr>
<tr>
<td>The cost of a place in a residential or nursing home is too high</td>
<td>3.2</td>
</tr>
<tr>
<td>There are no residential or nursing homes near enough to where they have always lived</td>
<td>8.1</td>
</tr>
<tr>
<td>My relative does not qualify for public-funded residential care services</td>
<td>4.8</td>
</tr>
<tr>
<td>The cost of home-based services is too high</td>
<td>9.7</td>
</tr>
<tr>
<td>I believe older people should be cared for by their children when they can no longer manage on their own</td>
<td>24.2</td>
</tr>
<tr>
<td>Because they are my parents</td>
<td>8.1</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1.6</td>
</tr>
<tr>
<td>Refused to answer</td>
<td>4.8</td>
</tr>
</tbody>
</table>

(*n=62*)
Table 7.9 shows that of the women who actually take care of their parents or parent-in-laws, a large portion would have preferred institutionalized care. 29.1% would have preferred sending their parents or parents-in-law to a nursing home, but are not able to because, for example, the family member does not qualify for admittance to the home, the homes are of too low quality, there are not any in the area or they are too expensive.

Meanwhile, another 14.5% of those taking care of their relatives would have preferred to use home-based care, but either such care was too expensive for their means or the family member does not qualify for this kind of help. This means that a total of 43.6% of those acting as the primary carers of elderly family members would have preferred an institutionalized arrangement, such as homehelpers or nursing homes, if these services were available, the quality were high and they were affordable. This shows that the national and local government could do much more to meet the needs of families with elderly members, who are no longer able to take care of themselves. The “familializing” policies that pressure daughters/daughters-in-law to take on the responsibility of care giving make it more difficult for women to balance work and family life.

It turns out that those who take care of the elderly are relatively old themselves. Over 55% of those taking care of the elderly are themselves aged 51–63, which means it is unlikely that they are still taking care of their children at the same time. Those taking care of elderly were also rather well educated, which indicates that this caring burden hits their careers particularly hard. Over one-third of those caring for elderly family members have an advanced vocational or a sub-degree. An additional 16% have a university education.

The survey also shows that half of the women, who take care of older relatives have to limit the type or amount of paid work that they do (see Table 7.10). Thus, this extra caring burden makes it very difficult for them to pursue their careers and balance work and family life. In addition, having one's work limited when one cares for elderly relatives is significantly related to educational level (Pearson’s Correlation=.394, significant at the .05 level). In other words, the added caring tasks present particularly difficult demands on the more career-oriented women, who studied at universities or higher-level vocational schools.

<table>
<thead>
<tr>
<th>Answer</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>14.5</td>
</tr>
<tr>
<td>Agree</td>
<td>35.5</td>
</tr>
<tr>
<td>Disagree</td>
<td>37.1</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>3.2</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9.7</td>
</tr>
<tr>
<td>Total</td>
<td>100.0</td>
</tr>
</tbody>
</table>

(n=62)
Finally, it is interesting to note that when it comes to preferences for care of elders, age was the only factor that was statistically significant on the question of whether one prefers institutional care (nursing homes or homehelpers). Younger people were more positive toward institutionalized care than older people. As Table 7.11 shows, having a higher level of education did not matter. It should be noted also that when educational level was measured on a scale of 1–7, then age was no longer significant at the .05 level, although it was close at $p=.057$.

**Table 7.11 Logistic Regression for Supporting Institutional Care for the Elderly (Nursing Homes or Home Helpers)**

<table>
<thead>
<tr>
<th></th>
<th>Coef.</th>
<th>Std. Err.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>.77</td>
<td>.01</td>
<td>ns</td>
</tr>
<tr>
<td>Prefers to work in an ideal situation rather than stay at home</td>
<td>$-0.34$</td>
<td>.23</td>
<td>ns</td>
</tr>
<tr>
<td>Age</td>
<td>$-0.02$</td>
<td>.01</td>
<td>*</td>
</tr>
<tr>
<td>University Education or Higher Vocational</td>
<td>$-0.31$</td>
<td>.21</td>
<td>ns</td>
</tr>
<tr>
<td>Trust in parliament</td>
<td>.11</td>
<td>.08</td>
<td>ns</td>
</tr>
<tr>
<td>Trust in the municipality</td>
<td>$-0.10$</td>
<td>.07</td>
<td>ns</td>
</tr>
<tr>
<td>Trust in elderly care</td>
<td>$-0.06$</td>
<td>.04</td>
<td>ns</td>
</tr>
<tr>
<td>Cohabiting</td>
<td>$-0.34$</td>
<td>.19</td>
<td>ns</td>
</tr>
</tbody>
</table>

Log likelihood $= -311.13025$

(n=464) * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$

### 7.4 Conclusions

The survey data basically supports the information that we got from the interviews in the focus groups. It shows that most women still believe in the national ideal of caring in which mothers are to stay at home until children reach the age of three. However, about one in four could imagine sending their children under three to daycare if the quality were high and it were easily accessible. This indicates that measures to improve access to high quality daycare could still result in improved conditions for a large number of women. Moreover, if 25% of mothers really sent their children to daycare and had good experiences, then daycare would get a better reputation and it is likely that demand would increase.

The survey also shows that most of the caring is done by mothers, and it is rather rare for fathers, grandparents or daycare to take over part of the caring tasks. Thus, supporting the “grandmother option” does not seem feasible. Nevertheless, the survey data also shows that the vast majority of mothers think that fathers are capable of taking care of children. This means that changes in the parental leave system that would encourage fathers to share the leave time could ease the burden of women in caring for children.

As expected, the lack of daycare for children under three, combined with the increased difficulty in finding kindergarten places even for older children and the near complete absence of fathers taking part in parental leave, all combine to
make it difficult for mothers of young children to compete on the labor market. Much less than one-third of all mothers were able to return to their previous jobs, although highly educated women were a little bit more successful in doing so.

The questions about care of the elderly show that there is a large gap between what type of caring women would prefer for their parents or parent-in-laws and what kind of caring arrangements are actually used. Although over 40% would prefer institutionalized caring in the form of retirement/nursing homes or home helpers, such services were used less than half as much (i.e.19.1%). The respondents mention problems such as the poor quality of the services, lack of availability, the inability of the elderly to officially qualify for care, and high costs as reasons for not using institutionalized care. The survey also shows that half of all women who take care of the elderly either have to change their working hours or type of work. Today's arrangements make it extremely difficult for women to balance work and family life.

REFERENCES


CHAPTER 8
Conclusions and Policy Recommendations

Mothers – Grandmothers – Daughters

This book described and discussed two central care norms, how they are institutionalized in related policy areas and how they potentially structure the lives of women in the Czech Republic and Brno in general and their labour market chances in particular: the norm of personal full-time care for children under the age of 3 by their mother and the norm of enabling frail elderly family members to stay in their home environment as long as possible. Though these two care norms are related to very different life situations, they have a common denominator. That is, they bring about the need for (informal) care work, which is predominantly ascribed to and done by women, as mothers, grandmothers, and daughters.

In this sense, the title of our book is a reference to a certain chronology of care, which structures the lives of many women in Brno and the Czech Republic: mothers care for their children on a full-time basis, especially when the children are younger than three years. In this task, they are however often supported by other family members, most importantly the child’s grandmother. This involvement in the care arrangement often allows the mother to re-enter the labour market, and to a certain extent helps to diminish the negative labour market outcomes related to the mothers’ long parental leaves, as for example unemployment or losing the possibility of returning to the former work place. All in all, it allows them to achieve a certain work/life/care balance. At the same time, however, in these cases the care responsibility remains clearly gendered and is simply shifted between two generations of women. While for the women we interviewed, care by the grandmother is often the decisive factor which enables them to return to work while having a care arrangement which remains within the prevailing care norms, it remained unclear what implication these care arrangements have for the grandmothers. That is, whether they had negative (labour market) implications for them, e.g. in the form of necessary working hour reductions, early retirement etc. and/or produced work/life/care imbalances for the grandmother. Finally, daughters care for their frail parents (or parents-in-law), with the motivation to enable them to remain as long as possible in their home environment. In this regard, our analysis focused on how women manage to do so while they remain in gainful employment. Hence, for them the central question was also how to balance gainful employment with their private life and their care responsibilities.¹

¹ The situation of grandmothers as well as of women who left the labour market in order to care for a frail family member was not part of the research focus of the FLOWS project. Our findings however indicate that they deserve further attention and research, which should focus on the
For the women we discussed these issues with, both child care and elder care constituted important parts of their life, and they hardly questioned the ascription of care work predominantly to women. At the same time, however, these women saw gainful employment as an important source of meaning and financial security in their lives. Thus they aimed at achieving a certain balance between these important parts of their life. Based on their experiences, which we collected and presented in this book, and our analysis of the care related policy and institutional contexts, we were able to identify, where and how this institutional and policy context hinders women from achieving their individual ideal work/life/care balance.

In this regard, in the following we now turn to both care norms individually, summarize the main findings of our project and relate them to suggestions for policy changes, which bear the potential to reduce the identified barriers. Our suggestions aim not only at helping caring mothers, grandmothers and daughters to achieve a better work/life/care balance and to strengthen their labour market position in the given situation, but go also a step further. That is, we also present possibilities which potentially contribute to a degendering of informal care work and hence to a more equal distribution of informal care work between men and women.

Taking care of pre-school children in Brno

The point of departure of this book was an analysis of the basic patterns of women's labour market participation in Brno. In this respect, the overview and analysis of relevant data available for the local level (especially from the census in 1991, 2001 and 2011) in Chapter 1 suggests important continuities after the end of the communist regime, when it comes to the basic norms and values related to women's labour market participation and most importantly the ways of combining gainful employment with care responsibilities. Despite a certain decrease of women's labour market participation during the 1990s, the norm of their full-time labour market participation remained rather stable. Similarly, the expectation of personal full-time care by the mother until the child reaches the age of three still plays an important role, as shown by the data on the labour market participation of women with children in this age group. However, what has fundamentally changed since 1989 is the economic and social context in which these patterns take place today and hence the consequences for women on the labour market: while under communist rule (with guaranteed employment) the norm of full-time labour market participation in combination with a strongly gendered division of care duties, requiring long absences in case of motherhood, predominantly meant a constraint on a women's career; in the current economic context, it moreover significantly increases the risk of unemployment. As the discussion of the unemployment rates of women with children in different age groups has shown, in Brno, the risk of unemployment doubles for women with children aged 3–5; that is, for those women who, after having a child, wish to
Conclusions and Policy Recommendations

return to the labour market. From the perspective of the FLOWS project and its main goal of examining the potential support on the part of local welfare systems for women's labour market participation, this group of women is of special interest: these women are willing to work, while at the same time, due to their caring responsibilities, they have problems in finding their way back into the labour market.

Chapters 3 and 5 explored this problem in more detail, from two different perspectives. Chapter 3 focused on how family and childcare policies on the national and local level potentially support and/or hinder women's return to the labour market after having a child. In this regard, the major issues and problems, which also fundamentally characterize the current overall childcare situation in Brno, turned out to be the lack of childcare capacity in public kindergartens (related to the recent baby boom), the lack of a developed system of alternative facilities and services based on clearly and centrally outlined quality standards, as well as a certain financial support for these forms of care, which would increase their financial accessibility. This situation is not new. It has been developing over the last few years, and it is not unique to Brno, but rather relevant for the Czech Republic as a whole. Hence the leeway for local politicians to change it is rather limited. On the local level, the municipality has made some efforts to raise the capacities of kindergarten facilities and to support (at least on a basic level) the development of alternative childcare facilities (e.g. through grants). In this respect it is nevertheless also necessary to point out that the efforts in Brno to raise kindergarten capacities have been oriented first and foremost towards maintaining the status quo. Moreover, the support of women's labour market participation or gender equality on a more general level is not an explicit priority of the Brno city administration. It is only in the framework of the local family policy strategy that the need to reconcile work and family life is recognized as a relevant topic. These efforts have been limited by a lack of national measures. Currently, municipalities have few practicable alternatives to establishing kindergarten facilities (registered in the school register, which demand substantial financial investments) which would allow them to flexibly expand their offer of childcare services (the baby boom is expected to end by next year) and/or offer higher capacity for children under the age of 3. A basis for the establishment of such alternative care services (operated by the municipality as well as by private for-profit or non-profit organisations) is provided in the bill on childcare groups. The proposed measures would bring about some important basic improvements regarding the development of such alternative childcare facilities – first and foremost making it easier to establish alternative childcare facilities which meet basic quality standards, thus providing a certain amount of support for reconciling work and family life. The question remains when these changes will finally be introduced.

In this respect, Chapter 5, presenting the results of the two focus group discussions with women with a child of preschool age (0–5), showed that the respondents evaluate the provision of childcare services for pre-school children in a very similar way. The strongest demands for improvements (in both groups) were articulated by the FG respondents in relation to the kindergarten system,
where a current lack of capacity leads to problems especially with the placement of children aged 3–4 years. In the current institutional context in the Czech Republic and Brno, FG respondents identified lack of kindergarten capacity for children aged 3–4 as the most constraining factor in deciding when to return to the labour market and how to reconcile their return with their childcare responsibilities. This perception is shared by the respondents of both focus groups. For those women who had no alternative care arrangements available, a place in a public kindergarten is the central prerequisite for returning to work before their children turn 3. This return is substantially complicated by the current insecurity about whether a place will be available or not. At the same time, for women who managed to return to the labour market based on an alternative childcare arrangement before their child turned 3, the availability of a public kindergarten place for their child might still mean an important change: some of the respondents, for example saw this as an opportunity to return to a full-time job.

The FG discussions also showed that the respondents agree to a large extent with the central Czech childcare norm which is importantly (re)produced in the institutional framework for pre-school childcare: institutional childcare is suitable only for children older than three years. This norm is also part of how the FG respondents in both groups reflect upon available childcare options for their children aged 0–2. The respondents with higher educational attainment see institutional childcare for this age group as a complement to family care (in case the individual situation of the child demands that) or as a last resort in a situation where the woman has to return to the labour market due to financial pressures. Respondents with lower educational attainment see it as simply untenable from a financial point of view. Hence, in both groups, the respondents see their room for decision making about when and how to return to the labour market as not so much constrained by the current (limited) offer of institutional childcare for children aged 0–2 but first and foremost by the unavailability of flexible working hours and/or part-time jobs that would allow them to earn a living. As a result the respondents (in both groups) are to a large degree satisfied when they manage to find a childcare arrangement where the child is cared for in the broader family context (and care provided most importantly by the child's grandmother or great-grandmother) or caring duties are split between the partners (based on flexible working hours and/or part-time work arrangements). Hence, based on the still prevailing ideal of personal care by the mother, or – in the interpretation of the majority of the FG respondents – by the parents or a close family member, the lack of institutional childcare for children aged 0–2 is perceived only as a minor barrier for the respondent's return to the labour market. This is also related to a still prevalent general distrust in these institutions.

Taking into account the findings of our local survey, our statistical data clearly show that the early returning strategies of the focus group respondents are minority solutions, which taken together make up not even 10% of the childcare arrangements among mothers of children aged 0–2 in Brno. While 87.5% of the respondents with a child under three years personally care for their child at home, only 1.6% of the respondents make use of institutional daycare services for their children under 3. In 4.7% of the cases, grandparents or other relatives take
care of the child and 3.1% of the respondents indicated that they share childcare responsibilities with their partner.

In this respect, the results of the focus group discussions also showed which childcare arrangements are “acceptable” (that is, within the prevailing normative framework) to return to the labour market. The respondents’ presentation, rationalization and legitimization of their choices take place in the discursive environment of the nationally and locally institutionalized ideal of care (cf. Chapter 3). This discursive environment potentially supports and constrains certain ways of presenting, rationalizing and legitimizing choices related to childcare and labour market participation. The respondents in both focus groups who returned to work before their child reached the age of three, presented their return as dependent on the fact that a care arrangement within the wider family became available (e.g. the child’s grandmother retired and agreed to provide care, the child’s aunt or another close family member provided care) or was possible between the partners based on existing work arrangements (the availability of part-time work and/or flexible working hours). Hence, the respondents in both groups explained and legitimized their early return to work not in terms of their motivation to go to work at a specific point in time, but rather as related to the availability of a childcare arrangement within the closer family environment, which they see as favourable for their children. Thus, in the Czech context it does not seem to be legitimate for mothers of children aged 0–3 to freely articulate their work orientation. They can do so only in combination with a childcare arrangement that is at least partly in line with the prevailing ideal of care.

**Policy recommendations related to childcare for pre-school children**

Based on the findings presented in this book, we can now make some suggestions for policy reforms that could improve the conditions of women in the local labour market. Our suggestions are based on the notion that the reforms should make it easier for women to balance work and family life and have a stronger position on the labour market than they do today. Hence, the suggested policy changes are related to supporting those mothers who wish to keep a link to the labour market during parental leave and/or return to the labour market earlier. At the same time, they are thought to ease the process of re-entering the labour market for mothers in general and enable them to manage this process according to their needs and wishes, as far as the timing and the extent of their labour market involvement are concerned.

Even though our study is of one particular city, it is highly likely that the lessons learned from Brno could be carried over to other Czech cities, as most of the problems are quite similar. In addition, even though we concentrate on one city and many of our policy suggestions concern the municipal level, it is necessary for the national government to make some policy changes in order to enable the local governments, including Brno, to implement many of the reforms that we suggest. The following section on policy recommendations starts by looking at what types of reforms the national government could make; then it looks at reforms that the municipal governments such as Brno could realize.
Finally, it looks at reforms which local governments could make with help from the national government.

On a very general level, one basic reform that the national government could make would be to change the law so that municipalities have the possibility of raising their own funds, so that they will have greater possibilities for providing services which would make it easier for women to work. As it is now, the Czech Republic is rather unique among democratic governments working in a market economy, in that local governments are totally dependent on the national government for funding (Saxonberg 2014). Thus, if a local government, for example, wanted to open up more daycare centres for children under three, it would have to cut spending somewhere else in order to finance it, as it is not possible to simply increase revenue. By contrast, in Sweden the majority of the population does not pay any national income tax at all; instead most pay municipal and regional income taxes. Only those above a certain income also pay a national income tax. The local governments can decide themselves on the tax rates. Consequently, some local governments decide to have income taxes 1–2% above the country average in order to bring in extra income for social services and other projects. To give another example, in the USA local governments gain much of their income from property taxes, while the state governments gain much of their incomes from sales taxes. Thus, the sales tax rate differs from state to state and the property tax level differs from city to city. In many European cities it is also common for municipalities to raise their own revenues by such methods as tourist taxes on hotel stays, etc. Our intention is not to recommend specific strategies for local governments to increase their revenues. We simply want to point out that having the ability to do so would greatly enhance the possibilities municipalities have to improve services.

On a more individual level, one of the biggest problems that mothers face is the expectation that they should stay at home until their children reach the age of three. As our survey data shows, only about one-third of mothers are able to return to their previous positions after taking such long leaves. Moreover, even the third of the women who succeed in returning to their previous positions still have trouble competing with men for promotions; while during the three years in which mothers are home with their children, men are able to advance their careers. Furthermore, as long as employers expect women to be the only ones who stay at home with their children, they have good reason to discriminate against women in their hiring practices, as they assume that men will continue working while having children, while women will stay at home for 3–8 years if they have one or two children.

Since the norm that the family should take care of children under three is strong, one obvious solution that would help mothers position themselves in the labour market would be to give fathers incentives to share equally in the leave time. That way the family would still be taking care of children under the age of three, but women would no longer face such great job discrimination and career obstacles. This might seem radical given the basic assumption in Czech society that mothers are the main carers. Yet, both our survey and the focus group discussions show very little opposition to the notion that fathers are capable of
Concluding and Policy Recommendations

Taking care of young children. In addition, even though it is now extremely rare for fathers to officially go on parental leave, our interviews show that sometimes fathers still share in the child raising duties, for example, by taking care of the children when they are not working, so that the mother can work during those hours.

Experiences from other European countries show that fathers are unlikely to share much in the parental leave time unless a) there is a generously paid leave based on the income-replacement principle; and b) there is some type of father quotas. Leave needs to be based on the income-replacement principle for the simple fact that, in the majority of families, fathers have higher incomes than mothers; consequently, families calculate that if the father goes on leave they will lose much more money than if the mother goes on leave. However, if the father receives 100% of his previous income the economic argument disappears. No country offers 100% leave benefits, but the point is that the higher the percentage of lost income covered by the leave benefits, the greater the incentive for fathers to go on leave.

It turns out that father quotas have also played an important role in encouraging fathers to share in the leave time. One reason for this is that even if fathers might want to go on parental leave and even if they would not lose much income in doing so, many fathers are afraid to ask their employers for permission to go on leave because their employers are likely to look down upon them for not being “ambitious,” since employers tend to think that fathers can choose to go on leave, while mothers must go on leave. Thus, father quotas strengthen the position of fathers vis-à-vis their employers, as they can then argue that they cannot afford to lose the leave time that is reserved for them. In all countries that have implemented a combination of father quotas and income-replacement based benefits, the percentage of leave time has radically increased. Iceland serves as an excellent example of this. Within two years of implementing an income-replacement model and reserving one-third of leave time for fathers, the percentage of paternal participation increased from around 1% to around 32%! (Hašková, Saxonberg and Mudrák 2012: 202).

There are a variety of parental leave structures that could be introduced in the Czech Republic that would make it easier for women to compete in the labour market by inducing fathers to share in the parental leave time. We do not intend to dictate the percentage of the father quota nor the period of benefits based on the income-replacement principle. Nevertheless, one obvious and just reform would be to introduce a 6-month paternity leave. Since mothers enjoy a 6-month maternity leave that is only available to mothers, why not introduce a similar leave that is only available to fathers? Mothers would not “lose” anything, since they would still have their 6-month maternity leave and the lower paid leave might still exist. Similarly, fathers would not be “forced” to make use of the paternity leave. It would be up to them to decide whether they wanted to use it or not, but they would have strong economic incentives to do so.

In addition, parental leave could be made more flexible, to make it easier for women to work while still taking care of their children during part of the day. Some of the mothers whom we interviewed in the focus groups talked about the
need for the government to support job-sharing. We could note that in some
countries, such as Sweden, the parental leave system is extremely flexible and
allows parents to share the leave time anyway they want (Saxonberg 2009). For
example, it is possible for the mother to go on leave some of the days of the week
(for example, Monday, Wednesday, Friday) while the father goes on leave the
other days (for example, Tuesday, Thursday). It is also possible for the mother to
go on parental leave for part of the day (for example, 8:00–12:00), while the father
goes on leave for the other part of the day (for example, from 12:00–16:00).

The national government could also increase support for daycare for children
under three in order to enable women to return to work sooner after giving
birth. This might seem a strange suggestion given the strong societal norm that
young children should stay at home. Surveys, however, indicate that a substantial
minority of parents would in fact consider sending their children to daycare if
they thought the quality was high enough and the fee low enough. At the national
level, the Eurobarometer from 2009 shows that 24% of the Czech population
think that children under 3 should attend daycare. Meanwhile, our survey data
from Brno shows that a similar number would potentially support the idea of
sending their children to daycare (that is if we include those who did not send
their children because it was too expensive, there was no daycare available, they
think the quality was too low or they were not able to because they were on
parental leave with another child). If 24% attended daycare that would still be a
substantial increase from today and it would make a difference for a large number
of women. In addition, many of the respondents from our focus groups were
indeed against sending children under two to daycare, but supportive of sending
two-year old children at least part-time to daycare if the price were low enough.

As with parental leave reform, childcare reform could be implemented in
many different ways. To the extent that the government supports public daycare,
it could either give subsidies to kindergartens to expand and take in children
1–3 years old, or it could give local governments subsidies to open up new
nurseries for children 1–3 or it could give subsidies for creating new types of
daycare centres.

Communist era, nurseries have poor reputations and our focus group
discussions suggest a general mistrust against the state in providing daycare for
children under three. The national government, therefore, could also provide
subsidies for private types of daycare facilities. This too could be done in several
ways. One would be to simply allow parents to work and use daycare as much as
they want and still receive the parental leave benefits that are not based on the
income replacement principle. This would mean that parents (mostly mothers)
could still stay at home for up to four years if they want to, but they could also
use the benefits for paying for private daycare. In that case, they would have much
higher incomes and they could return to work much sooner. One could even
argue that the monthly benefits paid to working parents should be higher than
the benefits paid to parents who stay at home with their children after the initial
maternity and paternity leave, because by returning to work more quickly they
are adding more to the national economy (since they pay taxes on their working
income, they produce things, and they create jobs for daycare teachers). Also,
international studies have shown that sending children to a high quality daycare is an important investment in human capital, because such children usually go on to do better in school and get better jobs (Esping-Andersen 2009).

Another possibility would be to have the state give more direct subsidies to private daycare. For example, the state could pay a certain percentage of the costs of attending private daycare up to a certain level. As already noted, if local governments also had the legal option of raising their own revenues, it would also make it easier for them to subsidize daycare.

Currently, private daycare centres can cost up to 25,000 CZK/month, which amounts to the same as the average salary in the country before paying taxes. It is more common for private daycare centres to charge somewhere between 10,000–15,000 CZK/month, which still amounts to a substantial portion of most working mothers’ incomes after paying taxes. Thus, it is clear that the national or local governments need to subsidize daycare for children under three if more than a small marginal group is to use them. Our respondents with high educational levels said that 3,000–3,500 CZK/month would be the maximum acceptable fee. This would still be higher than the current fees for public kindergarten, but at the same time much lower than current prices of private institutions. However, those with lower educational levels and lower incomes stated that 2,000–2,500 CZK/month was the maximum that they could afford.

Even though it is less controversial in the Czech context to discuss the need for the state to support kindergartens, even this institution has problems. In recent years the birth rate has increased, while the number of places in kindergartens has largely stagnated. This has caused an acute shortage of daycare even for children over three. Given this shortage, municipalities are forced to find ways of deciding which children should have priority for gaining admittance. The mothers whom we interviewed in the focus groups complained about the selection criteria the Brno municipality applies in making its decisions. They argue that the mother’s situation should play a greater role. For example, single mothers should have priority over mothers living with their partner. They also complained that the municipality is not doing enough to adjust the capacity to the needs of the population. When birthrates increase, they should increase the number of kindergarten places to accommodate the larger number of children. The mothers also suggested that the kindergartens provide longer opening hours, e.g. by introducing two shifts of kindergarten teachers. Supporting company kindergartens would also provide an alternative to kindergartens that hold regular school hours. Longer hours would accommodate mothers’ working schedules and on-site locations would eliminate the need for further travel. These are changes that municipalities like Brno could make without changes in national legislation.

Many of these suggestions related to the provision of institutional childcare services for pre-school children are at least partly considered in the bill on childcare groups (discussed in Chapter 3). From this point of view, the introduction of this bill would be an important impetus for the further development of childcare services for pre-school children, as it would support the creation of further childcare capacities (for children aged 0–6) by the municipality, but also by companies in the form of company kindergartens. Furthermore, the childcare
group, with its – at least – basic quality standards could also help to overcome
the still prevailing negative perception of institutional care for children under
the age of 3.

Finally, many of the respondents complained that they would like to work less
than full-time when their children are young, but part-time positions are hard to
find and the pay is rather meagre. They point out, based on their own experiences
from working abroad or from acquaintances who work abroad, that in other EU
countries such as Germany, it is possible to earn a living from a part time job, but
this is hardly possible in the Czech Republic. Thus, they suggested such measures
as offering tax relief to companies that create part-time positions.

Consequently, we make the following general recommendations for improving
care for children:

a) The introduction of a paternity leave with similar conditions as the
maternity leave.

b) Increasing the flexibility of the various types of parental leaves (including
maternity and a future paternity leave), so that it is possible for parents to
share the leave time and working time (by, for example, making it possible
for parents to work and stay at home during different days of the week or
different times of the day).

c) Increased support for both public and private daycare. If the parental leave
scheme continues, then parents should receive the full amount if they
work, so they could use the leave benefits to pay for private daycare.

d) Implement measures such as tax relief to encourage companies to create
part-time jobs.

e) Increase the flexibility of opening hours at kindergartens and make sure
that capacity increases when childbirths increase.

Taking care of dependent elderly family members in Brno

Apart from women with childcare responsibilities, the second focus of this book
was on care responsibilities in relation to care for elderly dependents. Elder
care responsibilities potentially influence women’s labour market participation.
However, in contrast to the group of women caring for preschool children, this
group of women is not that visibly and clearly definable from the point of view
of statistical analysis. Hence, the starting point for our analysis was not as easy
to grasp as in the case of care responsibilities for pre-school children, as there
were no data available on how caring responsibilities for elderly dependent
relatives impact women’s labour market integration. Therefore, Chapter 4, which
focused on the question of how policies and services related to elder care frame
the situation of women with such care responsibilities, was at the same time
important for mapping how this policy and service context potentially supports/
constrains these women’s labour market participation.

In this respect, the major issues which appeared to importantly characterize
the current overall elder care situation in Brno, are whether the care benefit works
as it is supposed to and how this impacts on informal (predominantly female)
carers, as well as the problem of capacity in institutional elder care facilities. As
far as the former is concerned, our analysis suggests that, though the care benefit seems to work for the elderly to buy care services, it remains unclear to what extent this benefit supports the informal carers' reconciling of care work with gainful employment. Here, the central question is whether it allows paying for professional home care services to an extent which enables the informal carer – mainly of the elderly with grave and total dependence – to remain in full-time employment. This is especially important as the level of the caring benefit for this dependence level only partly compensates for the loss of income, when the informal carer has to reduce working hours or even quit his/her job. The relevant policy documents, however, ignore this central point. Though the current policy framework nominally recognizes the informal carers' problem of reconciling of work and care, it does not propose measures which would support a greater gender equality (that is a stronger engagement of men in informal care work). Rather, women's greater share in informal care work is taken for granted. Hence, the problem of reconciling their care work with (full-time) labour market participation remains a primarily private issue.

At the same time, the predominantly female informal carers have only a very limited range of alternatives to informal care (in combination with professional home care) and its reconciling with full-time labour market participation. Neither does the level of the care benefit compensate informal carers at a level that would allow them to leave their job or reduce working hours, nor does the system of elderly care services provide sufficient capacities in institutional care facilities. The latter is especially a problem of time. The long waiting times of approximately up to two years do not provide much space for reacting to unexpected changes of care needs. Hence, though the strategic policy documents define institutional elderly care facilities as a kind of last resort, for cases where the dependent elderly loses his or her self-sufficiency to an extent that could no longer be handled in the „natural“ family environment, the analysed information suggests, that they do not work in this way. From this point of view, the currently common approach of applying for places in elderly care facilities (long) before an urgent need occurs is a strategy of dealing with this inflexibility, which however at the same time increases the problem of long waiting times.

The results of the two focus groups which were organized with employed women with elderly care responsibilities living in Brno, presented in Chapter 6, allowed a more differentiated look at the matters raised in relation to the elder care policy and service context. The experiences of the women caring for dependent elderly family members importantly supplemented these findings.

What was characteristic and striking in this respect, is the broad consensus in both FG groups that the most central motivation for their informal care is to enable their dependent elderly family members to stay in the home/family environment to which they are accustomed for as long as possible. Hence, for the respondents, caring for their close dependent family members is strongly related to normative considerations of where, how and by whom these relatives should be cared for. According to the FG participants, the main responsibility for care is in the hands of the family. They did not discuss individual responsibility and also see the responsibility of the state as only secondary or supplementary in
those cases where the family can no longer handle the care alone. From this point of view, ideal care arrangements are those that provide care within the family. However, when needed, care can be supplemented by professional home care services. These elderly care norms are moreover in accordance with the central strategic policy conceptions for elder care presented and analysed in Chapter 4, which similarly emphasize the role of the family and the individual support of the person’s life in his/her “natural environment”. However, this general agreement on basic care norms does not automatically mean that the policy context fully supports the carers’ strategies in relation to decision making about their labour market integration and elder care arrangements.

The FG participants discussed two major issues which make it difficult for them to find care arrangements that simultaneously satisfy the needs of their frail elderly dependent and allow them to achieve a balance between their care duties and their gainful employment. The first is a lack of trust in institutional care and the perception that these institutions provide low quality services. During the discussions, the respondents repeatedly brought up certain characteristics of institutional care which they see as problematic (especially too high ratios of patients to carers, long waiting hours, low pay and bad working conditions for the caring personnel). This perception of institutional care not only enforces the norm of “enabling care in the home/family environment as long as possible” but at the same time limits the acceptance of this form of care to more complicated cases (bedridden patients, patients that need non-stop medical supervision) – in relation to this, some respondents talk about the necessity of choosing institutional care very carefully.

Secondly, financial constraints are critical, especially, but not exclusively, for the FG respondents with lower education. The amount of benefits, the costs of services and the lack of availability of part-time work reinforce each other. The level of state support in the form of the caring benefit is rather low and within the existing system of defining the benefit level, some respondents see a certain tendency to keep this level low. This problem is also reflected in the fact that some respondents report the need to co-finance care/medication for their dependent elderly family members. Public social services are seen as financially available and sufficient; however, the granted care benefits and the extent of services provided are perceived as being restricted (opening hours, etc.). Private services, which are more flexible, are in turn financially available mainly for the respondents with higher educational attainment, yet even for them these services are not ideal. Finally, in the context of the Czech Republic, part-time work is not widely used/available and if it is available, it is financially often unsustainable. Hence, the FG participants reported that there is also (apart from the norm of full-time work for women) an important financial need (especially for the respondents with lower educational attainment) to keep their full-time job, despite their care responsibilities. This need is further enforced by the low level of the state care benefit, which, if paid to an informal carer, does not compensate for the loss of income stemming from the reduction of working hours.

In this situation, public social services play an important role in supporting women in reconciling full-time employment with their care responsibilities.
Currently, these services do not allow them to achieve an ideal work/life/care balance, however. For many of the respondents with lower educational attainment, the ideal balance would be having a part-time job that allows them to earn their living in combination with less restricted public care services and/or more affordable private caring services. By contrast, for many of the respondents with higher educational attainment, the ideal balance would be having full-time access to home care services while they are at work. In the current situation, by contrast, the respondents achieve a reconciling of their paid employment with their care responsibilities through dedicating most of their spare time to caring duties. As a result, their gainful employment turns into an important opportunity to have a rest from their caring duties and to take their minds off their care-related worries. That is, the respondents’ labour market participation takes on the meaning of “spare” time. From this point of view, the fact that the FG respondents of both groups saw their labour market participation as a matter of course, which forms an important part of their lives, is not only related to the tradition of women’s full-time labour market participation described in Chapter 1, but also constitutes a certain strategy of the informal carers to cope with their care responsibilities.

**Policy recommendations related to the care of an elderly dependent**

These issues are not a simple matter of local elder care policies; rather they are importantly related to the national policy framework for the provision of elder care, most importantly to the design of the care benefit: even in the case of the elderly’s complete dependence it pays only for a maximum of 30 hours of professional home care a week. This means in cases where the elderly dependent has completely lost his/her self-sufficiency and needs more or less 24-hour care, the informal carer is forced to reduce her (his) employment and still has non-stop caring duties for the rest of the day (without spare time or a compensation of income losses). Similarly as in the previous section on childcare, the following section on policy recommendations begins by looking at what types of reforms the national government could make; then it looks at reforms that municipal governments such as Brno could implement. Finally, it looks at reforms which local governments could make together with help from the national government.

As argued by a large majority of the respondents, the care benefit in the Czech Republic is too low. Those with the lowest level of support only receive 800 CZK or 32 EUR per month. This is much too low to make it possible for informal carers to stay at home or work part-time (as it does not compensate for the loss of income). Of course, there is also a gender aspect: if the benefit pays a low flat rate, then few men would be willing to leave their jobs to take care of elderly parents or parents-in-law, so to the extent that informal caring is done, it is mostly done by women. The respondents also criticized the system for examining the elderly and deciding about the amount of benefit. According to them, this process is not objective.

Rather than paying the elderly benefits to hire informal carers, it would make more sense for the state to increase its support for professional homehelpers, so that women do not feel pressure to leave their jobs in order to take care of
their elderly parents or parents-in-law. An increase in the support for professional homehelpers would make it easier for the elderly to remain in their homes without having to pressure their children to give up their jobs. The focus group participants suggest that this could also be accomplished by giving support to private enterprises that want to provide services for the elderly.

Two other problems that the elderly face are the coordination between social services and elder care and the lack of financial support. There seems to be a lack of cooperation and information between the more purely health-oriented institutions, such as hospitals, and those providing social services, such as home care and elderly homes. They also noted that they sometimes have trouble getting information about social services from doctors and medical staff. The focus group participants also mention the problem of favouritism and the need to sometimes pay bribes to obtain residential social services and healthcare. Thus, to the extent that one must wait for a place in an elderly home, the system for choosing people should be fairer.

When it comes to the lack of financial support, the focus group participants complain that it is difficult for their close elderly relatives to survive on their pensions, which they deem to be unfair, since they worked hard all their lives. As already noted, the extra benefits for being disabled are also much too low to be able to hire help.

Furthermore, there is general agreement that the system of caring for the elderly in their homes should be reformed. First, they noted that the public funded homehelpers have much too restricted visiting hours. Their visiting hours should be extended so that they would be able to come at different times during the day. Now, visiting nurses may only spend 1.5 hours per client per day, which is not sufficient. Those with lower educational levels suggest that each homehelper (social worker or nurse) should have fewer clients to take care of, so that they could provide higher quality care.

Another possibility would be to subsidize private enterprises that provide home services. The focus group respondents claim that private home care services currently provide more flexible and longer working hours for accompaniment and other services than do public services. However, today these services are too expensive.

Finally, what also can be done on the local level is to increase the support of institutional care facilities, to make institutional care alternatives easier (and more quickly) available as well as at a higher quality level, for those cases where a combination of informal carer and professional homehelper are no longer able to provide appropriate care. This step is, however, much more expensive than the support of professional home care services and hence a matter of financial resources – already in the current situation more than three quarters of elderly care spending in Brno goes to institutional care facilities. Furthermore, such an extension of institutional elder care facilities goes partly against the basic idea of the current policy frame work, that is, the support of care in the elder’s natural environment. Thus, the room for change on the local level is importantly limited by financial constraints and the national policy framework.
Conclusions and Policy Recommendations

Consequently, we can make the following suggestions for potential policy improvements:

a) The pension system should be reformed, so that the elderly receive a liveable income.
b) The state should give greater support to both public and private homehelpers to be able to keep elderly in the natural environment and provide appropriate care to them.
c) The state should support quality services by supporting the further education of homehelpers as well as motivate well educated social workers to stay in the field of social services by providing an appropriate income.
d) National and local governments should take measures to improve their coordination and the coordination between healthcare and social service organizations.
e) The national government should give more support to home care and informal care within families to keep the elderly in their homes as long as possible, which is in accordance with the ideal of elder care. At the same time, however, the national government should also give support to retirement homes, so that the waiting times decrease and the quality of care increases (e.g. in the sense of the patient-nurse ratio).
f) Municipalities, such as Brno, should take measures to ensure that the rules for receiving services and care benefits are more transparent and that the distribution of these services and decisions about benefits are done in a fairer manner.
g) Municipalities should take steps to fight against corruption and bribery in the allocation of services.

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<th>Full Form</th>
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<tbody>
<tr>
<td>ČSR</td>
<td>Czechoslovak Republic</td>
</tr>
<tr>
<td>ČSSR</td>
<td>Czechoslovak Socialist Republic</td>
</tr>
<tr>
<td>ČSSZ</td>
<td>Česká správa sociálního zabezpečení/Czech Social Security Administration</td>
</tr>
<tr>
<td>ČSÚ</td>
<td>Český statistický úřad/Czech Statistical Office</td>
</tr>
<tr>
<td>CZK</td>
<td>Czech Crowns (currency)</td>
</tr>
<tr>
<td>EUR</td>
<td>Euro (currency)</td>
</tr>
<tr>
<td>FSÚ</td>
<td>Federální statistický úřad/Federal Statistical Office</td>
</tr>
<tr>
<td>ISCED</td>
<td>International Standard Classification of Education</td>
</tr>
<tr>
<td>ISCO</td>
<td>International Standard Classification of Occupations</td>
</tr>
<tr>
<td>KPSS</td>
<td>Komunitní plánování sociálních služeb/Community Planning of Social Services</td>
</tr>
<tr>
<td>MOLSA</td>
<td>Ministry of Labour and Social Affairs</td>
</tr>
<tr>
<td>MPSV</td>
<td>Ministerstvo práce a sociálních věcí/Ministry of Labour and Social Affairs</td>
</tr>
<tr>
<td>MŠMT</td>
<td>Ministerstvo školství, mládeže a tělovýchovy České republiky/Ministry of Education, Youth and Sport of the Czech Republic</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>OŠMT</td>
<td>Odbor školství, mládeže a tělovýchovy Města Brna/Department of Education, Youth and Sport at the Brno Municipality</td>
</tr>
<tr>
<td>PSP</td>
<td>Portál sociální péče města Brna/Portal of Social Care of the City of Brno</td>
</tr>
<tr>
<td>PZJMK</td>
<td>Průzkum zaměstnanosti v Jihomoravském kraji/Employment Survey in the South Moravian Region (organized by the Brno Labour Office on annual basis)</td>
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<tr>
<td>ÚIV</td>
<td>Ústav pro informace ve vzdělávání/Institute for Information in Education</td>
</tr>
<tr>
<td>ÚZIS</td>
<td>Ústav zdravotnických informací a statistiky/Institute of Health Information and Statistics of the Czech Republic</td>
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<tr>
<td>VŠPS</td>
<td>Výběrové šetření pracovních sil/Labour Force Survey</td>
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<tr>
<td>VÚPSV</td>
<td>Výzkumný ústav práce a sociálních věcí/Research Institute for Labour and Social Affairs</td>
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The book describes and discusses two central care norms, how they are institutionalized in related policy areas and how they potentially structure the lives of women in the Czech Republic and Brno in general and their labour market chances in particular: the norm of personal full-time care for children under the age of 3 by their mother and the norm of enabling frail elderly family members to stay in their home environment as long as possible. Though these two care norms are related to very different life situations, they have a common denominator. That is, they bring about the need for (informal) care work, which is predominantly ascribed to and done by women, as mothers, grandmothers, and daughters. The presented research was conducted as part of the EU financed project “Impact of local welfare systems on female labour force participation and social cohesion” (FL OWS).