



Australian
Human Rights
Commission

Investing in care:
Recognising and valuing
those who care

VOLUME 1: RESEARCH REPORT · 2013



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Investing in care: Recognising and valuing those who care

Volume 1: Research Report

Australian Human Rights Commission 2013

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Foreword



Elizabeth Broderick
Sex Discrimination
Commissioner
Australian Human Rights
Commission

Caring is valuable, necessary work that benefits us as individuals as well as the well-being of our society as a whole.

Care is something that will affect all of us in our lives, either as carers or as people who require care. In 2009, an estimated 5.5 million women and men aged 15-64 years undertook unpaid care, including care for children and people with disability, chronic illness or frailty due to older age.¹ And the demand for care is likely to increase as Australia's ageing population grows.

The challenge of negotiating caring responsibilities and employment will affect many men and women. In Australia in 2009, 4.1 million employees had responsibilities for unpaid caring work.²

In Australia, women undertake the largest share of unpaid caring work. Women comprise 92 per cent of primary carers for children with disability, 70 per cent of primary carers for parents, and around half (52 per cent) of the primary carers of partners.³ Given the high proportion of care undertaken by women the undervaluing of unpaid caring work has had the greatest impact in economic terms on women's retirement incomes and savings. In 2009-10, the average (mean) superannuation balance for all men was \$71,645, whereas the comparable figure for all women was \$40,475.⁴

I am pleased to present this report *Investing in care: Recognising and valuing those who care*, which seeks to identify key reform options for recognising and remunerating unpaid caring work.

This report is intended as a discussion paper to inform potential policy reforms in Australia. By researching a range of mechanisms and models used to value unpaid caring work, both in Australia and overseas, the report identifies possible options for reform that could be applicable in the Australian context. The options for reform cover a range of possible mechanisms including legislative mechanisms, flexible work arrangements, carer support payments, leave arrangements, services for carers, workplace initiatives and mechanisms within the retirement income and savings system (ie taxation, superannuation and income support).

Investing in care can generate significant social and economic benefits, including:

- ensuring quality care is accessible and available and ensuring the well-being of those who are cared for;
- improving gender equality through the better sharing of caring responsibilities and workforce participation;

- improving women's workforce participation and better utilising Australia's investment in human capital;
- contributing to women's greater financial security and greater productivity in the market sphere; and
- generating greater efficiency and productivity in businesses.

I hope that this report and the reform options it proposes will stimulate a new discussion about how best to value unpaid caring work. In the context of current reforms to many aspects of the Australian health, disability and care systems, it is timely to consider the elements of the case for change in workplaces and in the retirement income system.

Now is the time for some bold and innovating thinking on how to value unpaid caring work in Australia – to ensure that no woman will live in poverty in her retirement because she chose to care during her lifetime.

To achieve real change in the valuing of unpaid caring work, it will be necessary to undertake a combination of reforms. This report provides a strong evidence base for considering what reform options could be undertaken to create a social and economic policy framework that facilitates genuine choices for men and women to combine unpaid care and paid work. I hope it will be useful in informing national discussions.

I welcome government, industry, small and large businesses, employers, employees, unions – all those who do the work of unpaid care, and those who are cared for – to work together to ensure that the contribution of unpaid carers is properly recognised and valued.

I commend the research team from the Social Policy Research Centre, University of New South Wales (Bettina Cass, Trish Hill, Myra Hamilton and Cathy Thomson) and project advisors Lyn Craig (SPRC) and Elena Katrakis (Carers NSW) for their rigorous research for this report.

A handwritten signature in black ink that reads "E. Broderick". The signature is written in a cursive, flowing style.

Elizabeth Broderick
Sex Discrimination Commissioner
Australian Human Rights Commission

January 2013

Abbreviations

ABS	Australian Bureau of Statistics
ACOSS	Australian Council of Social Services
ACTU	Australian Council of Trade Unions
AIHW	Australian Institute of Health and Welfare
ATO	Australian Taxation Office
CALD	Culturally and Linguistically Diverse
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women
Census	Census of Population and Housing
Cth	Commonwealth
DEEWR	Australian Government Department of Education, Employment and Workplace Relations
DOHA	Australian Government Department of Health and Ageing
FaHCSIA	Australian Government Department of Families, Housing, Community Services and Indigenous Affairs
HILDA	Household Income and Labour Dynamics in Australia
ILO	International Labour Organization
NDIS	National Disability Insurance Scheme
NES	National Employment Standards
OECD	Organisation for Economic Co-operation and Development
PPL	Paid Parental Leave
SDAC	Survey of Disability, Ageing and Carers
SPRC	Social Policy Research Centre, University of New South Wales
UNSW	University of New South Wales

Chapter 1:

Executive summary

1.1 Recognising and valuing unpaid caring work

This report examines reform options for recognising and valuing unpaid caring work. The report specifically explores the nature of unpaid care and its impact on workforce participation and retirement incomes and savings. It examines Australian and international mechanisms that recognise and value unpaid caring work and identifies potential options for reform.

Caring is valuable, necessary work undertaken by paid care workers and unpaid carers. It occurs within a system of relationships in our society and is crucial to Australia's social and economic fabric.

Unpaid caring work is undertaken by two main groups in Australia:

parents (who include biological, step, adoptive, or foster parents, and grandparents or guardians with caring responsibilities for a dependent child); and

carers (who include people caring for a family member or friend with disability, chronic illness or frailty due to older age. Persons with disability include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.⁵

Care will affect all of us in our lives, either as parents and carers and/or as people being cared for.

This report builds on the Australian Human Rights Commission's 2009 study *Accumulating Poverty? Women's experiences of inequality over the life cycle*, which found that there is a gender gap in retirement incomes. The gender gap in retirement incomes is the result of women moving in and out of the paid workforce due to caring responsibilities and the inequalities in earnings, which impact on women's capacity to accumulate an adequate level of retirement savings. The *Accumulating Poverty* study found that there was a need for a broader investigation into how the retirement income system can be reformed to properly recognise and compensate those who undertake unpaid caring work.

Valuing the work of unpaid carers requires social and economic recognition of the importance of the relationships they build and foster, the assistance they provide to the people for whom they care, and the manifold contributions that they make to the whole community and economy. Caring relationships and roles are diverse and each care situation is unique and may change across the lifecycle.

Australian society in the past has failed to recognise, particularly in economic terms, both the worth and impact of unpaid caring roles, especially the caring roles undertaken by women. In Australia, women undertake the largest share of unpaid caring work. This undervaluing has had a significant impact on women's retirement income and savings.

Cultural change in our society and our workplaces is a crucial element of valuing unpaid care. Such change needs to start with identifying and challenging gender stereotypes and social norms related to unpaid care responsibilities and participation in paid work by men and women across the lifecycle. It is important that a public debate about unpaid care asks what stops men from taking on more responsibility for unpaid care, and challenges the model of the 'ideal worker' who is unencumbered by any caring responsibilities. A public debate on unpaid care also must discuss the legal, regulatory and policy frameworks that support the current gendered divisions in paid work and unpaid care.

In the context of current reforms to many aspects of the Australian health, disability and care systems, it is timely to consider the elements of the case for change in workplaces and in the retirement income system. There are social, economic, business and human rights cases for valuing the contributions of unpaid carers.

The social case encompasses understanding:

- as members of a society, we engage in paid work and unpaid care
- care as work which is central to social and civic responsibilities

- caring as relationships crucial for the social fabric
- the benefits of gender equality through the better sharing of caring responsibilities and workforce participation.

The economic case is based on four key elements:

- the importance of recognising non-market productivity, in particular the provision of care, as essential to economic productivity
- the need to maintain a supply of unpaid care which underpins the formal care economy
- ensuring women's workforce participation is not underutilised so that women's skills are fully valued and Australia's investment in human capital is utilised
- enabling women's workforce participation which contributes to women's greater financial security and greater productivity in the market sphere.

The business case focuses on the need for:

- efficiency – it is more cost-effective to support unpaid carers in the workplace and retain their skills and knowledge than train new employees
- productivity – support for carers in the workplace enhances employees' attachment, loyalty and commitment
- diversity – a diverse workforce, that includes unpaid carers, means a diverse set of skills, expertise, different ways of thinking, which contributes to greater innovation and productivity.

The rights to gender equality, non-discrimination, decent work and the related accommodation of family and caring responsibilities within the right to work are articulated in several international human rights instruments, such as the UN *Convention on the Elimination of Discrimination Against Women (CEDAW)*⁶ the *Covenant on Economic Social and Cultural Rights* and the International Labour Organization *Convention concerning Equal Opportunities and Equal Treatment for Men and Women Workers: Workers with Family Responsibilities (No 156)*.

The realisation of these human rights is essential in removing gender inequalities and discrimination and in recognising caring responsibilities within the right to decent work.



Women's human rights (including economic and social rights) cannot be fully realised within existing social, economic, and political structures which value specific economic contributions over and above social contributions, such as caring. These structures also undervalue women's human capital to the detriment of society and economy.

1.2 Goals of the report

The goal of this report is to identify key reform options for recognising and remunerating unpaid caring work. This report is intended as a discussion paper to inform debate on potential policy reforms for Australia.

The selected reform options have been identified through a process of researching a range of mechanisms and models from Australia and overseas. The possible mechanisms and models were analysed in terms of their applicability to the Australian context and their potential to meet the following underpinning objectives:

- To recognise and value (through remuneration, time or support) all forms of unpaid care equally.
- To enhance gender equality in:
 - » the provision of unpaid care;
 - » opportunities for workforce participation;
 - » wages, and
 - » retirement incomes.
- To provide a social and economic policy framework, which facilitates genuine choices for men and women to combine unpaid care and paid work.

In developing the options for reform different international mechanisms for supporting parents and carers from 24 countries have been reviewed to identify mechanisms that are feasible to implement in the Australian public policy context. In all countries, combinations of mechanisms interact with each country's unique institutional structures. Given Australia's particular retirement income architecture, it is not possible to import a 'best model' directly from another context. In considering the applicability of the mechanisms to the Australian context, emphasis has been placed on features that have had positive outcomes in other countries in relation to one or more of the report's goals. However, it is recognised that the different mechanisms may be more ideally suited for different goals and that some mechanisms may support one or more of the goals of this report. It will be a combination of mechanisms that provide the best options for enhancing genuine choices between paid work and providing unpaid care.

1.3 Prevalence of care

In 2009, around one in three men (35%), and two in five women (41%) aged 15-64 years, or an estimated 2.5 million men and nearly 3 million women, had responsibilities for unpaid care.⁷

The value of child care provided by parents is substantial. The amount of unpaid care for people with disabilities is estimated to be 1.32 billion hours each year, valued at \$40.9 billion per annum in 2010, if unpaid care were to be replaced by paid care providers and provided in the home.⁸

Existing data shows that the rates of unpaid care for children and for people with disability, chronic illness or frailty are higher amongst Aboriginal and Torres Strait Islander peoples than non-Indigenous Australians.

Women spend significantly more time in providing unpaid care than men:

- In Australia in 2006, female parents spent 8 hours and 33 minutes per day in caring for children aged under 15 years, compared to 3 hours and 55 minutes for male parents.⁹
- Women comprise 92 per cent of primary carers for children with disability, 70 per cent of the primary carers for parents, and around half (52 per cent) of the primary carers of partners.¹⁰

1.4 Impact of unpaid care on workforce participation

The impact of unpaid care on workforce participation and full-time employment is highly gendered:

- In June 2012, 66.7 per cent of all women aged 15-64 years in Australia were in employment compared with 78.3 per cent of men in this age group.¹¹ Among employed women 15 years and over, 45.8 per cent worked part-time compared to 16.5 per cent of employed men;¹²
- The labour force participation rate for women aged 15-64 years is 70.6 per cent compared to 82.4 per cent for men;¹³
- The gender gap in employment rates is most evident when children are under the age of six years, with the labour force participation rates of female parents being 39 percentage points lower than male parents who had a youngest child under six years;¹⁴
- When employed, female parents are more likely to work part-time than male parents: 66 per cent of employed females with children aged under six years worked part-time compared to 7 per cent of employed males with children of this age;¹⁵

- The reduction in hours of paid work for employed female parents continues for a long duration: for parents with their youngest child aged 6-14 years the rates of part-time employment were 55 per cent for female employees compared to 8 per cent for employed male parents;¹⁶
- Less than 23 per cent of female primary carers of people with disability, illness or frailty participate in full-time employment at any point across all age groups;¹⁷
- In Australia in 2009, 4.1 million employed people, or nearly two in five employees (38.2 per cent), are either parents of a child under 15 years or carers.¹⁸

1.5 Impact of unpaid care on retirement incomes

Australia's retirement income system is built on three pillars, the age pension, superannuation and private savings. Australia's superannuation system has been designed around male patterns of workforce participation and does not reflect the diversity and complexity of women's dual roles in unpaid caring and paid employment.

In 2009-10, only 10.3 per cent of women aged 65 years and over and 17.4 per cent of men had their main source of income at retirement as superannuation or annuity.¹⁹

Models calculating the forgone earnings for women unpaid carers indicate that the lifetime earnings loss due to caring roles is very substantial.²⁰

In 2009-10, the average (mean) superannuation balance for all men was \$71,645, whereas the comparable figure for all women was \$40,475.²¹

In 2009-10, an estimated 38.5 per cent of all women and 31.6 per cent of men had no superannuation – 60 per cent of women aged 65-69 years had no superannuation.²²

Estimates from 2009-2010 suggest that the average (mean) superannuation payouts for women are just over half (57 per cent) of those of men.²³ However, the average measures do not reveal the significant proportion of women who have little or no superannuation – it is estimated that 50 per cent of women approaching retirement (aged 55-59 years) have superannuation balances of \$25,000 or less.²⁴

In addition, in 2010-11 just under half of retired women in Australia had made no contributions to a superannuation scheme compared to 25 per cent of men.²⁵ The superannuation gender gap has led to many women, particularly single women, needing to rely predominantly upon the age pension for their retirement income.

1.6 Mechanisms for recognising and valuing unpaid carers

The review of mechanisms from Australia and internationally revealed that a range of mechanisms are being used to recognise and value unpaid carers, including:

- legislative mechanisms;
- flexible work arrangements;
- carer support payments;
- leave arrangements;
- services for carers;
- workplace initiatives; and
- mechanisms within the retirement income and savings system (i.e. taxation, superannuation and income support).

Based on a review of key mechanisms used in Australia and internationally to recognise and value unpaid carers, a combination of mechanisms would be required to fully recognise and value unpaid carers.

The following mechanisms to value unpaid care are considered especially important as they are beneficial to both unpaid carers and the society as a whole when compared to existing arrangements. These mechanisms are offered as suggestions to inform a discussion about suitable policy options for Australia.

(a) Legislation

Legislation should be strengthened to recognise unpaid caring responsibilities and contain enforceable obligations.

Greater recognition of caring responsibilities through legislation is an important mechanism for supporting unpaid carers.

Carer recognition legislation at the Commonwealth, State and Territory levels recognises the contribution of carers but does not contain enforceable obligations.

Recognition of carers may be enhanced with the introduction of a national Carer Card.

Anti-discrimination legislation currently offers carers varying degrees of protection and could be enhanced to meet the highest existing standard. The Commission has recommended that the Human Rights and Anti-Discrimination Bill cover discrimination on the basis of family responsibilities in all areas of public life and that discrimination on the basis of carer responsibilities be expressly covered.²⁶

The benefit to society is greater gender equality, greater equity for unpaid carers and enhanced protection from discrimination.

(b) Flexible work arrangements

*Flexible work provisions should be available to all unpaid carers and adequately support the needs of unpaid carers.*²⁷

Enhancing the capacity of parents and carers to remain in and re-enter employment is a key element which will contribute to their lifetime earnings and subsequent financial security in older age. It will also contribute to strengthening the pool of skilled workers available for Australian workplaces. The increased participation has the potential to strengthen the Australian economy overall.

Right to request provisions for flexible work arrangements provide parents and carers with options to flexibly manage employment and caring responsibilities, as well as enabling workplaces to retain skilled and experienced employees.

Internationally, for the most part, the right to request provisions were introduced in response to the needs of parents returning from periods of parental leave. Some countries have extended the right to request provisions to carers of people with a disability or long term illness.

While the promotion of opportunities to combine flexible work arrangements and care is important, it is also important to ensure that engagement in part-time or insecure work does not lead to inequitable outcomes for women, both in their workforce participation, careers, and in their retirement incomes.

The benefit to society is improved opportunities for unpaid carers to remain attached to the labour force across their lifecourse. Flexible work arrangements for both men and women to combine unpaid care and paid work will allow them to transition more smoothly between paid work and care at different times in their lives.

(c) Leave arrangements

Leave provisions need to be expanded and strengthened for all unpaid carers to ensure that they can maintain their labour market attachment while also undertaking their care responsibilities.

Access to time to undertake both paid employment and unpaid care is essential to provide parents and carers with choices about the extent of care they undertake, while providing job protection to facilitate re-entry to the workforce.

Parental leave arrangements have several goals: to provide time for parents to care for young children, to improve women's labour market attachment, and in some countries, to increase birth rates.

Leave schemes can also contribute to improved lifetime earnings by improving workforce attachment and creating opportunities for career progression.

Since January 2011, in Australia the Paid Parental Leave (PPL) scheme provides 18 weeks of government funded pay for paid parental leave. In addition from 1 January 2013, the scheme will provide eligible working partners with two weeks Dad and Partner pay.

International evidence suggests that approximately six months paid leave per person is the period of leave that 'is advantageous, but not harmful, to women's labour-force attachment and longer-term employment trajectories'.

Research has suggested that father quotas increase fathers' participation in care and also put male employees in a much stronger position when negotiating parental leave with their employer.

Carer's leave, and leave for other family responsibilities, aim to improve the capacity of parents and carers to undertake their caring and labour market responsibilities.

Under the National Employment Standards in the *Fair Work Act 2009* (Cth), all employees, including parents and carers are entitled to ten days of paid personal/carer's leave, unless they are casual employees. However, care relationships in wider kinship networks are not recognised in the carer's leave provisions.

An additional period of dedicated paid carer's leave, available for the full range of care relationships, would better provide for overall leave entitlement for carers.

Internationally, several countries provide more than ten days paid carer's leave in addition to extended unpaid and paid leave periods for palliative care.

The real benefit to society is in enabling unpaid carers to undertake their care responsibilities, which are crucial and necessary for society. At the same time, parents and carers are also retaining their attachment to the workforce, thereby enabling them to contribute to their retirement income and enhance their financial wellbeing in older age. Facilitating their continued participation in the workforce also has the potential to contribute positively to the productivity of Australian workplaces and the economy overall.

(d) Income support

Income support should not penalise unpaid carers for engaging in education and training or participating in the workforce, and should reflect the variable costs of providing care.

There are three income support payments specifically for carers in Australia: Carer Payment, Carer Allowance, and Carer Supplement.

Recipients of Carer Payment are only permitted to undertake up to 25 hours of education, training or employment per week, which may act as a disincentive to combine paid work, education and training, and care responsibilities.

International evidence suggests that hinging eligibility for an income support payment for carers (such as Carer Payment) on a strict means test, and limits on work, presupposes that the carer is participating in care full-time and is not in, or is only marginally attached to, the workforce.

International research reveals that the strict limits on earnings attached to income support payments for carers can push carers into 'downgrading' from their professional employment into low paid or menial work. This may reduce lifecourse employment opportunities and make workforce re-entry difficult when caring responsibilities cease.

There is no flexibility in the amount of the Carer Allowance paid to accommodate those carers for whom the care expenses are considerably higher.

The Carer Supplement is paid to recipients of the Carer Payment or Carer Allowance to assist with the costs of caring for a person with disability or medical condition.

The benefit to society is in protecting the financial wellbeing of unpaid carers while undertaking their caring roles, while also improving their opportunities to contribute to the paid workforce, and to build their skills through education and training.

(e) Services

Services for unpaid carers across jurisdictions and care sectors need to be better resourced and coordinated to ensure that unpaid carers and those they care for receive the benefits of these services.

In Australia, access to early childhood education and care services assist parents to combine paid work and unpaid care. In contrast, services for carers of people with disability, chronic illness and frailty focus on supporting them in their caring role and providing short-term relief rather than facilitating combining care and paid work.

Working conditions within the paid care sector are characterised by part-time and casual positions, shift work, low wages and little or no vocational training. Reforms within the aged care, early childhood education and care, and health care sectors should not be to the detriment of care workers and their employment conditions.

(i) Services for carers

Many services within the health system often do not have effective strategies to identify carers, particularly young carers.

The National Disability Insurance Scheme (NDIS) will focus on providing long term high quality support to those with a 'permanent disability that significantly affects their communication, mobility, self-care or self-management'. It is vital that carers' needs are taken into account at all stages of the development and implementation of the NDIS.

The *Living Longer, Living Better-Aged Care Reform Package* aims to 'build a responsive, integrated, consumer-centred and sustainable aged care system'. However, these reforms will not address barriers to carers' participation in employment, and access to future retirement income, unless assessment processes recognise and identify carers and focus on their specific needs within all areas of the health and aged care systems.

(ii) Services for parents

Unlike some other countries that have a legal right to public early childhood education and care, such as Denmark and Norway, Australia has no formal right to an early childhood education and care place.

The difficulties associated with attempting to combine employment and care are often exacerbated by a lack of quality, accessible and affordable services which are flexible and designed to meet the needs of working parents, particularly those working non-standard hours and in non-metropolitan areas.

(iii) Employment services

When caring ends, or caring demands reduce, it is often difficult for carers to re-enter the workforce. Access to re-skilling and training options is required for carers wanting to re-attach to the labour market.



The benefit to society of decent working conditions for workers in the paid care sector and properly resourced services for unpaid carers is that it can contribute to the well-being of those cared for, as well as the well-being of unpaid carers. In turn unpaid carers can better use care services to meet their care responsibilities while maintaining their attachment to the workforce.

(f) Workplace initiatives and workplace cultures

Changes to workplace culture, work organisation, and working arrangements are necessary to support unpaid carers to undertake their work and care responsibilities, and for workplaces to retain their skills and knowledge.

Both in Australia and internationally, a number of mechanisms have been implemented in businesses and corporations. Some organisations have implemented an integrated approach to supporting employees who have caring responsibilities.

Workplace mechanisms could include integrated carer strategies; the provision of information and support to carers; access to flexible work schedules, reduced work hours, and changes in work location; referral to services and direct service provision; and financial assistance.

Changes to workplace cultures are required to better support care and work responsibilities, including: realistic work hours; reasonable workloads; increased options for flexibility; and support for employed parents and carers.

The benefit to society is being able to draw on the skills, knowledge and experience of unpaid carers, mitigating the negative impact on their labour force attachment and lifecycle earnings, and capitalising on Australia's investment in their human capital.

(g) Retirement incomes and savings

The current system of retirement incomes and savings, including the age pension and superannuation that is tied to paid work, should be reformed to account for the inequity of retirement incomes and savings that leaves many women in poverty in older age, especially women who are or have been unpaid carers.

Throughout the twentieth century, Australia's retirement income system was characterised predominantly by the public age pension. Eligibility for the pension in old age is dependent on an individual's means and on their age.

The introduction of compulsory superannuation in 1992 consolidated a direct link in Australia's retirement income system between income in old age and participation in paid work throughout the lifecycle.

Many women (and some men) spend periods outside of the paid workforce, providing care for children and people with disability, long-term illness or frailty due to older age. Yet, the system of compulsory superannuation, which is tied to paid work, creates significant inequalities in the retirement incomes of those who provide care during their lives and those who do not.

Superannuation savings are also supported by generous taxation concessions. The current system of taxation concessions disproportionately benefits higher income earners who make higher contributions to their superannuation.²⁸ As carers are more likely to have lower superannuation savings, they are less likely to benefit from taxation concessions.

Due to the link in social insurance-style public pension schemes between workforce participation and income in old age, internationally many countries have been grappling with the considerable inequalities in retirement incomes created by these periods spent caring.

The introduction of carer credits into a country's pension system provides a method of explicitly recognising these years spent providing unpaid care for a child or a family member with a disability, long-term illness or frailty due to old age.

For parents, many countries link their carer credits to periods of paid (or unpaid) parental leave.

Credits can also be available to new parents who are outside of work or who are not entitled to parental leave.

Some carer credit schemes permit, and indeed encourage, carers to return on a part-time basis by continuing to provide carer credits upon their return or re-entry to the workforce. These credits can 'top up' an individual's pension contributions to the value of what they would be if the individual was working full-time.

A number of countries, that limit carer credits to parents only, are now extending them to all carers. For carers, entitlement to a credit generally depends on the level of the care need or the amount of care provided by the carer, sometimes verified by a 'care certificate'.

Some countries are beginning to include carer credits in their private or occupational pension schemes. In these cases, the state either contributes to a person's private pension account while they are out of work after the birth of a child or takes over the employer contribution during certain periods of workforce absence.

Any reform of the current system of retirement incomes and savings should also recognise the potential intergenerational inequities that may be associated with them, as changes to the superannuation system take time to mature and may not be of great benefit to those approaching pension age now. Therefore options for reform should include both the age pension and the superannuation system.

The benefit to society is greater gender equality in older age and greater adequacy of women's retirement incomes through access to increased superannuation entitlements, leading to improvements in financial wellbeing in older age.

1.7 Summary of options for reform

To comprehensively recognise and remunerate unpaid caring work, it is recommended a combination of mechanisms be considered as possible mechanisms for adoption in Australia, across the following areas:

- Legislative mechanisms
- Flexible work arrangements
- Carer payments
- Leave arrangements
- Services for carers
- Workplace mechanisms and
- Mechanisms within the retirement income and savings system (i.e. taxation, superannuation and income support).

Options for reform	Focus	Responsibility
Legislation		
<p>Anti-discrimination laws</p> <p>1. Extend the prohibition of discrimination on the ground of family responsibilities to include carer responsibilities in anti-discrimination legislation.</p>	Parents and carers of people with disability, illness or older people	Australian/ State/ Territory Governments
<p>Carer Recognition Act 2010</p> <p>2a. Create legally enforceable obligations to a carer assessment, modelled on the UK legislation, under the <i>Carer Recognition Act 2010</i> (Cth).</p> <p>2b. Introduce a Carer Card, which identifies carers who are assessed as having significant caring responsibilities, and can be used to access services and entitlements.</p>	Carers of people with disability, illness or older people	Australian Government
Flexible Work Arrangements		
<p>Fair Work Act 2009</p> <p>3. Amend the <i>Fair Work Act 2009</i> (Cth) to:</p> <p>a. Extend the right to request flexible work arrangements to include parents of children of all ages and to encompass all forms of family and carer responsibilities such as disability and elder care;</p> <p>b. Remove the qualification requirements that restrict the categories of employees who can make a request for flexible working arrangements;</p> <p>c. Place a duty on employers to reasonably accommodate a request for flexible working arrangements;</p> <p>d. Establish a procedural appeals process through Fair Work Australia for right to request flexible work decisions.</p>	Parents and carers of people with disability, illness or older people	Australian Government

Options for reform	Focus	Responsibility
Leave arrangements		
<p>Carer's leave</p> <p>4. Amend the National Employment Standards to:</p> <ul style="list-style-type: none"> a. Provide for additional carer's leave, separate from personal leave, specifically for carer responsibilities only; b. Extend eligibility of access to carer's leave to cover all employees; c. Provide for job-protected unpaid leave for palliative care; d. Extend the definition of caring responsibilities in carer's leave to include kinship relationships. 	Parents and carers of people with disability, illness or older people	Australian Government
Income Support		
<p>Carer Payment</p> <p>5. The Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA):</p> <ul style="list-style-type: none"> a. review the number of hours allowed for work, education, or training while on the Carer Payment to allow for greater flexibility; b. review income testing arrangements to better support combinations of employment, care-giving and carer-directed income support. 	Carers of people with disability, illness or older people	FaHCSIA
Services		
<p>Employment conditions of paid care workers</p> <p>6. Enhance and protect the employment conditions and pay of paid care workers, including within the NDIS, the Aged Care Reform Package, and the early childhood education and care sector.</p>	Paid care workers of people with disability, illness or older people, and in the early childhood education and care sector.	Australian Government

Options for reform	Focus	Responsibility
<p>Carers Assessment</p> <p>7. Enhance mechanisms to recognise carers and their needs, provide for carer assessments, and ensure adequate support services for carers in:</p> <ul style="list-style-type: none"> a. The development and implementation of the NDIS; b. The implementation of the Aged Care Reform Package; c. The health care system. 	<p>Carers of people with disability, illness or older people</p>	<p>Australian Government</p>
<p>Productivity Commission Inquiry: Early childhood education and care</p>		
<p>Productivity Commission – early childhood education and care</p> <p>8. The Productivity Commission conduct a whole-of-system review into the current provision, costs, taxation and financing of early childhood education and care services, with a view to achieving accessible, affordable, flexible, quality early childhood education, including outside of school hours and ensuring each child has an entitlement to attend.</p>	<p>Parents with pre-school and school aged children</p>	<p>Productivity Commission</p>
<p>Workplace Mechanisms</p>		
<p>Workplace mechanisms</p> <p>9. Employers should consider implementing mechanisms to support unpaid carers in the workplace, such as:</p> <ul style="list-style-type: none"> a. Adopting an integrated carer strategy; b. Providing information and support services to carers; c. Offering flexible hours and leave arrangements; d. Undertaking job redesign to accommodate caring commitments; e. Implementing employment re-entry strategies during and after caring responsibilities. 	<p>Parents and carers of people with disability, illness or older people</p>	<p>Employers</p>

Options for reform	Focus	Responsibility
Productivity Commission Inquiry – valuing unpaid caring work		
<p>Productivity Commission – valuing unpaid care</p> <p>10. The Productivity Commission, or another independent body, conduct an inquiry into the following mechanisms for valuing unpaid caring work:</p> <p>a. Parental leave mechanisms</p> <p>i. Providing a Government-funded time-bonus of four weeks of additional paid leave in recognition of equal take-up of parental leave in couples; or</p> <p>ii. Providing a Government-funded time-bonus of two weeks additional payment, for either partner, under the Paid Parental Leave Scheme, if the whole father/partner quota is used.</p> <p>b. Carer's leave mechanisms</p> <p>i. Providing employees with a legislated right to a job-protected unpaid employment break of up to 12 months, across the lifecycle, to provide care for a person with disability or illness or frailty due to age or for palliative care.</p> <p>ii. Options for Government to reimburse employers in relation to any additional carer's leave (separate to personal leave) introduced under the NES, including the administration costs.</p>	<p>Parents</p> <p>Carers of people with disability, illness or older people</p> <p>Carers of people with disability, illness or older people</p>	<p>Productivity Commission or another independent body</p>

Options for reform	Focus	Responsibility
<p>c. Superannuation system</p> <p>i. Replacing the existing system of taxing superannuation with a new, more progressive system of tax offsets; and</p> <p>Including a system of ‘carer credits’ in the form of direct credits to the superannuation accounts of individuals with parental care responsibilities and carer responsibilities (either out of the workforce or working part-time) that would be paid annually at the end of the tax year by the government into the individual’s superannuation account through adult life; or</p> <p>ii. Extending the Superannuation Guarantee to individuals with parental care responsibilities and carer responsibilities.</p> <p>d. Care bonus</p> <p>i. Modelling the cost/benefit of a care bonus, as an additional supplement to the age pension, for unpaid carers who have made substantial contributions to care over their life.</p>	<p>Parents and carers of people with disability, illness or older people</p> <p>Parents and carers of people with disability, illness or older people</p> <p>Parents and carers of people with disability, illness or older people</p>	
Community Education		
<p>Community education</p> <p>11. The Australian Government and the Australian Human Rights Commission conduct a community wide social marketing/ education campaign on:</p> <ul style="list-style-type: none"> » the positive contributions of carers; » promoting positive attitudes and stereotypes of caring and carers, particularly male carers. 	<p>Parents and carers of people with disability, illness or older people</p>	<p>Australia Government/ Australian Human Rights Commission</p>



Chapter 2:

Introduction

2.1 Background to this report

(a) Accumulating poverty

In 2009 the Australian Human Rights Commission undertook a study into the experiences of gender inequality over the lifecycle that culminate in a gender gap in retirement incomes and savings and higher rates of poverty and financial hardship for women in older age. The gender gap in retirement incomes is the result of women moving in and out of the paid workforce due to caring responsibilities and the inequalities in earnings, which impact on women's capacity to accumulate an adequate level of retirement savings. The study, *Accumulating Poverty? Women's experiences of inequality over the lifecycle*²⁹ outlined the gender inequalities in education and training, workforce entry, career progression, earnings, parenthood, unpaid caring, gender and age based discrimination and gender based violence. These inequalities lead to women 'accumulating poverty' rather than enjoying the basic human right to an adequate standard of living in older age.

The study proposed a number of policy reforms to redress women's disadvantage including removing the barriers to women's participation in the paid workforce and closing the gender pay gap; investing in measures to redress women's disadvantage in the superannuation scheme; and specifically recognising and rewarding unpaid caring work in the retirement income system.³⁰ The study found that there was a need for a broader investigation into how the retirement income system can be reformed to properly recognise and compensate those who undertake unpaid caring work.

This report builds on the earlier study to explore further the nature of unpaid care and its impact on workforce participation and retirement incomes and savings. It examines Australian and international mechanisms that recognise and remunerate unpaid caring work. It identifies potential options for reform, with the objective of stimulating a new discussion about how best to value unpaid caring work. The options identified in this report are put forward with the aim of ensuring that no woman will live in poverty in her retirement because she chose to care during her lifetime.

(i) Australian retirement income system

The Australian retirement income system is made up of three pillars or tiers: a publicly funded social assistance-style age pension; a mandated occupational superannuation scheme; and additional voluntary contributions or savings.

The central pillar of Australia's retirement income system is the social assistance-style public age pension. The age pension was introduced in 1908 and has formed the bedrock of Australia's retirement income system throughout the twentieth and twenty first centuries. Since 1992, Australia has had a second major pillar in its retirement income system in the form of a fully-funded, mandated occupational superannuation scheme – the Superannuation Guarantee (SG).³¹ The scheme has wide coverage but great disparities in value. Superannuation Guarantee contributions are treated concessional for taxation purposes. The third tier of the Australian retirement income system is voluntary private superannuation and savings. Voluntary superannuation refers to those contributions made to superannuation that take place in addition to mandatory contributions through the SG. The contributions to voluntary superannuation are also treated concessional for taxation purposes. Individuals with high incomes are more likely to make additional voluntary contributions and therefore benefit much more from the associated tax concessions.³²

The current retirement income system, with the value of retirement income depending upon occupation superannuation contributions attached to lifetime earnings, leads to a gender gap in retirement incomes, whereby women have average weekly disposable incomes ranging between 60 and 82 per cent of men in a similar age group in older age.³³ While this gap is the outcome of cumulative gender inequalities over the lifecycle, a significant contributor to this gap is the unpaid caring work undertaken predominantly by women which leads to reduced workforce participation.³⁴

(ii) *The social and economic value of unpaid care*

Caring is valuable, necessary work undertaken by paid care workers and unpaid carers. It occurs within a system of relationships in our society and is crucial to the social and economic fabric. Care will affect all of us in our lives, either as carers and/or in being cared for, and this impact is likely to increase as socio-demographics shift towards Australia having a larger ageing population. The recognition of care provision, both paid and unpaid, reflects the value placed on our shared humanity and the periods throughout our lives in which we all experience a need for support.

Unpaid carers in this study comprise two groups – parents and carers:

- parents (who include biological, step, adoptive, or foster parents, and grandparents or guardians with caring responsibilities for a dependent child); and
- carers (who include people caring for a family member or friend with disability, chronic illness or frailty due to older age. Persons with disability ‘include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others’).³⁵

Valuing the work of unpaid carers (parents and carers) requires social and economic recognition of the importance of the relationships they build and foster, the assistance they provide to the people for whom they care, and the manifold contributions that they make to the whole community and economy. Caring relationships and roles are diverse and each care situation is unique and may change across the lifecourse. When one thinks of valuing unpaid carers one should pay attention to the full spectrum and diversity of unpaid caring work in our society and accord equal recognition and worth to all unpaid carers.

Australian society in the past has failed to recognise both the worth and impact of unpaid caring roles, particularly the caring roles undertaken by women. Women undertake the majority of parental care for children;³⁶ and grandmothers provide significant support for grandchildren, both as primary caregivers and as providers of informal child care, that allows parents to participate in the workforce.³⁷ In Australia, women comprise 92 per cent of primary carers for children with disability, 70 per cent of the primary carers for parents, and around half (52 per cent) of the primary carers of partners.³⁸ Men constitute a significant proportion (48 per cent) of the primary carers for partners, particularly in older age.³⁹

This undervaluing of unpaid caring work has placed women at an economic disadvantage that has had a significant impact on women’s retirement income and savings. For many women poverty is the reward for a lifetime spent caring.

Cultural change in our society and our workplaces is a crucial element of valuing unpaid care. Such change needs to start with addressing gender role stereotypes and social norms related to unpaid care responsibilities and participation in paid work by men and women across the lifecourse. It is important that a public debate about unpaid care asks what are the barriers to men taking on more responsibility for unpaid care and challenges the model of the ‘ideal worker’ who is unencumbered by any caring responsibilities. Cultural change requires education campaigns to challenge stereotypes and entrenched norms at all ages and in all sectors of society. The outcome of these campaigns would be to enable Australian society to recognise a diversity of households and relationships and a diversity of paid work and unpaid care trajectories for men and women across their working life. A public debate on unpaid care also must discuss the legal, regulatory and policy frameworks that support the current gendered divisions in paid work and unpaid care.

Leadership from employers and community leaders in challenging the rigid distinctions between those who undertake paid work and unpaid care will be essential to any cultural shift in our society. Employers, management personnel in public and private sector employment, and community leaders, who successfully combine unpaid care with stellar careers need to be role models and exemplars.

2.2 The impact and the costs of care

(a) *The dimensions of gender inequality*

(iii) *Workforce participation*

Female unpaid carers have significantly lower rates of workforce participation and are more likely to be working part-time and in casual employment than fathers and male carers. In couple families with dependents, 90 per cent of fathers were employed, compared to 67 per cent of mothers.⁴⁰ Australian data shows that around three-quarters of employed mothers of infants and pre-schoolers and just over half the employed mothers of adolescents work part-time compared to less than 7 per cent of employed fathers.⁴¹ Among employed mothers of these different cohorts of children, 17-21 per cent were employed on a casual basis compared to less than 5 per cent of fathers.⁴² Among all carers aged 15-64 years, 73 per cent of men and 62 per cent of women are employed, with men and women who are primary carers having lower employment rates.⁴³ Fifty-four per cent of all employed female carers in this age group were working part-time, compared to 17 per cent of employed male carers.⁴⁴ This has implications for access to workplace arrangements and implications for careers, employment security and workforce attachment of women, due to occupational downgrading and formal skills attrition after taking on a caring role.

(iv) Retirement incomes

In the current retirement income system, the value of retirement incomes will be related to the capacity to contribute to superannuation, which is an outcome of the level of lifetime earnings. Lifetime earnings for men and women, and opportunities to contribute to occupational superannuation, will depend on participation in employment, qualifications, hours worked and the gender wage gap. A wide range of studies have estimated gender differences in projected superannuation outcomes for women and men⁴⁵ and identified large gender gaps in retirement income.

(b) The case for change

In the context of current reforms to many aspects of the Australian health, disability and care systems, it is timely to consider the elements of the case for changes to workplaces and the retirement income system which value and recognise unpaid carers.

(i) Social case

The social case to support unpaid care encompasses understanding care as a form of work, as a relationship, and as a disposition of attentiveness towards another's needs, and in acknowledging the importance of gender equality in paid work and unpaid care:

- as members of a society, we engage in paid work and unpaid care;
- care is necessary, valuable work;
- caring relationships are crucial for our social fabric;
- caring activities are central to social and civic citizenship; and
- improving gender equality in caring responsibilities and workforce participation will be socially beneficial.

(ii) Economic case

The economic case to support unpaid carers is based on four key elements:

- the importance of recognising non-market productivity as an essential component of economic productivity.

The value of child care provided by parents is substantial. The amount of unpaid care for people with disabilities is estimated to be 1.32 billion hours each year. This was valued at \$40.9 billion per annum in 2010, if unpaid care were to be replaced by paid care providers and provided in the home:⁴⁶

- it is essential to maintain the supply of unpaid care.

The unpaid care work of parents and carers underpins the formal care economy. Currently carers provide assistance to most people (92 per cent) with severe or profound core activity limitations living in the community; 38 per cent of this group received unpaid care only, while 54 per cent received a mix of unpaid and paid sources of care:⁴⁷

- ensuring women's workforce participation is not constrained so that women's skills and Australia's investment in human capital is utilised;
- enabling women's workforce participation which contributes to women's greater financial security and greater productivity in the market sphere.

(iii) Business case

The business case to support unpaid carers encompasses:

- efficiency – it is more cost-effective to support unpaid carers in the workplace and retain their skills and knowledge than train new employees;
- increased productivity – provision of flexible support for carers in the workplace enhances employee's attachment, loyalty and commitment;⁴⁸
- service delivery – the recruitment of a diverse workforce 'supports the creation of a workforce that reflects its customer base and is therefore better able to understand customer needs and to deliver an appropriate service';⁴⁹ and
- diversity – a diverse workforce, that includes unpaid carers, means a diverse set of skills, expertise, different ways of thinking, which contributes to greater innovation and productivity.⁵⁰

(iv) *Human rights case*

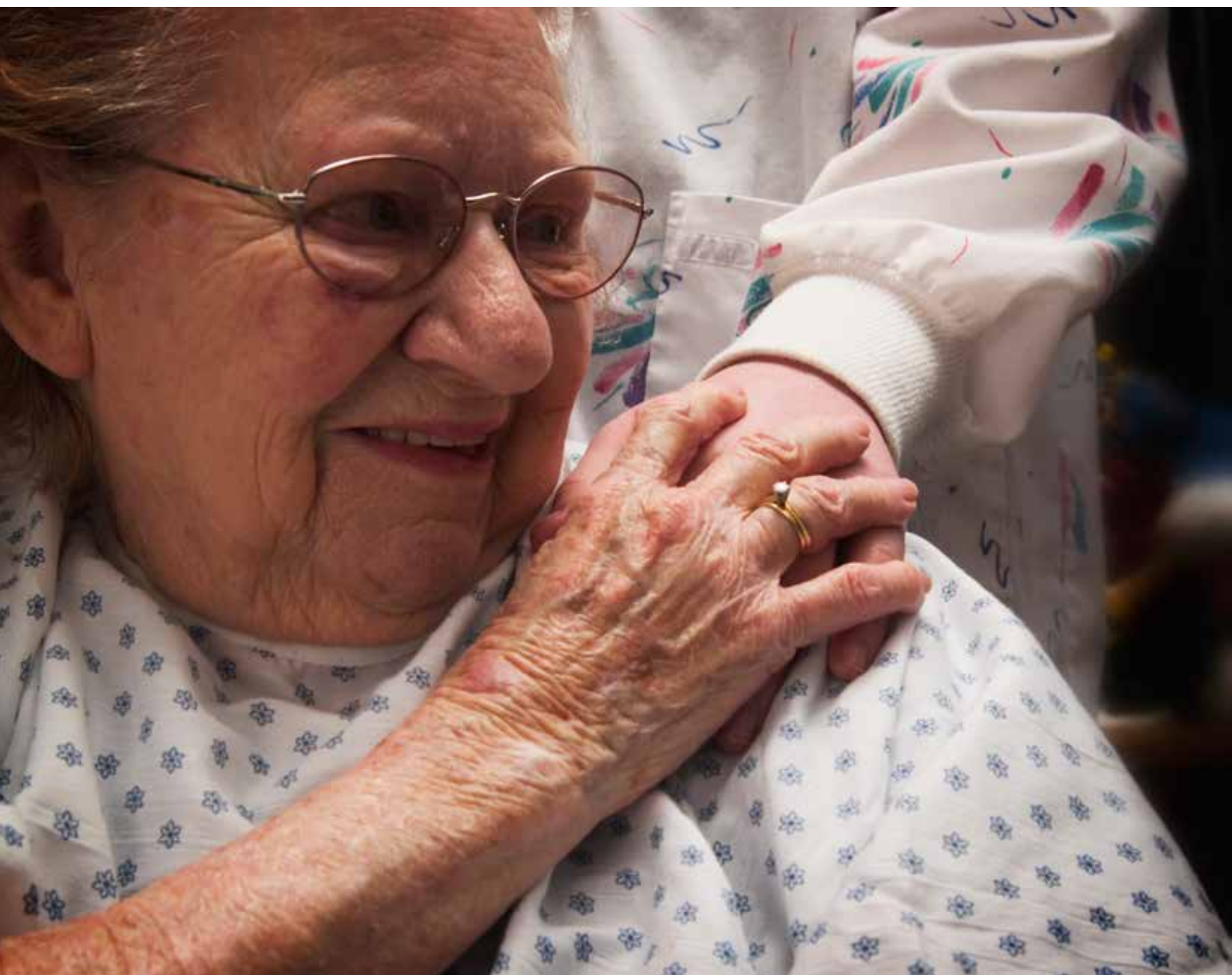
There is also a human rights basis for valuing and recognising unpaid care work in relation to addressing gender equality. The rights to gender equality, non-discrimination, decent work and the related accommodation of family and caring responsibilities within the right to work are articulated in several international human rights instruments, such as the UN *Convention on the Elimination of Discrimination Against Women (CEDAW)*⁵¹ the *Covenant on Economic Social and Cultural Rights* and the International Labour Organization *Convention concerning Equal Opportunities and Equal Treatment for Men and Women Workers: Workers with Family Responsibilities (No 156)*.

The human rights case to support unpaid carers encompasses:

- Women and men have a right not to be discriminated against on the grounds of their family and caring responsibilities.⁵²
- Women and men (with caring responsibilities) have a right to participate in and maintain employment.⁵³
- Women and men should have equal opportunities and equal treatment in employment.⁵⁴
- Women and men have a right to an adequate standard of living, including in older age.⁵⁵

The realisation of these human rights is essential to removing gender inequalities and discrimination and in recognising caring responsibilities within the right to decent work.

Women's human rights (including economic and social rights) cannot be fully realised within existing social, economic, and political structures which value specific economic contributions over and above social contributions, such as caring.



Chapter 3:

This report

3.1 Scope and definitions

This report aims to consider:

- the nature of unpaid caring work in Australia;
- the relationship between unpaid caring work and women's unequal participation in the workforce, and women's long-term economic security (in particular, retirement income);
- the different models/measures used in Australia and internationally which recognise and value unpaid caring work; and
- options for reform that will properly recognise and compensate those who undertake unpaid caring work.

(a) Unpaid care

In considering policy options to recognise and value unpaid caring work it is essential to develop a definition of unpaid care that defines the target population and purpose of any policy options.

The academic literature⁵⁶ on the nature of care suggests that unpaid care encompasses the following elements:

- relationships of moral and social obligation and responsibility;
- labour, it is an activity with costs, both emotional and financial;
- a disposition of attentiveness to another's needs;
- care occurs within economic and social policy arrangements and normative social frameworks, which define entitlements, expectations and responsibility for care and how this is to be shared between individuals and the state.

These facets of care should be considered when defining unpaid caring for the purposes of the policies and mechanisms considered and proposed in this report.

Due to the range of mechanisms proposed there is no precise definition of carers and parents described at this stage as the criteria for each element will have to be defined for each policy and mechanism.

Broadly speaking the definition of unpaid carers (parents and carers) for this report is as follows:

- **Parents:** any parent (adoptive, biological or step parent), grandparent, foster parent or guardian with caring responsibilities for a dependent child.⁵⁷
- **Carers:** provision of care for a family member or friend with disability, chronic illness or frailty due to older age, either co-resident or in a kinship or friendship network. Persons with disability 'include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'.⁵⁸ This latter definition includes parents of children with disability, who have both parental roles and other unpaid caring roles.

This definition excludes the unpaid caring work of daily social reproduction, or the domestic work undertaken by women for male partners. It also excludes the unpaid caring work undertaken by paid care workers who engage in work above and beyond their employment contract, due to personal commitments to service quality and their care relationships. In addition, the definition excludes unpaid caring work undertaken in a volunteer capacity. It is acknowledged that these forms of unpaid caring work are, also, along with the types of care involved in this investigation, essential to the functioning of the market economy, a healthy society and the health care system.

In considering mechanisms to recognise and value unpaid care, it is important to note the salience of the critique of the concept of care from the disability rights perspective. This critique proposes that focusing on the care provider, rather than the care receiver, may be disempowering and oppressive for people with disability.⁵⁹ Any definition of unpaid caring for the purpose of fostering gender equality in workforce participation and retirement income also needs to take account of the reciprocity and interdependence in care relationships and the needs of the person requiring support for opportunities for choice, self-determination and control.⁶⁰

(b) Recognising and valuing care

Recognising care involves acknowledging in legislation, policy or practice, valuable caring relationships and activities undertaken to assist dependent children and people with disability, chronic illness or frailty.

Valuing care involves supporting parents or carers through financial remuneration or compensation, the provision of time to care (paid and unpaid), or assistance through services and information.

Defining care for the purpose of recognising and valuing unpaid care in the workplace and in the retirement income system requires considering the:

- types of relationships to be recognised in a definition of care;
- level of care need;
- level of care contributions in any situation;
- location of care; and
- any restrictions on the definition of 'carer'.

3.2 Goals

The overarching goals that underpin the mechanisms and models recommended for discussion in this report are:

- a) To recognise and value (through remuneration, time, services or support) all forms of unpaid care equally and to aim to ensure equity across different groups of unpaid carers (parents and carers).
- b) To enhance gender equality in:
 - » the provision of unpaid care;
 - » opportunities for workforce participation;
 - » wages, and
 - » retirement incomes and savings.
- c) To provide a policy, social and economic framework which facilitates genuine choices for men and women to combine unpaid care and paid work and to transition between unpaid care and paid work across the lifecycle. Genuine choice implies minimising financial and other penalties for unpaid caring across the lifecycle.

The paid care workforce interacts in crucial ways with parents and carers. In considering options to recognise, value and support unpaid carers, any proposals to provide increased and suitable formal care services must be mindful of the conditions and pay for paid care workers and their quality of work.

Any options for reform also need to recognise that options to contribute to retirement income in the future through superannuation should not generate penalties in current incomes for individuals, particularly for low paid and insecure workers. The options for reform outlined in this report broadly aim to remedy the situation for past unpaid carers, address current inequalities for present unpaid carers, and to envisage futures for an Australian society where there will be less inequality between unpaid carers.

3.3 Mechanisms and models

The report reviews 18 countries in the OECD which include: the United Kingdom, New Zealand, Canada, the United States, Sweden, Finland, Denmark, Norway, Iceland, France, Germany, Austria, The Netherlands, Luxembourg, Switzerland, Belgium, Spain and Italy. The report also draws useful examples of mechanisms from six other countries including, Poland, Hungary, the Czech Republic, Slovakia, Chile and Japan.

In developing the options for reform different international mechanisms for supporting parents and carers have been reviewed to identify mechanisms that are feasible to implement in the Australian public policy context. In all countries, combinations of mechanisms interact with each country's unique institutional structures. Given Australia's particular retirement income architecture, it is not possible to import a 'best model' directly from another context. In considering the applicability of the mechanisms to the Australian context, emphasis has been placed on features that have had positive outcomes in other countries in relation to one or more of the research goals. However, it is recognised that the different mechanisms may be more ideally suited for different goals and that some mechanisms may support one or more of the goals of this report. It will be a combination of mechanisms that provide the best options for enhancing genuine choices between paid work and providing unpaid care.

The funding required for the different mechanisms is a crucial question; and options for funding will need to be considered. It is also important to ensure quality assurance and adequate systems of accountability for expenditure and service delivery are considered as part of the implementation of any mechanism.

3.4 Research methods

The aims of the research outlined in Section 3.1 were explored through the following methods:

- (1) Development of a research outline, which was distributed to academics within the Work and Family Policy Roundtable for review and comment.
- (2) Research encompassing:
 - a. A review of the definitions of unpaid caring within academic literature, laws and policies in Australia (Technical paper A).
 - b. A review of existing Australian data on the prevalence of unpaid caring and the impact on workforce participation (Technical papers B and C).
 - c. Statistical analysis of the prevalence of unpaid caring and workforce participation using published data from ABS sources, including the *2011 Census of Population and Housing*, the *ABS Survey of Disability, Ageing and Carers 2009 (SDAC)* and the *Household Income and Labour Dynamics In Australia (HILDA) Survey Release 10* (Technical papers B and C).
 - d. A review of literature and data on the impact of unpaid caring on retirement incomes, including ABS sources and analyses of statistical data (Technical paper D).
 - e. A review of key Australian legislation and policies to explore how unpaid caring is recognised and valued (Technical paper E).
 - f. A review of issues relating to workplace initiatives and workplace cultures to support unpaid care in Australia and case studies of Australian and International innovative practices to support unpaid carers (Technical paper F).
 - g. A review of international models from 24 countries (including 6 non-OECD countries) for recognising and valuing care focusing on mechanisms relating to retirement incomes, leave arrangements, statutory workplace mechanisms and services (Technical paper G).
 - h. Development of options for reform to recognise and remunerate unpaid care in the Australian context.

All technical papers are contained in Volume 2 of the report.

(3) Stakeholder Consultations

A consultation paper was developed which was distributed to a range of stakeholders in Australia including academics, non-government organisations, peak bodies, carers' organisations, unions and Australian Human Rights Commission staff. Three consultation roundtables were held at the Australian Human Rights Commission to discuss the questions raised by the preliminary research findings and stakeholders were invited to provide feedback to the consultation paper. The research was reviewed and revised after the consultations and the draft and final reports were produced. In addition the options for reform were shared and discussed with representatives from the Department of Education, Employment and Workplace Relations, Department of Families, Housing, Community Services and Indigenous Affairs, the Productivity Commission, Australian Chamber of Commerce and Industry, Council of Small Business of Australia, Business Council of Australia, Chief Executive Women and Diversity Council Australia.

(a) Limitations of the research

All research projects are necessarily constrained in time and scope, which limit the comprehensiveness of any review. In addition, mechanisms outlined in these policy areas are subject to change in Australia and other countries. This study has aimed to identify up to date and key relevant data, research and policies, but may have omitted recent changes, both in particular Australian and international contexts. In some cases formal evaluations of the impacts and effectiveness of mechanisms (for example carer recognition legislation) have not been undertaken and our options for reform are based on anticipated outcomes, submissions to, and reports from inquiries which have addressed these issues. Future research could explore more fully any potential unanticipated consequences of some of these mechanisms for the Australian context.



Chapter 4:

The prevalence and impact of unpaid care in Australia

All people will be involved in care relationships at different points across their lifecourse, either as care providers and/or care receivers. The type and intensity of care undertaken, the impact it has on work and life more generally, and the impact it has on financial security in older age, is shaped by relationships, roles and the policy context.

4.1 Prevalence of unpaid care

Data on unpaid care in Australia is available from a variety of sources,⁶¹ although the prevalence of unpaid caring roles for people with disability or illness is often not recognised by carers themselves, as they perceive their care activities as simply part of their usual relationship with the person they care for. Identification as a ‘carer’ may be less common in particular communities, including among Aboriginal and Torres Strait Islander peoples and Culturally and Linguistically Diverse (CALD) groups. Some specialist surveys conducted by the Australian Bureau of Statistics (ABS) use a range of methods to assist in the identification of carers and care relationships, although in many surveys the data collection relies on the carer to self-identify. The definitions and methods used in different surveys vary with implications for any estimates. One of the reasons that cross-sectional surveys may not document the full extent of caring is due to the episodic and intermittent nature of some care relationships.

(a) Caring for children

In Australia in 2011, the *Census of Population and Housing* (Census) data indicated that 2 million men and 2.8 women had provided unpaid care for children, either their own or another child under 15 years of age, in the last two weeks.⁶² This represented nearly one in four men (23.6 per cent) and one in three women (31.8 per cent).⁶³ Women are more likely to undertake caring roles for children, with the largest gender gaps occurring in the prime working age period of 25-44 years of age.⁶⁴ Higher rates of care for children were evident in Aboriginal and Torres Strait Islander Communities in the 2006 Census, particularly among women, where 40.5 per cent of women and 24.7 per cent of men had provided unpaid care to children.⁶⁵

(b) Caring for people with disability, chronic illness or frailty due to older age

In Australia in 2009, 12 per cent (or 2.6 million people aged 15 years and over) had caring responsibilities for a family member or friend with an ongoing disability, long-term illness or frailty due to older age.⁶⁶ Caring across the lifecourse increases with age and is gendered, with women undertaking higher rates of care provision in all age groups between 18 and 74 years, encompassing the main period of paid employment.⁶⁷

Among the population aged 15-64 years, 13.6 per cent or 1.95 million people (1.13 million women and 0.82 million men) were carers. Women are more likely than men to be carers with more care responsibilities of a greater intensity, or primary carers: in the 15-64 years age group women comprise 72.5 per cent of primary carers.⁶⁸

Existing research in Australia suggests that the concepts of disability and caring in Aboriginal and Torres Strait Islander communities may differ from the concepts used by policy makers and statistical definitions. In addition, the research suggests that many Aboriginal and Torres Strait Islander people may not identify with the term 'carer', as the caring role is perceived to be part of family and community obligations and is shared within the community.⁶⁹ National data on caring for people with disability, chronic illness or frailty due to older age amongst Aboriginal and Torres Strait Islander peoples is currently limited to the 2006 and 2011 Census.⁷⁰ In 2006, 13.2 per cent of Aboriginal and Torres Strait Islander people indicated that they provide care, compared with 11.2 per cent of the non-Indigenous population.⁷¹ The explanations for the higher rates of caring in these communities are likely to include the higher rates and earlier onset of disability and illness among Aboriginal and Torres Strait Islander communities.⁷²

(c) Unpaid carers – parents and carers

Overall, combining data on parents and carers for people with disability, chronic illness or frailty due to older age, at any point in time, around one in three men (35%), and two in five women (41%) aged 15-64 years or an estimated 2.5 million men or nearly 3 million women, have responsibilities for unpaid care.⁷³ Rates of unpaid care vary across the lifecourse and are highest in the 35-44 years age group, where 73 per cent of women and 64 per cent of men had some form of unpaid care responsibility.⁷⁴ Given the prevalence of unpaid care over the lifecourse it is likely that everyone will be an unpaid carer at some point in their life and may also need to combine unpaid care and paid work.

(d) Gender differences in time spent caring

The rates of caring do not fully reveal the gendered dimensions of caring, which are evident in the different amounts of time spent caring by men and women. Gender inequalities in time spent caring for children and gender differences in the type of care provided by women and men with parenting responsibilities in Australia have been well documented.⁷⁵ In Australia in 2006, overall, female parents spent 8 hours and 33 minutes per day in caring for children aged under 15 years, compared to 3 hours and 55 minutes for male parents.⁷⁶ Care responsibilities are more intense when children are younger, with female parents being engaged in parental child care for an average of 11 hours and 25 minutes per day when a child was aged 5 years and under, compared to just over 5 hours per day when the youngest child was aged 6-14 years (on average).⁷⁷

Among primary carers of people with disability, chronic illness and frailty, estimates indicate that 48 per cent of men and 53 per cent of women provide 20 hours or more per week of care.⁷⁸ The reported number of hours providing care is likely to be an underestimate due to carers not recognising some of the activities that they undertake for the person as caring activities.⁷⁹ The gender gap in intensive care provision is substantial, as women are more likely to provide more than 40 hours of care per week at all points across the lifecourse.⁸⁰ Nearly half of female primary carers aged 35-44 years provide more than 40 hours per week of care.⁸¹

(e) Gender differences in care relationships

The gendered nature of the obligation to provide care may be evident in the types of care relationships that men and women engage in. Women are more likely to care for children with disabilities and parents, while men are more likely to care for their partner.⁸² Different types of care relationships may bring different levels of responsibilities and different impacts on workforce participation and financial security.

While the *Survey of Disability, Ageing and Carers* (SDAC) provides data on a range of sources of support for people with disability, chronic illness or frailty, more research and analysis could be undertaken on the networks of care for individuals and how these networks of care may go beyond the usual definitions of immediate family, particularly in Aboriginal and Torres Strait Islander and CALD communities.

Given the wide array of data collected on parenting and caring, future research could explore the prevalence and combination of all unpaid caring responsibilities across the lifecourse. To provide greater understanding of the nature and extent of unpaid care in Australia, future research should focus on gender and age analysis of the prevalence, nature and types of parental care and other forms of care.

(f) Next steps

There is a need for further research into the extent and forms of unpaid caring relationships beyond immediate family and household members, which could be conducted by the Australian Human Rights Commission. There is also a need to explore the concept and impacts of unpaid care in Aboriginal and Torres Strait Islander and CALD communities in Australia.

4.2 Unpaid care and workforce participation

The interaction between unpaid care responsibilities and paid work is a crucial element affecting the capacity to remain employed and to contribute to retirement incomes and savings. Given the extensive prevalence of care noted above, negotiating paid work and unpaid care will be a challenge faced by many.

- In June 2012, 66.7 per cent of all women aged 15-64 years in Australia were in employment compared with 78.3 per cent of men in this age group.⁸³ Among employed women 15 years and over, 45.8 per cent worked part-time compared to 16.5 per cent of employed men.⁸⁴
- The labour force participation rate for women aged 15-64 years is 70.6 per cent compared to 82.4 per cent for men.⁸⁵

(a) Parents and employment

The gendered impact of unpaid caring for dependent children is clearly evident in the employment status of women and men.

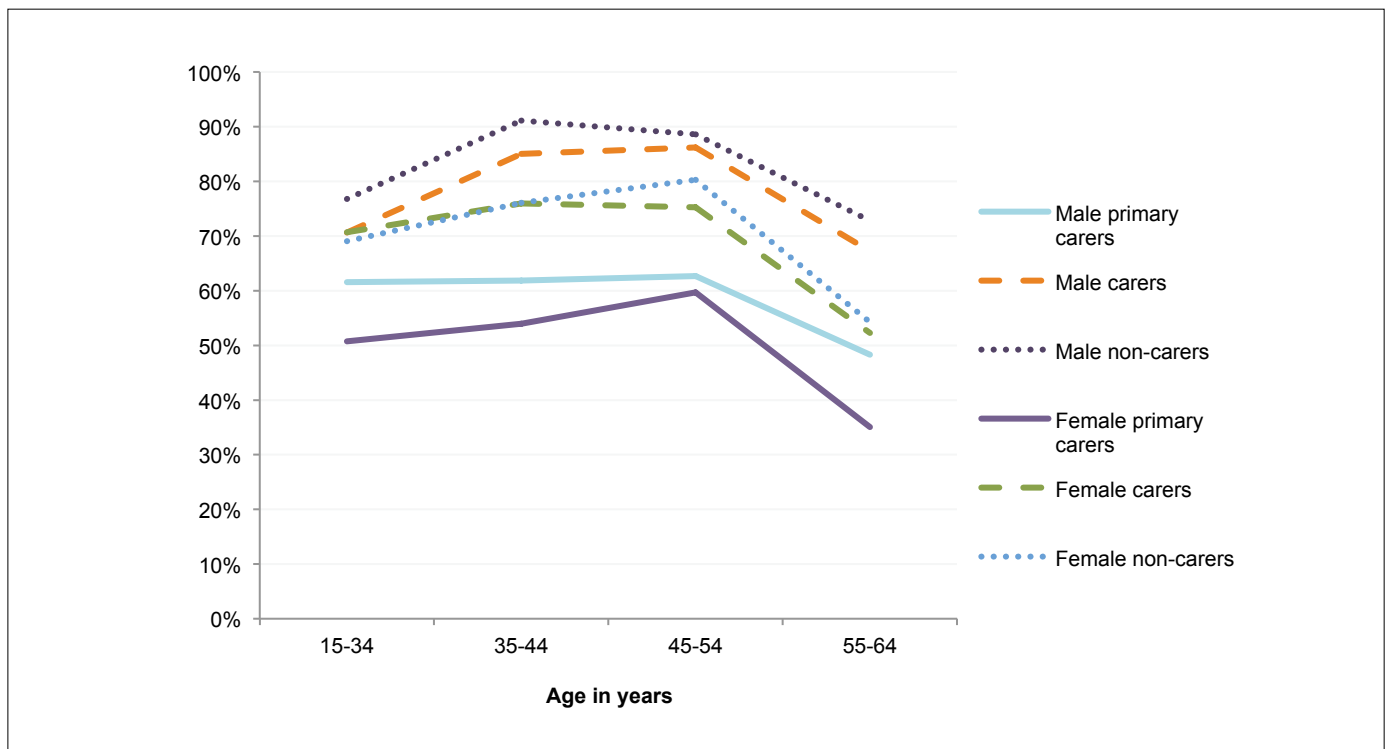
Existing studies show that the gender gap in labour force participation rates is most evident when children are under the age of six years, with the labour force participation rates of female parents being 39 percentage points lower than male parents who had a youngest child under six years.⁸⁶ When employed, female parents are more likely to work part-time than male parents: 66 per cent of employed females with children aged under six years worked part-time compared to seven per cent of employed males with children of this age.⁸⁷ The reduction in hours of paid work for employed female parents continues for a long duration: for parents with a youngest child aged 6-14 years the rates of part-time employment were 55 per cent for female employees compared to 8 per cent for employed male parents.⁸⁸

(b) Carers and employment

The gendered impact of unpaid care on workforce participation for people with disability, frailty or ageing across the lifecycle is also clearly evident. Female and male primary carers have rates of employment that are significantly lower than all other groups (Figure 1), with less than 63 per cent of males and 60 per cent of females in this group employed at any point across the lifecycle.

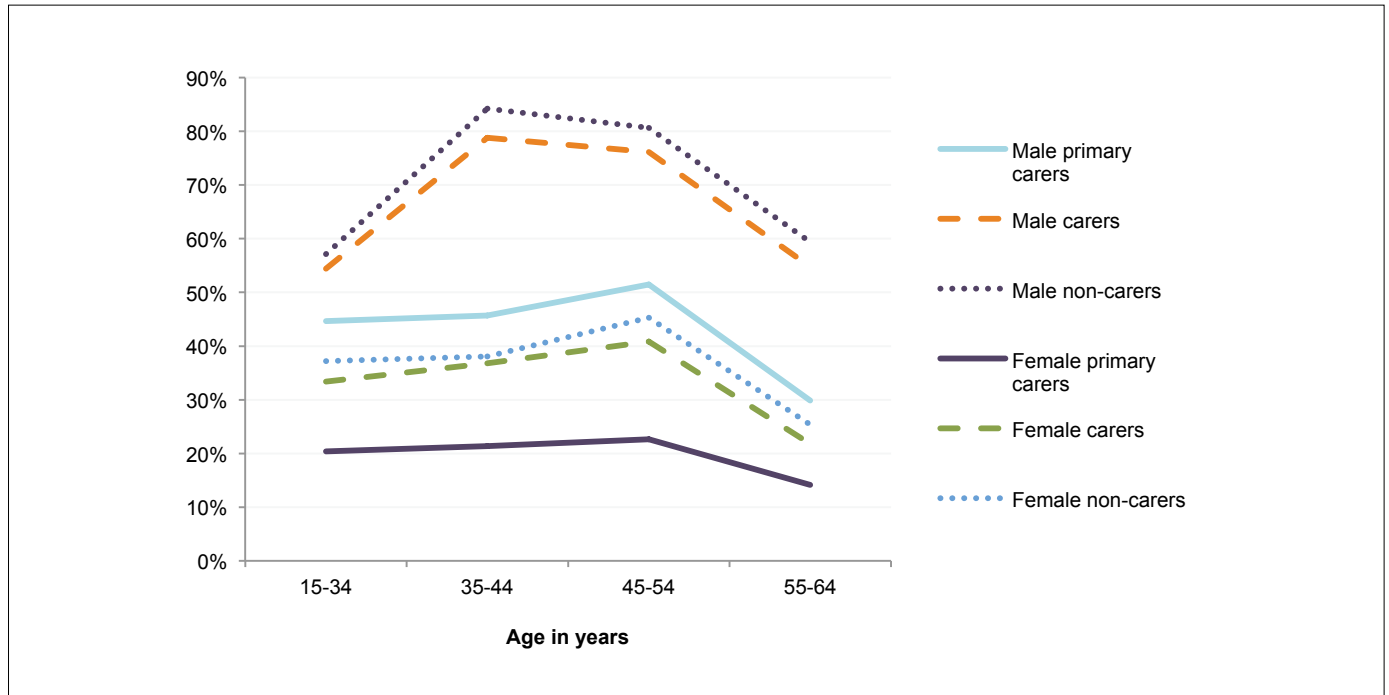
When considering rates of full-time employment, the gender differences are even more stark: less than 23 per cent of female primary carers were in full-time employment at any point across the age groups. This figure compares with between 25-45 per cent of women who were not carers, 30-52 per cent of men who were primary carers, and 57-85 per cent of men who were not carers (Figure 2).

Figure 1: Employment rates by age, sex and carer status, 2009



(Source: generated from SDAC 2009).

Figure 2: Proportion working full-time by age, sex and carer status, 2009



(Source: generated from SDAC 2009).



(c) Employees who have care responsibilities

The challenge of negotiating caring responsibilities and employment will affect many men and women. In Australia in 2009, 4.1 million or nearly two in five employees (38.2 per cent) were either parents of a child under 15 years or have responsibilities to care for a person with disability, chronic illness or frailty due to older age (Table 1).

Table 1: Employees with unpaid care responsibilities sex and type of care, 2009

	Parents of children under 15 years	Carers of people with disability, chronic illness or frailty	Total unpaid care: parents and carers
'000s			
Male employees	1,760	602	2,176
Female employees	1,452	695	1,931
All employees	3,212	1,297	4,106
%			
Male employees	30.3	10.4	37.5
Female employees	29.3	14.1	39.0
All employees	29.9	12.1	38.2

(Source: generated from SDAC 2009)

The workforce participation of female parents and carers is strongly impacted by their unpaid caring responsibilities. The gap in full-time employment rates will translate into a large gender gap in earnings, which may continue across the lifecycle. Reducing hours of work is one strategy that parents and carers use to meet their paid work and unpaid care commitments, although this imposes an earnings penalty with subsequent impacts on superannuation contributions and retirement incomes. A further issue is whether the reduction in hours worked to undertake care leads to a reduction in the quality of the available jobs and conditions, with implications for reduced career prospects and future earnings.⁸⁹ Evidence from Australia suggests that women may need to change to lower level occupations or change employers in order to reduce hours of work.⁹⁰ In 2005, twenty-two per cent of women who were pregnant had experienced a range of difficulties in the workplace including missing out on training or development, missing out on opportunities for promotion and inappropriate or negative comments.⁹¹ What is not known with certainty, due to limited data and analysis, is the paid work and unpaid care trajectories of women and men across their lifecycle, as well as the impact of unpaid care on the educational choices of young people. Evidence from the OECD suggests that countries with smaller gender gaps in unpaid work have higher female employment rates,⁹² indicating that greater redistribution of caring responsibilities between men and women workers will enable increased participation of women in the workforce.

(d) Next steps

For a better understanding of the situation faced by unpaid carers, it is critical to undertake comprehensive modelling of the impact of all forms of unpaid care on women's lifetime workforce participation, wage rates and career trajectories, with men as the comparator. The modelling should also include a gender analysis of the impact of caring on secondary and post-secondary educational outcomes for young people. The Productivity Commission, or a similar independent body may be best suited to conduct the modelling.

4.3 Unpaid care and retirement incomes and savings

Australia's retirement income system is built on three pillars, the age pension, which is subject to income and assets tests, superannuation, the value of which is directly linked to lifetime earnings, and private savings.⁹³

Australia's superannuation system has been designed around male patterns of workforce participation and does not reflect the diversity and complexity of women's dual roles in unpaid caring and paid employment. Individuals who leave the labour force to provide child care or other forms of care have less opportunity to accumulate superannuation. In 2009-10 only 10.3 per cent of women aged 65 years and over and 17.4 per cent of men had their main source of income at retirement as superannuation or annuity.⁹⁴

(a) Age pension

In 2011, women comprised 56.5 per cent of the 2.23 million recipients of the age pension.⁹⁵ Just over half (53.6 per cent) of female age pension recipients were single and 71.8 per cent of single age pension recipients are women.⁹⁶ Sixty-one per cent of female age pensioners received the maximum rate, and 27.3 per cent of female age pension recipients were not home owners.⁹⁷ In 2008, 28.9 per cent of older women (aged 65 years and over) were in poverty compared to 24.6 per cent of men in this age group.⁹⁸ In 2006, women comprised just over one third (36 per cent) of homeless older people (aged 65 and over).⁹⁹

(b) Lifetime earnings of unpaid carers

While Australia lacks comprehensive data on the care and employment histories of women and men, models calculating the forgone earnings for women¹⁰⁰ and life time earnings capacity of unpaid carers¹⁰¹ indicate that the lifetime earnings lost due to caring roles is very substantial. Studies of lifetime earnings losses often compare women with children and female carers to women without children and women who were not carers, and do not use men as the comparator.¹⁰² The lifetime earnings penalties described thus do not encapsulate all aspects of the gender gap in lifetime earnings for unpaid caring.

Lifetime earnings penalties for women with children compared to women without children are estimated to vary according to the educational qualification levels and age at first birth.¹⁰³ The impact of having two children on life time earnings forgone is less than 40 per cent if highly educated, and nearly 60 per cent for women with lower levels of education.¹⁰⁴

It has been estimated that a woman caring for a child with a disability would earn 'between one quarter and one half of income as women without the primary carer role', depending on the education level.¹⁰⁵

Where lifetime earnings losses for women with children have been compared to men with children, women have been found to earn around 1.3 million between the ages of 25-64 years, almost half that of men (2.5 million).¹⁰⁶ A gender gap of \$100,000 over the working life in earning still exists for women without children compared to men without children.¹⁰⁷

Another contributor to the lower life-time earnings for women is the gender pay gap. Australian research finds that a large proportion (60 per cent) of the gender wage gap is due to discrimination or unexplained differences between men and women, while industry segregation and years spent in work also account for a significant component of the gap (25 per cent and 7 per cent respectively).¹⁰⁸

A more comprehensive approach to assessing the impact of unpaid care on lifetime earnings would require:

- considering all aspects of unpaid care women undertake – both as parents and carers – and the combined impact of this care on lifetime earnings prospects; and
- estimating the additional financial costs of caring for children and people with disability, frailty or illness and the impact of these additional costs on private savings.

(c) Superannuation balances

A wide range of studies have estimated gender differences in projected superannuation outcomes for women and men.¹⁰⁹ Analysis of the *ABS Survey of Income and Housing 2009-10* shows that the average (mean) superannuation balance for all men aged 15 years and over was \$71,645, whereas the comparable figure for women was \$40,475.¹¹⁰ A gender gap in average superannuation balances was evident at all ages.¹¹¹ The median superannuation balance was considerably lower for men at \$10,000 and women at \$3,000 due to the large proportion of individuals who have no or very little superannuation.¹¹² Women were more likely to report having no superannuation than men, with an estimated 38.5 per cent of all women and 31.6 per cent of men having none.¹¹³ Amongst women aged 65-69 years in 2009-10, 60 per cent had no superannuation.¹¹⁴

Estimates from 2009-2010 suggest that the average (mean) superannuation payouts for women are just over half (57 per cent) of those of men: \$198,000 for men compared to \$112,600 for women (based on superannuation balances for the age group 60-64 years).¹¹⁵ However, the average measures do not reveal the significant proportion of women who have little or no superannuation. It is estimated that 50 per cent of women approaching retirement (aged 55-59 years) have superannuation balances of \$25,000 or less.¹¹⁶

In addition, in 2010-11 just under half of retired women in Australia had made no contributions to a superannuation scheme compared to 25 per cent of men.¹¹⁷ The superannuation gender gap has led to many women, particularly single women, needing to rely predominantly upon the age pension for their retirement income.

Data from the ABS 2007 *Survey of Employment Arrangements, Retirement and Superannuation* indicate that only 79 per cent of carers aged 35-44 years had superannuation coverage compared with 88 per cent of non-carers in this age group.¹¹⁸ In addition, carers in the age group 35-54 had lower median superannuation balances than non-carers in this age group.¹¹⁹

(d) Future data collection and research

The research to date provides clear evidence of gender differences in superannuation balances. Future research could seek more information on the historical experiences of caring for men and women to understand the impact of unpaid care on the gender gap in retirement incomes. There are also few estimates of the costs of caring for episodic and transitional periods of care for people with disability, frailty or illness. In addition, Australia lacks comprehensive historical data on the paid work and unpaid care trajectories of women.

(e) Next steps

It would be useful to undertake modelling of the impact of the full spectrum of unpaid care on women's retirement incomes and savings. The modelling could also be informed by collecting individual care and work histories.





Chapter 5: Legislation

Recognising caring responsibilities through anti-discrimination provision and other key legislation may provide mechanisms for supporting unpaid carers, depending on the nature and extent of the provisions contained in the legislation.

5.1 Anti-discrimination legislation

(a) Australian context

Provisions aiming to prohibit discrimination against persons with unpaid caring roles may be found within the terms of anti-discrimination legislations, such as the *Disability Discrimination Act 1992* (Cth) (DDA) and the *Sex Discrimination Act 1984* (Cth) (SDA).

The *Disability Discrimination Act* (1992) provides for protection against discrimination in relation to a person who has an associate with a disability.¹²⁰ The definition of associate includes: 'a spouse, another person living with the person on a genuine domestic basis, a relative, a carer or another person who is in a business sporting or recreational relationship with the person'.¹²¹ This definition of carer does not distinguish between paid and unpaid carers, but encompasses unpaid carers as defined within this report. The definitions are broad enough to capture discrimination against people who are caring for relatives with a disability, as 'relative' in this sense includes a person related 'by blood, marriage, affinity or adoption'.¹²² The Act also provides for protection against discrimination in relation to a person with disability 'to having a carer, assistant, assistance animal or disability aid in the same way as it applies in relation to having a disability'.¹²³

Since the 1970s and the mid 1980s, the category of sex was enacted into discrimination legislation at both the State and Federal levels respectively.¹²⁴ More recently provisions have been passed relating to discrimination with respect to employees who are pregnant or may become pregnant and those with family responsibilities.¹²⁵ In 2011 the *Sex and Age Discrimination Legislation Amendment Act 2011* (Cth) extended direct discrimination of employees, both male and females, to include all facets of employment due to family responsibilities,¹²⁶ but it did not include indirect discrimination.¹²⁷

Overall the scope of protection for state and territory and also Commonwealth sex discrimination legislation varies with respect to family and care responsibilities, and contain different wording of attributes and concepts of discrimination that is unlawful.¹²⁸ As Smith notes, variations in anti-discrimination laws at the Commonwealth and state and territory levels means that the level of protection a worker has depends on where he or she lives,¹²⁹ or whether they are employed by federal or State/territory governments.

Currently the Commonwealth *Sex Discrimination Act 1984* offers carers only limited protection, as it is based only on the concept of an 'immediate family member'.¹³⁰ As noted by the Commission, there is a need to extend discrimination on the grounds of family responsibilities to include carer responsibilities. The Commission's submission to the inquiry into the Sex and Age Discrimination Legislation Amendment Bill 2010 recommended including: making direct and indirect family and carer responsibilities discrimination unlawful, extending the definition of family responsibilities to include family and carer responsibilities which is more inclusive; a positive duty to reasonably accommodate the needs of workers with care and family responsibilities, introduce a positive obligation, which is enforceable, on employers to reasonably accommodate the needs of workers with care and family responsibilities.¹³¹ These recommendations reiterated recommendations made by the Commission in their submission to the Senate Legal and Constitutional Affairs Committee on the inquiry into the effectiveness of the SDA in eliminating discrimination and promoting gender equality in 2008.¹³²

Similar recommendations for change have been made by relevant Senate committees. In 2011 the report by the Legal and Constitutional Affairs Legislation Committee on the provision of the Sex and Age Discrimination Legislation Amendment Bill 2010 (Bill) 'suggested that amendments be made to the Bill to implement some or most of the recommendations of the Senate Report¹³³ including... imposing a positive duty on employers to reasonably accommodate requests by employees for flexible working arrangements, such as family or carer responsibilities, modelled on section 14A of the *Equal Opportunity Act 1995* (Vic) (Recommendation 14)'.¹³⁴ Since the publication of this report the Victorian legislation has been replaced with the *Equal Opportunity Act 2010* (Vic).¹³⁵

The Exposure Draft Human Rights and Anti-Discrimination Discrimination Bill 2012 makes discrimination on the ground of family responsibilities unlawful only in connection with work and work related areas and does not expressly cover discrimination on the grounds of caring responsibilities. The Commission has recommended that the Bill cover discrimination on the basis of family responsibilities in all areas of public life and that discrimination on the basis of carer responsibilities be expressly covered.¹³⁶

Despite legislated anti-discrimination provisions in place, discrimination against women for being pregnant and their caring responsibilities is still an issue. For example, in 2011-2012, 15 per cent of all complaints related to the Sex Discrimination Act received by the Australian Human Rights Commission were on the grounds of pregnancy and 6 per cent were on the grounds of family responsibilities.¹³⁷ Based on the area of the complaint, 85 per cent of all complaints were in relation to employment.¹³⁸

Women continue to face discrimination at the time of returning to the workforce after the end of their parental leave. It is often difficult for women to find part-time work and work that is at a similar level to that they were doing before going on parental leave.¹³⁹ Many women settle for paid work that is below their skill level or is of an insecure nature, such as a casual work, as this is the only type of work that provides them with the flexibility to attend to their parental responsibilities.¹⁴⁰

In December 1998 the Australian Human Rights Commission commenced the Pregnancy and Work Inquiry. The terms of reference included examining, regarding pregnancy at work, the policies and practices of employers in relation to recruitment, the rights and responsibilities of employers and employees, and developing guidelines for employers and employees.

The final report of the Inquiry entitled *Pregnant and Productive: it's a right not a privilege to work while pregnant* found that there was a need for clear practical and educative guidelines to assist employers and employees. The report recommended the immediate need for education, guidance and awareness raising programs around pregnancy and work.¹⁴¹ The guidelines were published by the Commission in 2001.¹⁴²

Strengthening anti-discrimination laws to encompass all family and carer responsibilities may lead to broader social benefits. The benefits to society are the greater gender equality, greater equity for unpaid carers and enhanced protection from discrimination.

(b) Next steps

It has been over a decade since the particular issue of pregnancy at work has been examined in great detail. In this time the legislative and regulatory landscape in relation to employment, anti-discrimination, parental leave, and human rights has seen considerable change. However, women still face discrimination in employment when they become pregnant and also when they return to work after being on parental leave.

It may be timely for the Commission to conduct a new inquiry to assess the contemporary issues regarding pregnancy and returning to work after parental leave.

Option for reform 1

Extend the prohibition of discrimination on the ground of family responsibilities to include carer responsibilities in anti-discrimination legislation.

5.2 Carer recognition acts

(a) Australian context

The Commonwealth *Carer Recognition Act 2010* (Cth) was introduced in 2010. This legislation together with the National Carer Strategy, for which an implementation plan and action plan have been released, forms part of the National Carer Recognition Framework.¹⁴³ The Act aims to 'increase recognition and awareness of carers and to acknowledge the valuable contribution they make to society'¹⁴⁴ However, the Act does not create any legally enforceable obligations. Most Australian States and Territories, except for Tasmania and the Australian Capital Territory (ACT), have also introduced specific legislation recognising the contribution and role of carers.¹⁴⁵ These acts, similar to the national legislation, do not contain enforceable obligations. Policy to support carers has been outlined in the National Carers Strategy and is detailed further in the Implementation Plan for the strategy, released in 2012.¹⁴⁶

Recognition for carers may be supported through other mechanisms linked to the National Carer Recognition Framework. The report of the *Inquiry into Better Support for Carers* recommended that the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) 'investigate the benefits of introducing a national Carer Card for recipients of Carer Payment and Carer Allowance in order to verify the relationship between a primary carer and care receiver'.¹⁴⁷ The card was for use with government agencies, health professionals or other service providers, and provides concessions or discounts to holders.¹⁴⁸ The Government response to this inquiry indicated that it would undertake this action.¹⁴⁹ Recognition of carers may be enhanced with the introduction of a national Carer Card. It may be timely to consider whether a Carer Card could be used for a range of other purposes and extended to carers who do not qualify for the Carer Payment or Carer Allowance.

(b) International examples

In the UK the *Carers and Disabled Children Act 2000* (England and Wales) provides carers with a right to request an assessment of their capacity to provide support. The *Carers (Equal Opportunities) Act 2004* (England and Wales), extends these rights to provide the right to receive an assessment and mandatory obligations for councils to provide services and to take a carer's wish to continue in, or re-enter, paid work into account.¹⁵⁰ Sweden also has a system of assessing carers' needs and referring them to appropriate services.¹⁵¹

Greater recognition of caring responsibilities through legislation is an important mechanism for supporting unpaid carers. Legislation should be strengthened to recognise unpaid caring responsibilities and contain enforceable obligations.

Option for reform 2

- a. Create legally enforceable obligations to a carer assessment, modelled on the UK legislation, under the *Carer Recognition Act 2010* (Cth).
- b. Introduce a Carer Card, which identifies carers who are assessed as having significant caring responsibilities, and can be used to access services and entitlements.





Chapter 6:

Employment laws and regulations

Enhancing the capacity of parents and carers to remain in and re-enter employment is a key element which will contribute to their lifetime earnings and subsequent financial security in older age. Employment laws and regulations that may assist to accommodate workers' caring responsibilities and workforce attachment are outlined below.

6.1 Flexible work – Right to request

Right to request legislation provides parents and carers with options to flexibly manage employment and caring responsibilities. It therefore has the potential to improve workforce attachment of carers and reduce the risk of workforce drop out among new parents or at the onset of caring responsibilities. For the most part, right to request legislation has been introduced in response to the needs of parents returning from periods of parental leave. As a result, the legislation has been considerably slower to recognise the needs of other forms of carers. However, some countries are beginning to extend the right to request provisions to carers of people with a disability or long term illness.

(a) Australian context

The *Fair Work Act 2009* (Cth) established a new national workplace relations system. The National Employment Standards (NES) contained in the Act consist of ten minimum entitlements for employees, including the right to request flexible working arrangements.¹⁵² An employed parent, who is responsible for the care of a child under school age, or aged under 18 years with disability, can request a change in their working arrangements. A person caring for someone with a disability aged 18 years or over is not entitled to the provision. Requests to work flexibly could include reduced work hours, changes to start and finishing time, changes in patterns of work, or changes in work location. Only employees who have worked continuously for 12 months or more with their employer are eligible to request changes. Casual employees may only make requests if they have been employed regularly for 12 months and if there is a reasonable expectation that they will continue to be employed on a regular basis. Employers can refuse requests based on 'reasonable business grounds'.¹⁵³ Fair Work Australia has the power, through the Act, to handle disputes as to whether the employer has 'reasonable business grounds'.¹⁵⁴ However, there is no right of appeal and a review of the decision is only possible if an employer consents. The 'right to request' is not enforceable¹⁵⁵ and no definition of what constitutes 'reasonable business grounds' is provided.

Despite the introduction of this legislation in January 2010, a survey in March 2012, found that 66 per cent of male employees and 77 per cent of female employees with pre-school aged children were not aware of the new right to request flexible work.¹⁵⁶ Women employees are more likely to request flexible work (24.2 per cent) than men (17.3 per cent) and gender differences in requesting changes to working arrangements are particularly stark among parents of pre-school aged children (43 per cent of women compared to 19.8 per cent of men).¹⁵⁷ However, the rate of requesting a change in working arrangements had declined slightly for women overall between 2009 and 2012, possibly suggesting that legislative change may not be sufficient to encourage behavioural change in some workplaces.¹⁵⁸ Overall, the majority (61.9 per cent) of requests for flexible work in Australia are fully approved, although the approval rate differs for men and women. In 2012, 9.8 per cent of requests for flexible work arrangements by women and 17.4 per cent of requests by men were declined.¹⁵⁹ As noted above, lack of access to reduced hours of work may lead to women changing occupations and to more insecure work.¹⁶⁰

Recent developments have indicated greater recognition for unpaid carers and support for expanding the availability of the right to request flexible working arrangements to a range of caring responsibilities. The final report of the Fair Work Act Review, released in

August 2012, recommended amending s.65 of the Act 'to extend the right to request flexible working arrangements to a wider range of caring and other circumstances, and to require that the employee and the employer hold a meeting to discuss the request, unless the employer has agreed to the request'.¹⁶¹ However, the review did not make recommendations to establish an appeals mechanism nor to define 'reasonable business grounds' in legislation.

(b) International examples

A number of countries, such as Sweden, the UK, and New Zealand have extended the right to request from parents to other groups of carers. In some countries, such as the Netherlands, entitlement is even broader with the right to request available to all groups of employees.¹⁶² In the Netherlands, employees are not required to provide a reason, 'mainstreaming' the needs of carers with those who have other reasons for requesting a change in hours.¹⁶³

A number of countries place a greater duty on employers to accommodate a request for flexible working arrangements. In the Netherlands, employers may refuse the request if there are reasons based on the 'serious interests of the enterprise or service' such as, in the case of reduced hours, if the request would create serious problems in safety, in scheduling, or if the hours are not restaffed and in the case of extra hours, if this creates serious financial problems for the organisation, if the work does not exist, or if the financial or physical capacity is not there.¹⁶⁴ Several countries also have a system of appeal. In the Netherlands and Germany, the case may be examined by a court if the outcome is considered by one party to be unsatisfactory.¹⁶⁵

Evidence from the UK suggests that the majority (90 per cent) of requests for flexible work have been granted by employers.¹⁶⁶ Research in the UK also reveals that flexible work options are likely to increase men's participation in child care.¹⁶⁷ Currently flexible work options in Australia are only available to a limited group of parents and carers. Extending the right to request to all unpaid carers could support the needs of unpaid carers.

The benefit to society is in improving opportunities for unpaid carers to remain in or enter paid work and to facilitate genuine choices for men and women to combine unpaid care and paid work and to transition more smoothly between them at different times in their lives.

Option for reform 3

Amend the *Fair Work Act 2009* (Cth) to:

- a. Extend the right to request flexible work arrangements to include parents of children of all ages and to encompass all forms of family and carer responsibilities such as disability and elder care.
- b. Remove the eligibility requirements that restrict the categories of employees who can make a request for flexible working arrangements.
- c. Impose a positive duty on employers to reasonably accommodate a request for flexible working arrangements.
- d. Establish a procedural appeals process through Fair Work Australia for right to request flexible work decisions.

6.2 Gender pay equity

(a) Australian context

Enhancing provisions to improve pay equity may assist in reducing the gender gap in life-time earnings. The *Fair Work Act 2009* (Cth) contains several provisions that contribute to advancing pay equity, including strengthening provisions to make equal remuneration orders for work of equal or comparable value. A recent example of the potential of this Act is the successful application made by the Australian Services Union regarding employees in the Social and Community Services (SACS) industry resulting in pay increases in the SACS Modern Award which benefited a largely feminised workforce.¹⁶⁸ In its submission to the *Post Implementation Review of the Fair Work Act*, the Commission recommended 'that there is no requirement for a male comparator to be identified in order to make an equal remuneration order'.¹⁶⁹ The report of the evaluation of the Fair Work legislation, *Towards more productive and equitable workplace*, noted this submission but made no recommendation to amend the existing provisions.¹⁷⁰

(b) International examples

The principle of equal pay was set out in a European Directive on Equal Pay in 1975 (75/117/EEC), replaced by the European Directive on Equal Treatment in 2006 (76/207/EEC) focussing on gender in 'matters of employment and occupation'. All EU countries have responded by translating the Directive into equal pay legislation.¹⁷¹

6.3 Part-time work

(a) Australian context

While the promotion of opportunities to combine part-time work and care is important, it can lead to inequitable outcomes for women both in their labour market attachment and in their retirement incomes. Women in part-time work can experience significant disadvantage in pay and opportunities for professional development and progression.¹⁷² Australia has ratified the International Labour Organisation (ILO) *Part-time Work Convention, 1994* (No.175) which requires that part-time workers receive pro-rata equal remuneration and the same protection as full-time workers.

(b) International examples

In many countries, additional measures for ensuring that part-time work is a real option have included legislation that treats part-time workers equally to 'comparable full-time workers' by providing pay parity and equal access to 'occupational benefits, training and promotion opportunities, and bargaining rights'.¹⁷³ In the UK, this was done via the *Part-time Workers (Prevention of Less Favourable Treatment) Regulations 2000*.

(c) Next steps

To ensure that part-time work status does not disadvantage women in relation to their careers and earnings, it is important that opportunities are identified to address any disadvantage part-time employees experience compared to full-time workers. Australia's ratification of the ILO *Part-time Work Convention, 1994* in 2011 was an important symbolic step in recognising the value and rights of part-time workers. The Australian government needs to ensure the Convention is implemented, including promoting non-legislated rights and provisions, such as career education and training opportunities.





Chapter 7:

Leave arrangements

7.1 Introduction

Access to time to undertake care, both paid and unpaid, is essential to provide parents and carers with choices about the extent of care they undertake, while providing job protection to facilitate re-entry into the workforce. Expanding and strengthening leave provisions for all unpaid carers can support carers to maintain their labour market attachment while also undertaking their care responsibilities.

7.2 Parental leave

Parental leave arrangements have several goals: to provide time for parents to care for young children, to improve women's labour market attachment, and in some countries, to increase birth rates. Leave schemes can also contribute to improved lifetime earnings by improving workforce attachment and creating opportunities for career progression by allowing women to remain with the same employer at the same level.¹⁷⁴ By improving lifetime earnings, parental leave schemes also contribute to a secondary goal of improving the adequacy of earnings-related retirement pension balances.

(a) Australian context

Since January 2011 the Paid Parental Leave (PPL) scheme provides 18 weeks of government funded pay for parental leave at the rate of the National Minimum Wage which at 1 July 2012 was \$606.50 per week before tax.¹⁷⁵ This is usually for the mother of the child but may also be the partner.¹⁷⁶ In 2012, the existing PPL scheme was expanded to include Dad and Partner pay. From January 2013, it will provide eligible working partners with two weeks Dad and Partner pay at the rate of the National Minimum Wage.¹⁷⁷

During the debates about the introduction of PPL, a number of parties recommended a period of 26 weeks. For example, a number of submissions in response to the Human Rights and Equal Opportunity Commission's (HREOC) interim paper, *Valuing Parenthood: Options for paid maternity leave*, supported this recommendation on the grounds that it enhanced mothers' and babies' health and wellbeing.¹⁷⁸ There would be value in the course of forthcoming reviews and evaluations of Australia's national paid parental leave scheme for considering the value of extending the transferable period of paid parental leave pay to 26 weeks.

Other submissions noted the possibility of continuing superannuation benefit during paid parental leave period.¹⁷⁹ The current PPL Scheme has no provisions for superannuation payments, although some employees may have access to this benefit through their employer.¹⁸⁰

Those people not receiving the government's parental leave pay may be entitled to the government's baby bonus. The baby bonus is an income tested payment that aims to help with the costs of a new baby or adopted child and is paid following the birth or adoption of a child.¹⁸¹ This payment therefore covers many women who are not entitled to the government parental leave pay, provided they meet the income test. As of July 2013, the baby bonus for a second child will be reduced from \$5000 to \$3000.¹⁸²

Some employers have developed entitlements beyond the government provided scheme. In Australia in 2012, Insurance Australia Group Limited (IAG) introduced a 'welcome back payment' for employees returning from parental leave of six weeks of double pay, once they return to work, with the stated aim of retaining employees and reinstating women's pre-leave salaries.¹⁸³

(b) International examples

The duration of the leave period has an important influence on whether it is successful in improving women's workforce participation and reducing the impact on earnings. If the leave period is too short (like the one in the US which has no paid leave, only 24 weeks job protection), the outcomes are weakened because many women are forced out of the labour market.¹⁸⁴ A number of countries have a paid parental leave period of longer than 18 weeks. International evidence suggests that approximately six months paid leave per person is the period of leave that 'is advantageous, but not harmful, to women's labour-force attachment and longer-term employment trajectories'.¹⁸⁵ While the international momentum has been moving towards a parental rather than maternity leave model, often the outcomes are not gender equitable and women take a far greater proportion of parental leave periods.¹⁸⁶ In response, several countries such as Iceland, Norway, Sweden and Germany have introduced a non-transferable period of 'daddy' or partner leave. The period of the leave is reserved for the partner and the right of the couple to that period of leave is lost if the partner does not take it. This is in most cases a period of several months (i.e. three months in both Norway and Iceland). In some countries, the 'shareable' period of leave is increased if the partner takes a portion (e.g. Denmark, Norway and Sweden).¹⁸⁷

Research has suggested that partner quotas increase partners' participation in care and also put male employees in a much stronger position when negotiating parental leave with their employer.¹⁸⁸ Notably, partner quotas have in most cases been introduced in what O'Brien and Shemilt describe as a 'gender collaborative context' in which the partner quota is added to the existing leave arrangements rather than making it a part of the existing arrangements dependent on father take-up.¹⁸⁹ For example, in Sweden there is a partner quota of two months and there are bonus parental leave payments to parents who split their parental leave period equally.¹⁹⁰ International best practice would thus suggest that extending father/partner quotas (on a use it or lose it basis), in addition to the provision of sufficient paid parental leave which may be shared by either partners would be beneficial for greater gender equity.

There would be value in the course of forthcoming reviews and evaluations of Australia's national paid parental leave scheme for considering the value of extending the non-transferable father/partner quota in the paid parental leave scheme to six weeks.

(c) Next steps

Consideration needs to be given to extending the period of paid parental leave pay to 26 weeks and extending the non-transferable father/partner quota in the paid to six weeks under the parental leave scheme.

See also option for reform 10 for a Productivity Commission Inquiry on aspects of valuing unpaid caring work.

7.3 Carer leave

Carer leave and leave for other family responsibilities aims to improve the capacity of parents and carers to undertake their caring and labour market responsibilities. In so doing, it can improve the labour market attachment of parents and carers and reduce the likelihood that parents and carers are forced to drop out of the labour market.¹⁹¹ Depending on the nature of the leave, it may also reduce the impact of time spent caring on an individual's earnings.

(a) Australian context

Under the National Employment Standards contained in the *Fair Work Act 2009* (Cth), all employees, including parents and carers are entitled to a minimum of ten days of paid personal/carer's leave, unless they are casual employees. Personal/carer's leave can be taken to provide support for illness, injury, or an emergency for an immediate family or household member. However, care relationships in wider kinship networks are not recognised in the carer's leave provisions. Also many working carers may not be eligible for carer's leave due to the requirement that they must be employed continuously for 12 months with the same employer, as a high proportion of women occupy casual and precarious employment due to their caring responsibilities.¹⁹² Employees supporting people with high levels of need may use all their personal/carer's leave entitlement to care for others.¹⁹³ An additional period of dedicated paid carer's leave, available for the full range of care relationships, would better provide for the overall leave entitlement for carers.¹⁹⁴

Employees, including those casually employed, can access two days of unpaid carer's leave each time a member of their immediate family or household needs care or support due to an injury, illness or an emergency. This leave must only be taken when all paid leave has been used, except for casuals, who are not entitled to paid leave.¹⁹⁵ An employee, including casuals, can take two days of compassionate leave for an immediate family member or a member of their household who has a life-threatening illness or injury or who has died. Employees do not have access to longer leave periods for palliative care. Access to, and use of, carer's leave is important to support gender equality in unpaid caring responsibilities. In 2007, paid carer's leave was available to both parents in around one-third of couple families, while neither parent had access in around 12 per cent of couples.¹⁹⁶ Just over one-third of mothers and nearly one quarter of fathers had used unpaid leave to provide care.¹⁹⁷

(b) International examples

Internationally, several countries, such as Poland and Norway provide longer than 10 days paid carer's leave. For example Norway provides ten days, with a possible additional 20 days nursing care leave. Several countries (including Denmark and Sweden) provide palliative care leave,¹⁹⁸ which recognises this as an important form of care need that cannot be accommodated in shorter periods of leave (i.e. 10 days a year). The funding of the paid care leave varies across countries between the state and the employer. In Denmark, employers are compelled to pay full wages for the duration of the leave and the government reimburses the employer a significant proportion of the cost.¹⁹⁹

Belgium has the longest period of paid carer's leave. In Belgium, all employees are entitled to leave work for up to a year and receive a state-funded flat rate payment while on leave.²⁰⁰ The aim is to improve 'work-life balance', to keep people with other responsibilities and needs in the workforce, and to prevent women from dropping out of the labour market due to family circumstances. It also offers a 'legitimate framework' for men to take leave to care for children.²⁰¹ In the Belgian system, this leave entitlement is called the 'career break' in the public sector and 'time credit' in the private sector.

Option for reform 4

Amend the National Employment Standards to:

- a. Provide for carer's leave, separate from personal leave, specifically for carer responsibilities only.
- b. Extend eligibility of access to carer's leave to cover all employees.
- c. Provide for job-protected unpaid leave for palliative care.
- d. Extend the definition of caring responsibilities in carer's leave to include kinship relationships.

See also option for reform 10 for a Productivity Commission Inquiry into aspects of valuing unpaid caring work.





Chapter 8:

Income support

There are three income support payments specifically for carers in Australia: Carer Payment, Carer Allowance, and Carer Supplement. However, carers may also receive other forms of income support such as the age pension or Disability Support Pension.

8.1 Carer Payment

(a) Australian context

Carer Payment (adult) and Carer Payment (child) provide income support for those with intensive caring responsibilities that affect their participation in paid work. It is provided to a person providing constant care for someone with a disability, severe medical condition (including a child) or who is frail or aged. In order to be eligible, the carer must be providing constant care in the home of the person they care for (and the care recipient must also be over the age of 16). The payment is means-tested on the income and assets of the carer and, in the case of Carer Payment (adult), the recipient of care.²⁰² Carer payment can only be received by the primary carer and does not recognise care provided by an extended network of support.

Recipients of the Carer Payment are only permitted up to 25 hours of education, training or employment per week.²⁰³ The limited number of hours recipients' can participate in paid employment alongside the means test may act as a disincentive to combine paid work and care responsibilities.²⁰⁴ The work test on the Carer Payment does not allow for flexibility in the limits on hours worked, which many carers require. The Government's Pension Review recommended that eligibility for the Carer Payment be linked more closely with the level of care provision rather than the use of a cap on the number of hours worked.²⁰⁵

After the cessation of care provision due to the death of the person in receipt of support, a carer may receive an income support payment for a further 14 weeks.²⁰⁶ Although this provides carers with a transition period it is possible that they may find it difficult to re-enter the labour market if they have been out of the workforce for a considerable period of time.²⁰⁷ Research shows that the negative impact of caring on employment does not cease once caring ends.²⁰⁸

(b) International examples

International evidence suggests that hinging eligibility for an income support payment (such as Carer Payment) on a strict means test, and limits on work hours, presupposes that the carer is participating in care full-time and is not in, or only very marginally attached to, the workforce.²⁰⁹ For example, in the UK, in order to be eligible, individuals must be providing care to a person with a severe disability for at least 35 hours per week and weekly earnings from paid work must stay below a specified amount. This effectively limits the payment to those with very low earnings or those who have left the workforce.²¹⁰ As a result, these payments have been criticised for creating a disincentive to participate in the workforce.²¹¹ International research reveals that the strict limits on earnings attached to income support payments for carers can push carers into 'downgrading' from their professional employment into low paid or menial work.²¹² The inflexible earnings limits can create difficulties for carers in juggling casual hours to ensure that they are below the limit and make them fearful of accepting offers of additional shifts, even if they would like and are able to do them.²¹³

(c) Next steps

Consideration needs to be given to extending the length of the transition period for continuation of Carer Payment after cessation of care responsibilities, for example bereavement or entry into residential care of a recipient of care. The current 14 week transition period is inadequate for many carers to re-engage with the workforce and to re-adjust to life with no or less caring responsibilities.

In addition, there needs to be recognition of shared care of more than one carer for each care recipient in the eligibility for Carer Payment.

Option for reform 5

The federal Department of Families, Housing, Communities and Indigenous Affairs (FaHCSIA):

- a. Review the number of hours allowed for work, education, or training while on the Carer Payment to allow for greater flexibility.
- b. Review income testing arrangements to better support combinations of employment, care-giving and carer-directed income support.

8.2 Carer Allowance and other payments

Carer Allowance is a supplementary payment for carers who provide daily care and attention to a person with a severe disability or medical condition or who is frail or aged. The payment may be paid on top of other government income support payments, including the Carer Payment. To be eligible, the carer may be providing care in their own home or in the home of the care recipient. The payment is not means-tested.

Eligibility hinges on strict requirements concerning the recipient's level of care need, with the carer required to provide a health professional's report on the condition of the person receiving care and consequent level of care required. Recipients of the Carer Allowance provide care for people with a wide range of medical conditions, the four largest of which include: mental/behavioural (28 per cent), circulation (23 per cent), musculo-skeletal (23 per cent), and nervous system (18 per cent) conditions,²¹⁴ which suggests a range of costs associated with the condition of the person receiving care. However, there is no flexibility in the amount of the Carer Allowance to accommodate those carers for whom the care expenses are considerably higher. In addition, some have suggested that the Carer Allowance is too low, and should be increased.²¹⁵

The Carer Supplement is paid to recipients of the Carer Payment or Carer Allowance to assist with the costs of caring for a person with disability or medical condition. The Carer Adjustment Payment is a one-off non-taxable payment to assist families with additional care needs for children aged between 0 to 6 years old who have had a sudden or severe illness or accident.²¹⁶

The benefits of providing adequate and flexible income support payments to carers lie in protecting the financial wellbeing of unpaid carers while undertaking their caring roles, and at the same time improving their opportunities to contribute to the paid workforce, and to build their skills through education and training.

(a) Next steps

Consideration needs to be given to increasing the Carer Allowance for conditions that increase the costs associated with disability and illness.



Chapter 9: Services

In Australia, access to early childhood education and care services assist parents to combine paid work and unpaid care. A number of policies, income support payments and rebates assist working parents to access and cover the costs of early childhood education and care. In contrast, services for carers of people with disability, chronic illness and frailty focus on supporting them in their caring role and providing short-term relief rather than facilitating combining care and paid work.

9.1 Paid care workers

Despite problems associated with access, flexibility, appropriateness and affordability, care services are essential to provide parents and carers with crucial support. However, working conditions within the paid care sector are characterised by part-time and casual positions, shift work, low wages and little or no vocational training.²¹⁷ Women are predominately employed in this sector and this exposes them to an increased risk of poverty over their life course.²¹⁸ Reforms within the aged and health care sectors should not be to the detriment of paid care workers and their employment conditions, but aim to enhance and protect the employment conditions and pay of paid care workers in order to supply high quality support.

Option for reform 6

Enhance and protect the employment conditions and pay of paid care workers, including services provided through the NDIS, the Aged Care Reform Package, and the early childhood education and care sector.

9.2 Services for carers

The availability of appropriate and affordable formal care services are vital to assist people with disability, chronic illness and frailty to remain at home and to support carers in their caring role.

(a) Health care system

There are a number of government-funded services that provide temporary or ongoing support for carers and those in need of support; however, research shows that overall carer's service use is low.²¹⁹ Services are not specially designed to assist carers to participate in employment, rather to provide temporary or short-term relief from the demands of caring.²²⁰ Access to services is predicated on being identified as a carer and being assessed as requiring support. Often carers do not self-identify as a carer because they perceive the support they provide as an extension of an existing relationship.²²¹ Many services within the health system often do not have effective strategies to identify carers, particularly young carers.²²²

(b) National Disability Insurance Scheme

The National Disability Insurance Scheme (NDIS) will focus on providing long term high quality support to those with a 'permanent disability that significantly affects their communication, mobility, self-care or self-management'.²²³ The needs of each individual and their carer would be assessed by an NDIS appointed assessor and an individualised support package developed accordingly. The services required in each case would be provided by a range of not-for profit and for-profit private and state and territory government service providers.²²⁴ One of the core aims of the NDIS is to provide better support to families providing care.²²⁵ If this aim is to be

realised, carers' needs, their capacity to provide support and their ability to meet other responsibilities such as paid employment, must be assessed and accessible and appropriate services provided. It is vital that carers' needs are taken into account at all stages of the development and implementation of the NDIS.

(c) Aged care reform

The *Living Longer, Living Better–Aged Care Reform Package* aims to 'build a responsive, integrated, consumer-centred and sustainable aged care system, designed to meet the challenges of population ageing and ensure ongoing innovation and improvement'.²²⁶ Support to assist people to remain living at home includes an integrated Home Support Program; an increased the number of Home Care Packages with new levels of support; and increased options through consumer directed choice. In the package, support to carers will be increased through greater access to respite services, increased access to counselling services, and increased choice and flexibility in decisions about the type and frequency of service delivery.²²⁷ Initiatives to improve assessment processes in the aged care system are included in the package.

However, these reforms will not address barriers to carers' participation in employment, and access to future retirement incomes, unless assessment processes recognise and identify carers and focus on their specific needs within all areas of the health and aged care systems.

Option for reform 7

Enhance mechanisms to recognise carers and their needs, provide for carer assessments, and ensure adequate support services for carers in:

- a. The development and implementation of the NDIS.**
- b. The implementation of the Aged Care Reform Package.**
- c. The health care system.**

9.3 Services for parents

In Australia, access to early childhood education and care services can assist parents to combine paid work and unpaid care.

(a) Early childhood education and care

Unlike some other countries that have a legal right to public early childhood education and services, such as Denmark and Norway, Australia has no formal right to an early childhood and care place. Centre-based early childhood education and care is provided by a collection of private for-profit and not-for-profit providers and the government is not a provider. A number of subsidies to reduce the costs of child care are available in Australia such as the Child Care Benefit and the Child Care Rebate (for details see Technical Paper E).

In Australia the National Quality Framework for Early Childhood Education and Care established in 2012 by the Australian Government aims to improve quality standards in early childhood and care services including most long day care, family day care, preschool and outside of school hours care. It establishes a national legislative framework; a National Quality Standard, a rating and assessment process; and the Australian Children's Education and Care Quality Authority. This information may potentially help parents to identify high quality early childhood education and care services.

The Australian Government has also allocated funding to enable families to better meet the costs of early childhood education and care and to increase the supply of early childhood education and care. From 2012-2013 to 2015-2016 the Government has committed \$19.9 billion to assist 800,000 families per year with the cost of early childhood education and care, through the Child Care Benefit and the Child Care Rebate. Since July 2008, the Government increased the Child Care Rebate from 30 to 50 per cent of out-of-pocket child care costs, to a maximum of \$7,500 per child per year. In terms of supply of early childhood education and care, there was an increase of 500 services in 2010-2011. The Government also announced a 17 per cent increase for In-Home-Care Places and the establishment of 38 Early Learning and Care Centres across Australia and 38 Children and Family Centres, targeted for Aboriginal and Torres Strait Islander children. The Government has also committed to providing universal access to Early Childhood Education for all children, for 15 hours a week, for 40 weeks a year, in the year before full-time schooling.²²⁸

Research has shown that parents experience a number of difficulties accessing early childhood education and care. Data from the *ABS Childhood Education and Care Survey 2008*, shows that in 2005 the main reason for not accessing or organising additional early childhood education and care services was due to lack of available places for around a third of parents and, for around 16 per cent cost was the main barrier. In 2008, although the data is not comparable, costs were again one of the main reasons for just over one in five parents who did not access or organise additional early childhood education and care.²²⁹ Difficulties associated with the costs of

early childhood education and care were also found in the analysis of HILDA data over time. In addition, in 2009 over half the couple households, and just over 60 per cent of lone-parent households, experienced difficulties with the availability of early childhood education and care. Although couple households experienced difficulties with the quality of early childhood education and care, this was more common in lone-parent households.²³⁰ Local difficulties with early childhood education and care, in terms of availability, quality and cost, have been found to be associated with lower hours and reduced participation of women in employment.²³¹

The difficulties associated with attempting to combine employment and care for parents can be exacerbated by a lack of high quality, accessible and affordable services, which are flexible and designed to meet the needs of working parents, particularly those working in non-standard hours and in non-metropolitan areas.

Option for reform 8

The Productivity Commission conduct a whole-of-system review into the current provision, costs, taxation and financing of early childhood education and care services, with a view to achieving accessible, affordable, flexible, quality early childhood education, including care and outside of school hours care services and ensuring each child has an entitlement to attend.





Chapter 10:

Workplace initiatives and workplace culture

Increasing numbers of employees, predominantly women, also have care responsibilities. A number of workplace mechanisms have been developed and implemented to assist carers to combine care and paid work such as flexible working arrangements and leave entitlements. Initially these policies predominantly focused on reconciling parental care and employment, rather than the care of people with disability and frailty due to ageing. Many parents and carers work part-time to better manage their care responsibilities but this has a negative impact on their income levels over the lifecycle.²³²

10.1 Workplace initiatives

Both in Australia and internationally, a number of mechanisms have been implemented in businesses and corporations. Some organisations have implemented an integrated approach to supporting employees who have caring responsibilities. These include integrated carer strategies operating at all levels within the organisations; the provision of information and support to carers; access to flexible work schedules, reduced work hours, changes in work location; referral to services and direct services provision to support employed carers; and financial assistance such as cash payments for services and subsidies. Evaluative data on the effectiveness of these mechanisms is limited.²³³

Option for reform 9

Employers should consider implementing mechanisms to support unpaid carers in the workplace, such as:

- a. Adopting an integrated carer strategy.**
- b. Providing information and support services to carers.**
- c. Offering flexible hours and leave arrangements.**
- d. Undertaking job redesign to accommodate caring commitments.**
- e. Implementing employment re-entry strategies during and after caring responsibilities.**

10.2 Workplace culture

Research shows that access to flexibility in the workplace assists carers to remain in and re-enter employment.²³⁴ Workplace flexibility can also be beneficial for employers in terms of reducing staff turnover and increasing employee satisfaction and productivity.²³⁵ Supportive management and human resources departments are vital and influence the take up of workplace flexibility options by carers.²³⁶

If employed carers are to have real choices about participation in paid work they require decent work conditions.²³⁷ The organisation of work and the structure of job design based on the notion of an ideal worker, who is male and works full-time without other responsibilities, fails to take account of the lived experience of many workers, both women and men.²³⁸ Changes to workplace cultures are required to better support care and work responsibilities, including: realistic work hours; reasonable workloads; increased options for flexibility; and support for employed parents and carers.²³⁹

(a) Next steps

Changes to workplace culture, work organisation and working arrangements are necessary to support unpaid carers and for workplaces to retain their skills and knowledge. If unpaid carers can maintain their attachment, or re-enter the workforce, society will benefit by drawing on their skills, knowledge and experience, mitigating the negative impact on their labour force attachment and lifecycle earnings, and capitalising on Australia's investment in their human capital.



Chapter 11:

Retirement incomes and savings

11.1 Unpaid care and the Australian retirement income system

Throughout the twentieth century, Australia's retirement income system was dominated by the public age pension. Eligibility for the public pension in old age is dependent on an individual's means and on their age. The age pension is not linked to workforce participation throughout the lifecycle. As a result, taken alone, the public age pension creates relatively equal outcomes for women and men.

The introduction of compulsory superannuation in 1992 consolidated a direct link in Australia's retirement income system between income in old age and participation in paid work throughout the lifecycle. The superannuation system has no mechanism for recognising contributions made outside of the paid workforce during the working life. As a result, a period outside of paid work has a direct impact on income in old age. Many women (and some men) spend periods outside of the paid workforce providing care for children and people with disability, long term illness or frailty due to old age. Yet, the system of compulsory superannuation, which is tied to paid work, creates significant inequalities in the retirement incomes of those who provide care during their lives and those who do not. Currently, superannuation is treated concessionally for taxation purposes at the time of contribution, on the earnings in the fund and upon drawing down the superannuation if an individual delays withdrawing their superannuation until after the age of 60. In spite of several recent measures to the taxation treatment of superannuation, the system of taxation is highly regressive with higher income earners benefiting much more from the taxation concessions.²⁴⁰ Those with interrupted workforce histories due to caring responsibilities are therefore likely to benefit less from superannuation taxation concessions, widening inequalities. In 2012, a policy change, called the low income superannuation contribution, was introduced in an attempt to compensate to some extent for the disadvantage experienced by low income earners in the taxation of superannuation.²⁴¹ Currently, in Australia's superannuation system, carers are disadvantaged twice: their lifetime contributions are lower due to periods out of paid work or making lower contributions while in part-time work; and because their contributions are lower, they are less likely to benefit from the generous taxation concessions enjoyed by those making higher contributions.

11.2 International practices

While Australia has a non-contributory age pension that produces relatively equal outcomes in old age, a large number of countries (including almost all of Europe) have a social insurance based public pension that is based on contributions to social insurance throughout the lifecycle. In these public pension systems, a person's age pension is based on the number of years that an individual has participated in paid work and how much they have earned. Due to the link in many countries' public pension schemes between workforce participation and income in old age, many countries have been grappling with the problem of the effect of periods of caring in creating considerable inequalities in retirement incomes. The response in most countries with social insurance-based public pension schemes has been the introduction of a mechanism of crediting a person's public pension scheme while they are out of the workforce providing care. These are called carer credits. While these credits operate in public pension schemes, their usefulness as a measure for recognising periods of caring in the retirement income system make them an important mechanism to consider in the context of

Australia's superannuation system. While the Australian superannuation system differs from public social insurance pension scheme in many ways, including being fully funded, credits could operate in the system based on the same principle as they operate in social insurance-based public pension systems internationally.

'Carer credits' are a method of explicitly recognising in a country's pension system years spent providing unpaid care for a child or a family member with a disability, long term illness or frailty due to old age. In most instances, the state credits an individual's (notional) pension account while they are out of the workforce providing care. The value of the credits is sometimes linked to the earnings of the individual prior to leaving the workforce but in many cases is based on a proportion of a 'fictional' salary of the minimum wage or average earnings during periods of workforce absence. For example, if the system requires a pension contribution of 10 per cent of earnings, an individual may be treated *as if they earned* the minimum wage during periods of workforce absence and their account credited at the rate of 10 per cent of the minimum wage.

For parents, many countries (e.g. Sweden) link their carer credits to periods of paid (or unpaid) parental leave. Credits may also be available to new parents who are outside of work or who are not entitled to parental leave. In these cases, entitlement to credits tends to be 'piggybacked' onto entitlement for family payments or income support for parents (ie Canada, Finland and the UK).²⁴² In the UK, the carer credits for parents have recently been extended to grandparents who provide care for a grandchild under 12 for a minimum number of hours per week while their parents work.

Some carer credit schemes (e.g. Germany) permit and indeed encourage return to part-time work by continuing to provide carer credits when individuals return to work part-time. These credits can 'top up' an individual's pension contributions to the value of what they would be if the individual was working full-time. The international literature reveals that these are an effective mechanism for encouraging women's attachment to the workforce while continuing to provide care. This helps to alleviate poverty in the present (through additional income) and in the future (through improving retirement income).²⁴³ These measures address the important issue that it is not only periods out of the workforce that damage women's retirement incomes but also periods of working part-time while caring, as they accumulate less in their occupational or private pensions as a result.

A number of countries, such as the UK, Germany, Italy, Finland²⁴⁴ Luxembourg, the Czech Republic, Poland, Slovakia, Italy²⁴⁵ and Norway,²⁴⁶ are now extending their carer credits from parents to all carers. For carers, entitlement to a credit generally depends on the level of care need or the amount of care provided by the carer. In Germany, for example, the calculation of the credit is based on the number of hours that the person provides care per week and the 'level of nursing care dependency'.²⁴⁷ Some countries 'piggyback' entitlement to carer credits onto entitlement for a carer payments, i.e. recipients of carer payments are entitled to credits for the duration of the time that they are on the payment. However, this means that credits are only available to a small group of carers, making eligibility dependent on a carer performing a high number of hours of care or on carers having a very low income, or both. In the UK, the carer credits were until recently only available to recipients of carer payment. However, in recognition of the problems listed above, the credits were recently extended to people not in receipt of carer payment who were providing care for at least 20 hours per week. The carer must apply for the credits and entitlement can be established by a 'care certificate', a form that the carer fills out with details of their role and certification through the signatures of the recipient and a GP or one of several other health or social work professionals.

A very small number of countries are beginning to include carer credits in their private or occupational pension schemes. These credits are in their very early stages but suggest the recognition that credits are also both possible and necessary in private or occupational schemes in order to ameliorate inequalities in retirement incomes, particularly as private pensions become a more central part of retirement income systems around the world. The design of these systems of credits varies significantly. In several countries (i.e. Sweden, France and Poland) the state contributes to a person's private pension account while they are out of work after the birth of a child. In Sweden, the state takes over the employer contribution during certain periods of workforce absence.

11.3 Possible models for Australia

(a) Carer credits

Australia's superannuation system, by failing to recognise periods spent caring, creates unequal outcomes for carers whose periods spent caring result in lower retirement incomes. The major mechanism internationally for recognising periods spent caring is credits to a person's pension balance/account. There is not enough existing evidence in Australia to support a particular model of carer credits and to understand what the impacts of such a model would be in the Australian context, and the way in which it would interact with Australia's existing institutional contexts. It is suggested that the Productivity Commission, or a similar independent body, undertake research into the most appropriate method of introducing a system of carer credits in Australia's superannuation system for individuals with parental care responsibilities and carer responsibilities.

In particular, the Productivity Commission should consider two possible approaches to introducing carer credits in Australia:

1. Reforming the taxation treatment of superannuation before introducing a system of carer credits;
2. Introducing a system of carer credits into the superannuation system as it is currently organised.

Given the evidence above, Option 1 will have the greater equalising effects for carers, women, and more generally. As part of the inequality in the superannuation system derives from the current taxation treatment of superannuation, which disproportionately benefits higher income earners will full working lives,²⁴⁸ reforming these taxation arrangements would create more equal outcomes for carers and indeed other groups with low superannuation contributions over the lifecycle. This would create a fairer foundation on which to build in carer credits that specifically recognise periods spent caring.

The taxation treatment of superannuation could be reformed in a number of ways. One model is presented in the Commonwealth Government's *Review of Australia's Future Tax System* ('The Henry Review') (2010).²⁴⁹ This model proposes that the current system of taxing superannuation be replaced by a system of tax offsets. This model would create more equitable outcomes for all Australians with lower superannuation contributions, including carers. However currently, it does not address the specific needs of those outside of the workforce providing care. One model that should be considered is: implementing the system of tax offsets suggested by the Henry Review and then building in a system of carer credits. The proposed system of tax offsets may provide the administrative structures into which carer credits could more easily be accommodated.

This report presents two examples of how carer credits might operate under Options 1 and 2 in Technical Paper D: The impact of unpaid care on retirement incomes in Australia. However, these are examples only and the full range of options and their projected outcomes should be explored in the inquiry.

(b) Care bonus scheme

As any changes to the superannuation system will not benefit those transitioning out of paid work now, it is also suggested that an immediate change to the age pension system, such as a care bonus scheme, be considered.

This report has outlined a range of possible mechanisms to support parents and carers which could be further explored within the ambit of an inquiry into options for reforms that will properly recognise and compensate those who undertake unpaid caring work. Such an inquiry would be able to consider the interaction of mechanisms in the Australian context and any potential unanticipated consequences of specific mechanisms.

Option for reform 10

The Productivity Commission, or another independent body, conduct an inquiry into the following mechanisms for valuing unpaid caring work:

a. Parental leave mechanisms

- i. Providing a Government-funded time bonus of four weeks of additional payment for leave in recognition of gender or partner equality (50-50) in the take up of leave in couples (i.e. if each partner takes an equal amount of leave, either paid or unpaid leave); or
- ii. Providing a Government-funded time bonus of two weeks of additional payment for either partner under the Paid Parental Leave Scheme if the whole father/partner quota is taken.

b. Carer's leave mechanisms

- i. Providing employees with a legislated right to a job-protected unpaid employment breaks of up to 12 months, across the lifecourse, to provide care for a person with disability or illness or frailty due to age.
- ii. Options for Government to reimburse employers in relation to any additional carer's leave (separate to personal leave) introduced under the NES, including the administration costs.

c. Superannuation system

- i. Replacing the existing system of taxing superannuation with a new, more progressive, system of tax offsets; and
Including a system of 'carer credits' in the form of direct credits to the superannuation accounts of individuals with parental care responsibilities and carer responsibilities (either out of the workforce or working part-time) that would be paid annually at the end of the tax year by the government into the individual's superannuation account through adult life; or
- ii. Extending the Superannuation Guarantee to individuals with parental care responsibilities and carer responsibilities.

d. Care bonus

- i. Modelling the cost/benefit of a care bonus, as an additional supplement to the age pension, for unpaid carers who have made substantial contributions to care over their life.



Chapter 12:

Recognising and valuing unpaid carers

Implementing the legislative and policy mechanisms outlined in this report is one component of change, which needs to be accompanied by social and cultural change for the effective use of mechanisms.

Community education regarding gendered norms and stereotypes about parenting and caring for people with disability, frailty or chronic illness is an important component of social and cultural change.

The Australian Government *National Carer Strategy* and *National Carer Strategy Action Plan (2011-2014)* identifies 'recognition and respect' for carers as a key priority and the Australian Government has funded a national awareness campaign to 'raise awareness of carers and encourage them to seek assistance and support', and has committed to work with a range of professionals, public sector and service providers to assist them to recognise and support carers.²⁵⁰

Increasing awareness of the social and economic value and contribution of all forms of unpaid care and the challenges faced by parents and carers will assist to in the successful implementation of the options for reform outlined in this report.

Options for reform 11

The Australian Government and the Australian Human Rights Commission conduct a community-wide social marketing/ education campaign on:

- » **The positive contribution of carers.**
- » **Promoting positive attitudes and stereotypes of caring and carers, particularly male carers.**

- 1 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 2 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 3 Australian Bureau of Statistics, *Caring in the Community, Australia*, Catalogue no. 4436.0 (2012), p 5.
- 4 R Clare, *Developments in the level and distribution of retirement savings* (2011), p 6. At <http://www.superannuation.asn.au/policy/reports> (viewed 17 September 2012).
- 5 United Nations, *Convention on the Rights of Persons with Disabilities* (2006), article 1. At <http://www.un.org/esa/socdev/enable/rights/convtexte.htm#convtext> (viewed 31 August 2012). This definition aligns with the definition in the Australian Government *National Disability Strategy* (2011), p 23: 'For the purposes of this Strategy, the term 'people with disability' refers to people with all kinds of impairment from birth or acquired through illness, accident or the ageing process. It includes cognitive impairment as well as physical, sensory and psycho-social disability'. This definition also aligns with the *Disability Discrimination Act 1992* (Cth), s 4 in which: 'disability, in relation to a person, means: (a) total or partial loss of the person's bodily or mental functions; or (b) total or partial loss of a part of the body; or (c) the presence in the body of organisms causing disease or illness; or (d) the presence in the body of organisms capable of causing disease or illness; or (e) the malfunction, malformation or disfigurement of a part of the person's body; or (f) a disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or (g) a disorder, illness or disease that affects a person's thought processes, perception of reality, emotions or judgment or that results in disturbed behaviour; and includes a disability that: (h) presently exists; or (i) previously existed but no longer exists; or (j) may exist in the future (including because of a genetic predisposition to that disability); or (k) is imputed to a person. To avoid doubt, a disability that is otherwise covered by this definition includes behaviour that is a symptom or manifestation of the disability.'
- 6 United Nations, *Convention on the Elimination of Discrimination Against Women* (1979), article 11(2): 'In order to prevent discrimination against women on the grounds of marriage or maternity and to ensure their effective right to work, States Parties shall take appropriate measures: (a) To prohibit, subject to the imposition of sanctions, dismissal on the grounds of pregnancy or of maternity leave and discrimination in dismissals on the basis of marital status; (b) To introduce maternity leave with pay or with comparable social benefits without loss of former employment, seniority or social allowances; (c) To encourage the provision of the necessary supporting social services to enable parents to combine family obligations with work responsibilities and participation in public life, in particular through promoting the establishment and development of a network of child-care facilities; (d) To provide special protection to women during pregnancy in types of work proved to be harmful to them.'
- 7 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 8 Access Economics, *The economic value of informal care in 2010* (2010), p i. At <http://carersaustralia.com.au/storage/Economic-Value-Informal-Care-Oct-2010.pdf> (viewed 12 September 2012).
- 9 Australian Bureau of Statistics, 'Caring for Children' *Gender Indicators, Australia*, Catalogue, no. 4125.0 (Jan 2012). At <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by+Subject/4125.0~Jan+2012~Main+Features~Caring+for+children~4120> (viewed 6 January 2013).
- 10 Australian Bureau of Statistics, *Caring in the Community, Australia*, Catalogue no. 4436.0 (2012), p 5.
- 11 Australian Bureau of Statistics, *6202.0 Labour Force, Australia* (June 2012), Table 18 'Labour Force Status by Sex 15-64 years, Trend Series A2425971L and A2426116T'. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6202.0Jun%202012?OpenDocument> (viewed 1 August 2012).
- 12 Australian Bureau of Statistics, *6202.0 Labour Force, Australia* (June 2012), 'Table 1 Labour Force Status Aged 15 years and over, Trend'. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6202.0Jun%202012?OpenDocument> (viewed 1 August 2012).
- 13 Australian Bureau of Statistics, *6202.0 Labour Force, Australia* (June 2012), 'Table 18 Labour Force Status by Sex 15-64 years, Trend Series A2426112J and A2425967W'. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6202.0Jun%202012?OpenDocument> (viewed 1 August 2012).
- 14 Australian Bureau of Statistics, 'Labour Force' *Gender Indicators, Australia*, Catalogue, no. 4125.0 (Jul 2012). At <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4125.0~Jul%202012~Main%20Features~Labour%20force~1110> (viewed 23 August 2012).
- 15 Australian Bureau of Statistics, 'Employment conditions' *Gender Indicators, Australia*, Catalogue, no. 4125.0 (July 2012). At <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4125.0~Jul%202012~Main%20Features~Employment%20conditions~1120> (viewed 23 August 2012).
- 16 Australian Bureau of Statistics, above.
- 17 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 18 Australian Bureau of Statistics, above.
- 19 Australian Bureau of Statistics, 'Main source of income at retirement' *Gender Indicators, Australia*, Catalogue, no. 4125.0 (Jan 2012). At <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/4125.0main+features1220Jul%202012> (viewed 23 August 2012).
- 20 See for example: T Breusch and E Grey, 'New Estimates of Mother's Forgone Earnings Using HILDA data', *Australian Journal of Labour Economics* 7(2) (2004), pp 125-150; B Nepal, L Brown, G Ranmuthugala and R Percival, *Women Carers In Financial Stress – Lifetime Health and Economic Consequences of caring: Modelling health and Economic Prospects of Female Carers in Australia* (2009); B Nepal, L Brown, G Ranmuthugala, and R Percival, 'A Comparison of the Lifetime Economic Prospects of Women Informal Carers and Non-Carers, Australia 2007', *Australian Journal of Social Issues*, 46(1) (2011), pp 91-108; R Cassells, R Miranti, B. Nepal, and R Tanton, *She works hard for the money: Australian Women and the Gender Divide*, AMP.NATSEM Income and Wealth Report issue 22 (2009). At http://apo.org.au/sites/default/files/she_works_hard_for_money.pdf (viewed 13 September 2012).
- 21 R Clare, *Developments in the level and distribution of retirement savings, September 2011* (2011), p 6.
- 22 R Clare, above, p 9.
- 23 R Clare, *Developments in the level and distribution of retirement savings, September 2011* (2011), p 10.
- 24 R Clare, above, p 9, Table 2.
- 25 Australian Bureau of Statistics, *6238.0 Retirement and Retirement Intentions, Australia, July 2010 to June 2011* (December 2011). At <http://www.abs.gov.au/ausstats/abs@.nsf/mf/6238.0> (viewed 10 January 2012).
- 26 Australian Human Rights Commission, *Submission to the Senate Legal and Constitutional Affairs Committee on the Exposure Draft Human Rights and Anti-Discrimination Bill 2012* (December 2012). At http://humanrights.gov.au/legal/submissions/2012/20121206_hrad_bill.html (viewed 17 December 2012).
- 27 The final report of the Fair Work Act Review, released in August 2012, recommended amending section 65 to extend the right to request flexible working arrangements to a wider range of caring and other circumstances and to require that the employee and the employer hold a meeting to discuss the request, unless the employer has agreed to the request. Fair Work Act Review Panel, *Towards more productive and equitable workplaces: An evaluation of the Fair Work legislation* (2012). At <http://www.deewr.gov.au/WorkplaceRelations/Policies/FairWorkActReview/Pages/Home.aspx> (viewed 2 August 2012).
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- 29 Australian Human Rights Commission, *Accumulating Poverty? Women's experiences of inequality of the lifecycle*, (2009).
- 30 Australian Human Rights Commission, above.

- 31 In the mid 1980s, the Hawke Labor Government negotiated a national superannuation scheme as a part of the Accord agreement between the Government and the trade union movement. The scheme was called the Productivity Award Superannuation. However, the scheme faced problems and, after a series of recommendations by the Social Security Review, was replaced by the Superannuation Guarantee in 1992.
- 32 R Dennis and D Richardson, *Can the Taxpayer Afford 'Self-funded Retirement'?*, Policy Brief No. 42 (2012); Commonwealth of Australia, *Australia's Future Tax System: The Retirement Income System, Report on Strategic Issues* (2009).
- 33 Australian Human Rights Commission, *Accumulating Poverty? Women's experiences of inequality of the lifecycle* (2009), p 7.
- 34 Australian Human Rights Commission, *Accumulating Poverty? Women's experiences of inequality of the lifecycle* (2009).
- 35 United Nations, *Convention on the Rights of Persons with Disabilities* (2006), Article 1. At <http://www.un.org/esa/socdev/enable/rights/convtexte.htm#convtext> (viewed 31 August 2012). This definition aligns with the definition in the Australian Government *National Disability Strategy* (2011), p 23. See above n 4.
- 36 L Craig, 'Is there really a "second shift", and if so, who does it? A time-diary investigation' 86 (1) *Feminist Review* 149.
- 37 D Brennan and B Cass '*Run faster, Nana: Grandparents as Primary Carers of their Grandchildren: A National, State and Territory Analysis*, Draft report for ARC Linkage Partners, (2012); Australian Bureau of Statistics, '*Family Functioning: Informal Child Care Provided by Grandparents' Australian Social Trends*, Catalogue no. 4102.0 (2005).
- 38 Australian Bureau of Statistics, *Caring in the Community, Australia* Catalogue no. 4436.0 (2012), p 5.
- 39 Australian Bureau of Statistics, above p 5.
- 40 Australian Bureau of Statistics, *Labour Force, Australia: Labour Force Status and Other Characteristics of Families*, Catalogue no. 6224.0.55.001, June 2011, (2011). At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/6224.0.55.001Main+Features1Jun%202011?OpenDocument> (viewed 31 August 2012).
- 41 L Strazdins, N Lucas, M Shipley, R Matthews, H Berry, B Rogers and A Davis, *Parents and child wellbeing and the influence of work and family arrangements: A three cohort study*, Social Policy Research Paper No 44. (2011), p 54. At: http://www.fahcsia.gov.au/sites/default/files/documents/05_2012/srpp_44.pdf (viewed 18 September 2012).
- 42 L Strazdins, N Lucas, M Shipley, R Matthews, H Berry, B Rogers and A Davis, above, p 55.
- 43 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 44 Australian Bureau of Statistics, above.
- 45 T Jefferson, 'Women and retirement incomes in Australia: A review', 81 (254), *The Economic Record*, (2005) p 273; Australian Human Rights Commission, *Accumulating Poverty? Women's experiences of inequality of the lifecycle* (2009).
- 46 Access Economics *The economic value of informal care in 2010* (2010), p i. At <http://carersaustralia.com.au/storage/Economic-Value-Informal-Care-Oct-2010.pdf> (viewed 12 September 2012). Using a broader definition of 'unpaid care' that encompasses domestic work, child care and voluntary work and care, recent imputed estimates by Hoenig and Page suggest that in Australia in 2009-10, the amount of unpaid care work undertaken was around 21.4 billion hours, (or 11.1 million full-time jobs), amounting to a value of \$650.1 billion by the replacement cost method or the equivalent of 50.6 per cent of GDP, and that women aged between 25-64 years contributed 60 per cent of this unpaid care work. SA Hoenig and ARE Page, *Counting on Care Work in Australia. Report prepared by AECgroup Limited for economic Security4Women* (2012), p iii. At <http://www.security4women.org.au/projects/the-australian-care-economy> (viewed 10 December 2012).
- 47 Australian Institute of health and Welfare, *Australia's Welfare 2011* (2011), p 216. At <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=10737420625> (viewed 12 September 2012).
- 48 S Yeandle, C Benner, L Buckner, L Shipton and A Suokas, *Who Cares Wins: The Social and Business Benefits of Supporting Working Carers* (2006). At www.employersforcarers.org/business-case/item/download/68 (viewed 12 September 2012).
- 49 S Yeandle, C Benner, L Buckner, L Shipton and A Suokas, above, p 18.
- 50 For example, a recent report on the diversity initiatives of ASX entities described the following benefits of diversity outlined by the entities as including: 'creates a competitive advantage and improves entity performance', 'maximises achievement of an entity's vision and goals in the future', 'access to different perspectives and ideas', 'improves an entity's responsiveness to the diverse needs of various stakeholders such as employees, shareholders, customers', 'results in a high performing workforce and maximises opportunities to attract, retain and develop the best talent', 'fosters greater innovation and promotes better problem solving', 'better reflects the communities in which we operate'. KPMG, *ASX Corporate Governance Council Principles and recommendations on Diversity: Analysis of 31 December 2011 year end disclosures* (2012). Further the Grattan Institute has identified that a six per cent increase in women's workforce participation could generate an increase in Australia's gross domestic product by \$25 billion. Grattan Institute, *Game-changers: Economic reform priorities for Australia* (2012), p 39. At <http://grattan.edu.au/publications/reports/post/game-changers-economic-reform-priorities-for-australia/> (viewed 1 November 2012).
- 51 United Nations, *Convention on the Elimination of Discrimination Against Women* (1979), article 11(2): See above n 5.
- 52 International Labour Organization, *Convention Concerning Equal Opportunities and Equal Treatment for Men and Women Workers: Workers With Family Responsibilities (No 156)* (1981), article 3(1). At http://www.ilo.org/dyn/normlex/en/f?p=1000:12100:0::NO::P12100_INSTRUMENT_ID:312301 (viewed 12 September 2012): 'With a view to creating effective equality of opportunity and treatment for men and women workers, each Member shall make it an aim of national policy to enable persons with family responsibilities who are engaged or wish to engage in employment to exercise their right to do so without being subject to discrimination and, to the extent possible, without conflict between their employment and family responsibilities'.
- 53 International Labour Organization, *Convention Concerning Equal Opportunities and Equal Treatment for Men and Women Workers: Workers With Family Responsibilities (No 156)* (1981), article 4(1). At http://www.ilo.org/dyn/normlex/en/f?p=1000:12100:0::NO::P12100_INSTRUMENT_ID:312301 (viewed 12 September 2012): 'With a view to creating effective equality of opportunity and treatment for men and women workers, all measures compatible with national conditions and possibilities shall be taken:
(a) to enable workers with family responsibilities to exercise their right to free choice of employment; and
(b) to take account of their needs in terms and conditions of employment and in social security'.
- 54 United Nations, *Convention on the Elimination of Discrimination Against Women* (1979) article 11(1). At <http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm> (viewed 12 September 2012): 'States Parties shall take all appropriate measures to eliminate discrimination against women in the field of employment in order to ensure, on a basis of equality of men and women, the same rights, in particular:
(a) The right to work as an inalienable right of all human beings;
(b) The right to the same employment opportunities, including the application of the same criteria for selection in matters of employment;
(c) The right to free choice of profession and employment, the right to promotion, job security and all benefits and conditions of service and the right to receive vocational training and retraining, including apprenticeships, advanced vocational training and recurrent training;
(d) The right to equal remuneration, including benefits, and to equal treatment in respect of work of equal value, as well as equality of treatment in the evaluation of the quality of work;
(e) The right to social security, particularly in cases of retirement, unemployment, sickness, invalidity and old age and other incapacity to work, as well as the right to paid leave;
(f) The right to protection of health and to safety in working conditions, including the safeguarding of the function of reproduction'.

- 55 United Nations, *Universal Declaration of Human Rights* (1948), article 25(1). At <http://www.un.org/en/documents/udhr/index.shtml> (viewed 12 September 2012): 'Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control'; and United Nations, *International Covenant on Economic, Social and Cultural Rights* (1966) article 11(1). At <http://www2.ohchr.org/english/law/cescr.htm> (viewed 12 September 2012): 'The States Parties to the present Covenant recognize the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions. The States Parties will take appropriate steps to ensure the realization of this right, recognizing to this effect the essential importance of international co-operation based on free consent'.
- 56 See for example J Tronto, *Moral Boundaries: A Political Argument for an Ethic of Care* (1993); M Daly and J Lewis 'The concept of social care and the analysis of contemporary welfare states' (2000), 51(2) *British Journal of Sociology* 281; F Williams, 'In and Beyond New Labour: towards a new political ethic of care' (2001), 21(4) *Critical Social Policy* 467; F Williams *Claiming and Framing in the Making of Care Policies: The Recognition and Redistribution of care* (2010); United Nations Research Institute for Social Development, *Gender and Development Programme Paper Number 13*; N Busby, *A right to care?: Unpaid Care Work in European Employment Law*, (2011).
- 57 This definition also excludes parents and carers who may be engaged in a 'home tutor' capacity for children undertaking distance education as these activities are perhaps better recognised within the sphere of education assistance rather than support provided as 'care'.
- 58 United Nations *Convention on the Rights of Persons with Disabilities* (2006), article 1. At <http://www.un.org/esa/socdev/enable/rights/convtexte.htm#convtext> (viewed 31 August 2012). This definition aligns with the definition in the Australian Government *National Disability Strategy* (2011), p 23. See above n 4.
- 59 See for example: J Morris, 'Care or Empowerment? A Disability Rights perspective' (1997), 31(1) *Social Policy and Administration* 54; T Shakespeare, *Help*, (2000).
- 60 K Rummery and M Fine, 'Care: A Critical Review of Theory, Policy and Practice' (2012), 46(3) *Social Policy and Administration* 321.
- 61 Including the Australian Bureau of Statistics *Surveys of Disability, Ageing and Carers* (SDAC), the Australian Bureau of Statistics *Census of Population and Housing*, (from 2006 onwards), the Australian Bureau of Statistics *General Social Survey* (2006 onwards), the Australian Bureau of Statistics *Time Use Surveys* and the *Household Income and Labour Dynamics In Australia (HILDA) Survey*. The surveys provide different estimates of the number of carers in Australia due to differences in scope and methods of identifying carers within each of the surveys.
- 62 Australian Bureau of Statistics *2011 Census of Population and Housing, Basic Community Profiles*, Catalogue no. 2001.0 (2012), Table B22.
- 63 Australian Bureau of Statistics, above, Table B22.
- 64 Australian Bureau of Statistics, *2011 Census of Population and Housing, Basic Community Profiles* Catalogue no. 2001.0 (2012), Table B22.
- 65 Australian Bureau of Statistics, *2006 Census of Population and Housing, Unpaid child care by age by sex for Indigenous Persons*, Catalogue No. 2068.0, SPRC's calculations.
- 66 Australian Bureau of Statistics, *Caring in the Community*, Australia Catalogue no. 4436.0 (2012), p 3. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4436.02009?OpenDocument> (viewed 14 September 2012).
- 67 Australian Bureau of Statistics, (*Caring in the Community, Australia*, Catalogue no. 4436.0 (2012), p 3. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4436.02009?OpenDocument> (viewed 14 September 2012).
- 68 Australian Bureau of Statistics, *Caring in the Community, Australia*, Catalogue no. 4436.0 (2012), p 21, Table 8. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4436.02009?OpenDocument> (viewed 14 September 2012).
- 69 A Jenkins and F Seith, *Background Paper on Aboriginal Carers*, (2004); T Hill, B Cass, BJ Newton, and k valentine, *Indigenous carers*, Report for the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs, (forthcoming).
- 70 T Hill, B Cass, BJ Newton, and k valentine, above.
- 71 Australian Bureau of Statistics, *A profile of carers in Australia, 2008*, Catalogue no.4448.0 (2008), p 27. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4448.02008?OpenDocument> (viewed 14 September 2012).
- 72 Australian Bureau of Statistics and Australian Institute of Health and Welfare (AIHW), *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008* (2008).
- 73 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 74 Australian Bureau of Statistics, above.
- 75 See for example L Craig, 'Does Father Care Mean Fathers Share? A Comparison of How Mothers and Fathers in Intact Families Spend Time with Children' (2006), 20 *Gender & Society*, 259; L Craig and K Mullan, 'How Mothers and Fathers Share Child care: A Cross-National Time-Use Comparison' (2011), *American Sociological Review* 76, 834.
- 76 Australian Bureau of Statistics, 'Caring for Children' *Gender Indicators, Australia*, Catalogue, no. 4125.0 (Jan 2012). At <http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/4125.0main+features4120Jul%202012> (viewed 14 September 2012).
- 77 Australian Bureau of Statistics, above.
- 78 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data
- 79 J Fast, M Bittman, K Fisher and C Thomson, 'Making the Invisible Visible: the Life and Time(s) of Informal Caregivers' in M Bittman and N Folbre (eds), *Family Time: The Social Organisation of Care* (2004).
- 80 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 2009*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 81 Australian Bureau of Statistics, above.
- 82 Australian Bureau of Statistics, *Survey of Disability, Ageing and Carers, Australia 200*, Basic CURF, Version 3, CD-Rom (2009). Findings based on SPRC's analysis of ABS CURF data.
- 83 Australian Bureau of Statistics, *6202.0 Labour Force, Australia* (June 2012), 'Table 18 Labour Force Status by Sex 15-64 years, Trend Series A2425971L and A2426116T'. At <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6202.0Jun%202012?OpenDocument> (viewed 1 August 2012).
- 84 Australian Bureau of Statistics (ABS), above.
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Recommendation 16: Extend family and carer responsibilities protection under the SDA (Stage One)
(1) Make direct and indirect family and carer responsibilities discrimination unlawful in all areas covered by Part II Div 1
(2) Extend the definition of family responsibilities to include family and carer responsibilities which is inclusive of same-sex families, and provide a definition of family members and dependents which ensures adequate cover for both children and adults to whom care is being provided
Recommendation 17: Positive duty to reasonably accommodate the needs of workers who are pregnant and/or have family or carer responsibilities (Stage One)
Introduce a positive obligation on employers and other appropriate persons to reasonably accommodate the needs of workers in relation to their pregnancy or family and carer responsibilities. Failure to meet this obligation would be an actionable form of discrimination.

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