

# A Comparative Analysis of Childcare Expansion and Social Investment in Sweden, France, Germany, the UK, Japan and South Korea\*

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## ◀ Abstract ▶

This paper examines how a social investment approach can be applied in a comparative analysis of childcare arrangements. We compared changes in Sweden, France, Germany, the UK, Japan and Korea during the 2000s, focusing on four dimensions of social investment: activation, gender equality, quality of care, and the degree of state's intervention in the family. We considered leave systems and the number of children enrolled in formal care and education facilities as indicators for labour market activation. For gender equality, women's position in employment is considered with respect to labour market participation rates, proportion of permanent employment, and wage-sex ratio. Quality of care concerns child-to-staff ratio and care provided with government quality control. The

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state's intervention was measured as social spending on families as proportions of GDP and total social spending. Our analysis provides empirical evidence that Sweden and France are pioneers in this arena and that the UK, Germany, Korea, and Japan are path-shifters in their care paradigms, albeit to varying degrees. Is the social investment approach an adequate paradigm for care? In a normative sense, this approach has potential. However, the following issues remain unaddressed: gender equality should be achieved through an expansion in good-quality jobs, fathers should be encouraged to take on childcare duties, and families should have universal access to good-quality childcare services controlled by the government.

Key words: childcare, social investment, activation, gender equality, quality of care, social spending on family

## 1. Introduction

Recent welfare reforms in Europe and East Asia, particularly Korea, have legitimized state involvement. Normative ideals and pragmatic responses have changed, albeit to a different extent across countries. Daly (2011) considers that these developments are occurring along three lines. The first can be found in the literature on new social risks (Bonoli, 2005; Taylor-Gooby, 2004). Welfare policy reforms, referred to as 'modernization', are being enacted in response to new social risks associated with the transition to post-industrial society. The second is the adult worker model (Lewis & Giullari, 2005), which addresses assumptions held about men and women embedded in the welfare states and argues that social policy increasingly regards them as individual workers. The last line of the framework is a social investment perspective, which maintains that contemporary welfare developments are oriented toward children and the future, and that greater social spending is justified and should be targeted toward the enhancement of individual and social capital, mainly through activation (Giddens, 1998; Midgley, 1999; Jenson & Saint-Martin, 2003; Abrahamson, 2010; Jenson, 2012). I will

focus on this last perspective.

Analyses of family policy models or care regimes, with their new taxonomy, have contributed novel dimensions to welfare regime classification (Gauthier, 1996; Kaufmann et al., 2002). Feminist scholarship took the lead, insisting that care involves the very relationship between men and women, and that variance in the state's interventions (and the implications thereof) needs to be incorporated in the regime analysis (Lewis, 1992). Many of the institutional arrangements for care have centred on the concept of familisation/defamilisation (Anttonen & Sipilä, 1996; Leitner, 2003; Michon, 2008). Acknowledging the limitation of the dichotomous logic of public/private, formal/informal, and/or family/out-of family, care mix approaches highlight that countries differ in their directions and degree of defamilisation; care arrangements between the state, market, family, and non-profit sectors have recently been the focus of the dialogue (Razavi, 2007; Peng, 2009; An, 2012, 2013).

The concept of social investment is ambiguous (Morel et al. 2012; Jenson, 2012). On the ideational level, the ambiguity is the product of different viewpoints. Morel et al. (2012) point out that no consensus exists as to whether the perspective put forward since the late 1990s constitutes a new policy paradigm. Lister (2004) argues that the normative ideal in welfare states has moved towards social investment; children and community are idealized as emblems of the social investment state. The social investment perspective is nothing new, since it, like the neoliberal viewpoint, highlights the creation of responsible citizens and families. Kaufmann et al. note that the principles of gender equality and children's rights adopted by welfare states derive from Scandinavia's family policy (2002: 419). Furthermore, empirical analyses suggest diverse ideas. While the increase in social expenditure has not translated into the growth of social investment policies (Hudson & Kühner, 2009; Nicolai, 2012), a social investment model is slowly but surely replacing the social security paradigm inherited from the sixties (Sipilä, 2008: 12; De Deken, 2012). Nonetheless, the important fact is that family is the arena on which the increase of social expenditure was focused during the 2000s.

This paper aims to examine how the social investment perspective can be employed in a comparative analysis of childcare arrangements and provide empirical analysis of differences

and similarities in care arrangements in Sweden, France, Germany, the UK Japan and Korea during the last decade. The following section engages existing perspectives on care regimes and the social investment perspective in order to develop an analytical framework for the current study. The third section discusses the indicators for the dimensions and their usefulness and limitations. This is followed by sections containing our results and their implications.

## 2. Locating the social investment perspective in the comparative study of care

Esping Andersen's famous comparative analysis of welfare regimes (1990) encouraged the placement of family or gender and care at the centre of the studies. Such scholarly endeavours fall into three groups (Table 1). The first, developed by feminist scholars, focuses on how welfare states apply to the boundaries of care provisions at the individual level, that is, gender. An approach that differentiates weak, moderate, and strong male breadwinner states (Lewis, 1992; Lewis & Ostner, 1994) is a stepping stone to the perspective. Various nations are compared based on the degree to which state policies view women as paid workers or dependent wives. Lewis (2001) continues to develop her analytic interest in the implications of welfare state redesign for individuals, arguing that the emergence of individualisation is the normative model of social policy at the EU level at the turn of the twenty-first century. Her thesis holds that the new norm of social policy is the adult worker model, which includes assumptions about individuals and their work and family lives.

The second is familisation/defamilisation scholarship. In response to the concept of de-commodification, the concept of defamilisation (Lister, 1994; Esping Andersen, 1999) concerns the degree to which state intervention reduces family care burdens and enhances the economic independence of women. Anttonen and Sipilä (1996) proposed two care regimes based on the degree of social care services: social democratic and Southern European. Leitner

(2003) defined defamilialising policies intended to reduce families' caring burden and familialising policies which aimed to strengthen the family in its caring function. Four regimes were proposed: Explicit familialism, featuring policies that actively support the family in its caring functions; optional familialism, which allows the family to choose to provide care to a family member themselves or to receive state or market assistance; defamilialism, which provides care services but lacks support for familial care; and implicit familialism, in which there is virtually no public support for family or non-family care. Michon (2008) developed cost/care defamilialisation and care familialisation and proposed three care regimes: the coherent regime, which provides relatively long, well-paid leaves and universal childcare facilities; subsidiary regimes, under which care begins only when the family's capacity to provide care for their children has ended; and the neutral model, in which the state provides no services or supportive care policies.

The third group concerns the welfare mix approach and addresses the various types of the care responsibility mix (Razavi, 2007; Peng, 2009; Ochiai, 2009; An, 2012, 2013). The analysis of the care mix is complex, since the types of care provided by different sectors are not mutually exclusive (Razavi, 2007), and the boundaries between providers and financiers are blurred across sectors. However, such scholarly endeavours have enhanced the understanding of the role of the state, with regard to directions of defamilialising, through state, market or not-for-profit sectors and its scope. An (2012) found that the directions of defamilialisation differ for children and the elderly in Korea; defamilialisation of childcare in Korea has been largely through market rather than state channels while it is through community sector for elderly An (2013) further noted that the defamilialisation of childcare through state provisions was larger in Japan than in Korea. Ochiai (2009) classified six Asian countries into four care regimes. She labelled Singapore and Taiwan's eldercare and Korea's child and eldercare arrangements the 'Asian liberalist regime', in that it involves a strong dependence on market solutions and extensive relative supports as in family members. She describes childcare in China as the product of socialism: the government abolished the role of family and relatives and replaced them with People's Communes. Childcare in Singapore is considered 'developmentalism', as daycare fa-

cilities were not intended to be supports for work and family, but rather to promote economic growth. She lists Japan and Korea as examples of Asian familism, featuring weakly developed state interventions.

The links between care and welfare state policies are complex, as care involves various relationships and dimensions at different levels. Care involves the relationships of caregivers and receivers, and their relationships with the welfare state. Thus, redesigning state and re-frames the concept of social rights and repositions all of these relationships. Furthermore, care is an activity that involves labour, time, and cost; welfare states are comparable as strategies, but their social and economic implications vary. Care policies also have multi-level influences that alter the responsibility mix among the state, market, family, and community sectors at the macro level as much as gender relationships at the micro level.

Therefore, despite their great variety in influence and utility, the three approaches may be found to be limited for the following reasons. Gender matters, but the individual level may not be both conceptually and analytically comprehensive. Daly (2011: 6) notes that even though the adult worker model is rather widely accepted as both a conceptual framework and a characterization of real life in Europe, it pays insufficient attention to collective issues. Furthermore, defamilisation may not automatically lead to women's economic independence. Empirical analyses have shown that although parental leave in general has been found to be positive for female employment (Jaumotte, 2003; Boushey, 2005), extended parental leave has been found to be discouraging (Fuwa & Cohen, 2007). Kim (2009) reported that in Korea, parental leave has a negative impact on mothers' job continuity. Moreover, a single policy measure has been classified in two opposing directions: parental leave has been cited to indicate both care familisation (Leitner, 2003; Michon, 2008) and defamilisation (Bambra, 2007). In addition, indicators for the intention of care policies have sometimes been mixed with indicators that correspond with outcomes (Leitner, 2003). For example, female wages and labour market participation rates are used together with the leave system (Bambra, 2007), the indicator of policy intent. Finally, the care mix approach has provided a rather weak discussion of its implications for micro-level arrangements in care provisions; Furthermore, the

approach lacks of recognition that welfare states are not only familizing but also defamilizing.

[Table 1] Comparative studies of care arrangements

	Indicators	Country groups	
Lewis (1992)	Women's position in labour market, childcare availability, maternity rights, social security rights	Strong male breadwinner	UK, Ireland
		Modest male breadwinner	France
		Weak male breadwinner	Sweden
Anttonen & Sipilä (1996)	Children under three in day care as a proportion of the age group, Children aged 3-5 in preparatory school as a proportion of the age group	Southern European	Portugal, Greece, Spain,
		Social democratic	Denmark, Sweden, Finland, Belgium, France, Italy
Leitner (2003)	Paid parental leave % of children under 3 in formal childcare	Optimal familialism	Belgium, Denmark, France, Sweden
		Explicit familialism	Austria, Germany, Italy, Luxembourg, Netherlands
		De-familialim	Ireland, UK
		Implicit familialism	Greece, Portugal, Spain
Michon (2008)	Tax relief and family cash transfers paid in respect of dependent children, non-working spouse, Take home pay of a single person earning average gross wage, children coverage rate for children 0-3, Number of weeks with full replacement rate	Coherent	Denmark, France, Sweden, Iceland, Norway, Finland, Slovakia, (Czech)
		Subsidiary	Germany, Belgium, Netherlands, Italy, Hungary, Austria, (Spain), Luxemburg
		Neutral	UK, Poland, Portugal, Switzerland, Greece, Ireland
Ochiai (2009)	Social networks	Asian liberalism	Singapore (elder care), Taiwan (elder care). Korea (eldercare and childcare)
		Developmentalism	Singapore (childcare)
		Reconstructed socialism	China (childcare)
		Asian Familism	Japan and Korea (eldercare and childcare)

Social investment as a method of interpreting recent social policy changes has received increasing scholarly and political attention. The social investment perspective has the potential to be applied to comparative analyses of care arrangements. First, it speaks largely of responsibility mix. Anthony Giddens, who coined the term ‘social investment state’, calls for a new partnership in the assignment of the welfare function to families, markets, and states, and challenges the state to develop an entrepreneurial culture, offering protection in a way that encourages risks and opens possibilities. The goal should be to shift the relationship between risk and the security of the welfare state in order to generate a society of responsible risk takers (Giddens, 1998: 100). Jenson (2012) argues that assumptions about welfare mixes differ from the neoliberal regime’s insistence that the market, though it bears the primary responsibility for social security, may not provide sufficiently for all. Families have important responsibilities in the provision of welfare, but the role of the state must also be highlighted. Governance through partnerships and an enabling or ensuring state are the core of this approach. Thus, the state does not aim to limit social spending in order to prevent welfare dependency but to increase it if it is targeted for investment. In addition, it also highlights the role of community commitment for greater coherence. Jenson (2012) argues that the role of community in neoliberal regimes may serve to cushion spending cutbacks and market failures, while the social investment perspective views it as a potential partner in the provision of services.

Second, social investment focuses on the activation of adults in terms of human capital investment. Lister (2003, 2004) argues that the ideology behind human capital investment re-activates present adult citizens as paid workers. Fostering participation in the labour market is appreciated both with respect to individual welfare and social cohesion (Council of the European Union, 2000: point 7 cited in Esping Andersen, 2002). Kaufmann et al. (2002) and Morgan (2012) regard gender equality as a hallmark of the emerging social investment paradigm, and a departure from the gender-blind understanding of the welfare state in social rights citizenship regimes. Managing the margins of the labour force, including people transitioning from social assistance to work or from non-participation to employment, largely women, is

part of this challenge.

Finally, the social investment approach is often called a child-centric approach. The human capital focus on children helps us to develop another line of reasoning for comparative analysis: children's rights. Esping-Andersen (2002: 9) notes that we need to offset the limited numbers of future cohorts with greater productivity. Good initial cognitive ability yields individual future returns because it is an absolute precondition for educational attainment. Universal access to high-quality day care is thus proposed as an effective tool to abolish social inheritance (Esping-Andersen, 2002). Jenson (2012) argues that in the social investment approach, security can come from social protection, as in the social rights regime. The social investment regime differs from the social rights regime in that it produces social cohesion through the adaption to change, or through the creation of healthy childhoods. As such, social investment regimes extend the targeted groups to children, creating new notions of citizenship and potentials that result in new macro- and micro-relationships. In the ideal social investment paradigm, the equality of opportunity creates equal access to good-quality childcare services, thus enhancing social equality and cohesion.

In a normative sense, the social investment approach is useful as it encompasses various issues and dimensions of care arrangements. First, bringing more women into the labour market would reposition their social rights and gender relations. Second, the child-centric notion would change in the relationship between caregivers and receivers; this is influential for the social rights of the care-receivers. Third, it would generate a different paradigm with regard to the role of the state from neoliberalism and its relationships with other institutions, the market, family, and community sectors. In her analysis on the promotion of social investment through work-family policies, Morgan (2012) proposed three analytic dimensions: activation, gender equality, and quality of care. In addition to these three, I examine the degree of the state's intervention.

Ideally, activation covers all policy measures that aim to support mothers' labour market participation. Gender equality means equality both in paid and unpaid work. Quality of care indicates the degree of equality of access to good care. Lastly, the degree of the state's inter-

vention encompasses the types of state interventions and their degree (Jenson, 2012). However, due to lack of data availability, we operationalise them adequately for the current study.

[Table 2] Dimensions, indicators and source of data

Dimensions	Indicators	Source of data
Activation	Total enrolment rates of children under age 6 in formal care or early education service (TER)	OECD education and training data (2000), OECD family database (2008)
	Average payment per week of leave (APPW)	Comparative family policy database (2000, 2009), Gauthier, A. H. (2010) (2011)
Gender equality	Female labour market participation rates 25-54 (FLEP)	OECD labour statistics (2000, 2008)
	Female permanent workers 25-54 (FPW)	OECD labour statistics (2000, 2008)
	Wage sex ratio (female/male) (WSR)	Comparative family policy database (2000, 2009)
Quality of care	Child-to-staff ratios (CSR)	OECD education and training data (2000), OECD family database (2008)
	Children at public care and education facilities as % of total enrolled (CPEF)	OECD education and training data (2000, 2008)
State's intervention	Total budget on family as % of GDP (SSFG)	OECD social expenditure database (2000, 2009)
	Social spending on family as proportion of total social spending (SSF)	OECD social expenditure database (2000, 2009)

### 3. Methodology

This study considers six countries: Sweden, France, Germany, the UK, Japan, and Korea. The selection of the countries was based on Morgan's suggestions. She regarded Sweden and France as pioneers of the social investment approach, Germany and the UK as path-shifters, and Spain as a latecomer. We include the pioneers, the path-shifters, Japan, and Korea.

Neither Japan nor Korea had anything resembling a comprehensive family policy. During recent decades, families have become the third largest benefactors of social spending after old age and health-related programmes in Korea. In Japan, spending on family has demonstrated the second-fastest growth rate after old age provisions (An, 2013).

Nearly all writers of comparative analyses of care stress that it suffers from and is hampered by a lack of comparable data. The measurement of indicators for the four dimensions are provided in Table 2. For activation, we include two indicators: total enrolment rates of children under age six in formal care or early education services (TER) and average payment per week of leave (APPW). The APPW follows the formula suggested by Bettio and Plantenga (2004), where the duration of the leave is weighted by the level of pay and divided by the total number of weeks of leave. I include the APPW despite the contrasting ideas about the effects of leave on mothers' employment, and adopt the idea that it generally encourages it. I include the TER based on the empirical finding that the availability of childcare is positively related to mothers' employment (Cobb-Clark et al., 2000; Doiron & Kalb, 2002; Rammohan & Whelan, 2003).

The dimension of gender equality includes indicators of female labour market participation of women aged 25–54 (FLEP), the proportion of permanent workers among employed females aged 25–54 (FPW), and wage sex ratio (WSR). The measurement of quality of care is composed of child-to-staff ratios (CSR) and children at public care and education facilities as a percentage of total enrolled (CPEF). The CPEF is used to indicate the degree of childcare service provisions by government and it is assumed that such services have controlled quality. I included indicators of total budget on family (SSFG) and social spending on family as the proportion of total social spending (SSF) to indicate the dimension of the role of the state. In order to make such comparisons, I standardised the sum values of all the indicators of each dimension by dividing each value by the maximum value and multiplying it by the average value.

[Table 3] Data

	Activation				Gender equality						Quality of care				State intervention			
	TER		APPW		FLEP		FPW		WSR		CSR		CPEF		SSFG		SSF	
	2000	2008	2000	2008	2000	2008	2000	2008	2000	2008	2000	2008	2000	2008	2000	2008	2000	2008
France	64.0	71.0	38.6	33.4	78.6	83.4	86.8	87.1	82.1	85.2	18.3	18.8	87.4	87	3.1	3.2	9.7	9.1
Germany	44.0	55.3	18.4	28.7	76.9	80.9	91.9	90.2	73.5	73.5	18.5	13.9	41.2	35.7	2.1	2.1	7.3	6.8
Japan	44.6	51.1	32.4	44.2	66.5	71.1	80.7	80.7	66.2	66.2	15.4	17.7	34.7	31.8	0.6	0.9	3.2	3.6
Korea	26.5	53.0	16.1	52.2	57.8	61.5	73.2	77.8	65.0	65.0	11.8	20.8	22.4	22.2	0.2	0.9	1.9	7.1
Sweden	64.0	68.9	64.1	65.6	85.6	87.1	86.1	86.0	91.3	91.3	12.8	11.2	88.3	84.9	3.0	3.7	9.9	11.3
UK	40.0	66.8	70.7	62.3	76.2	78.5	93.4	95.4	75.5	75.5	23.2	17.6	94.0	70.5	2.7	3.8	10.2	12.6

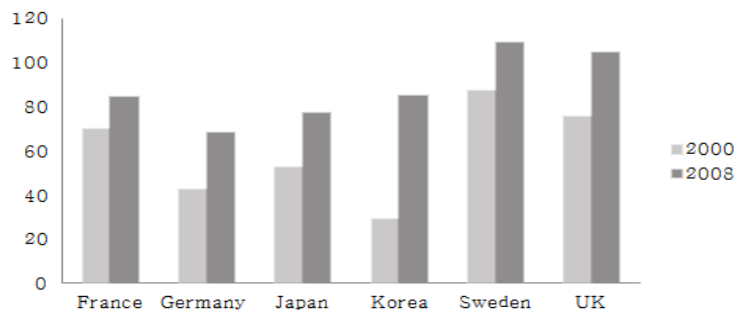
Note: Korea parental leave increased the level of payment in 2011; we consider this in the analysis. Data for CSR 2000 are drawn from OECD education and training data. It may be limited as they are largely concerned with pre-primary education. Data of FPW for Korea as of 2000 is the value for 2003. Data of SSFG and SSF as of 2008 is the value for 2009.

## 4. Results

Figures 1-4 show the results for activation, gender equality, quality of care, and the degree of the state's intervention across nations during the 2000s. In 2000, activation was highest in Sweden, followed by the UK and France. The UK had a high activation level because it offered women long, well-paid maternity leave-in fact, the longest in the EU (Deven & Moss, 2002). Activation in France was also close to Sweden's largely because of good childcare coverage, which included 64% of preschoolers, the same percentage as Sweden. Korea, on the other hand, had the lowest activation level, which they attributed to the least-developed childcare leave system and lowest childcare coverage. After a decade, we observe a dramatic change in the picture. All countries under examination attained significant activation. The largest change occurred in Korea, followed by the UK, Germany, and Japan. Activation in Korea is attributed to the expansion of childcare coverage from 26.4% to 53% of total preschoolers, the increase in the duration of maternity leave from two months to three in 2001, and in its payment rates. The increased activation in the UK reflected the increased pro-

portion of children in childcare or education facilities, from 40% to 67%. Germany's increase in activation is attributed to the augmentation of the average leave payment: the previously tested small flat rate benefit was exchanged for a wage replacement of 67% in 2007 (Lewis et al., 2008). The increase in activation in Germany also stems from the expansion of childcare coverage mandated by the 2004 Day-care Expansion Act. In addition, Japan tried to increase activation further by raising the payment level of wages during parental leave from the previous 25% to 40% in 2001 and to 50% in 2007. In contrast, Sweden and France demonstrated a relatively small increase in activation. As a result, the differences between nations were reduced by the end of the 2000s. The UK's activation level has surpassed that of France, becoming similar to Sweden, while Korea's activation level became similar to that of France.

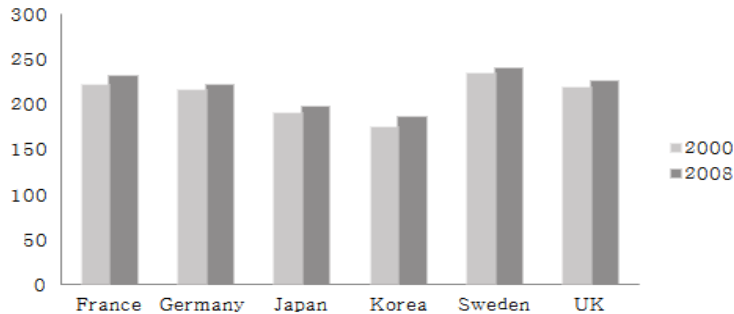
[Figure 1] Activation



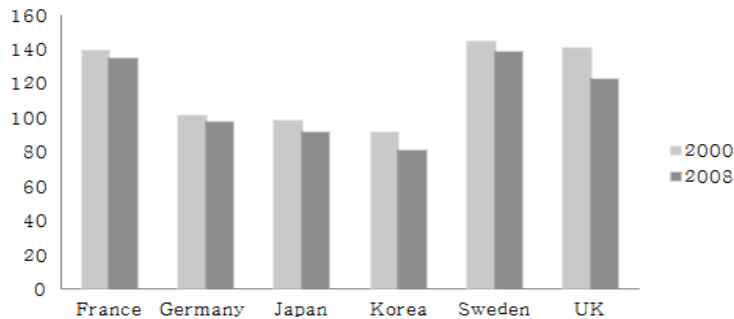
The second measure, gender equality, also gained in all six nations. Sweden again performed best in this regard, and East Asian countries least well. The results must be interpreted with caution. Because of the lack of data on time spent by men and women on care, this dimension is measured in terms of the labour market participation of women aged 25-54 and the wage sex ratio. To be precise, this dimension represents the gender equality of paid workers. It is important to note that this dimension shows the least change over time of all four dimensions. The third dimension is quality of care, which shows striking national differences. According to this, Sweden provided the highest quality childcare over the years studied, while Germany, Japan, and Korea performed lowest. By the end of the 2000s, the

countries show a reduced level of quality of care, largely attributable to the decrease in pre-school children enrolled at public facilities. This degree of reduction was found to be highest in the UK and Korea and lowest in Germany, France, and Sweden.

[Figure 2] Gender equality



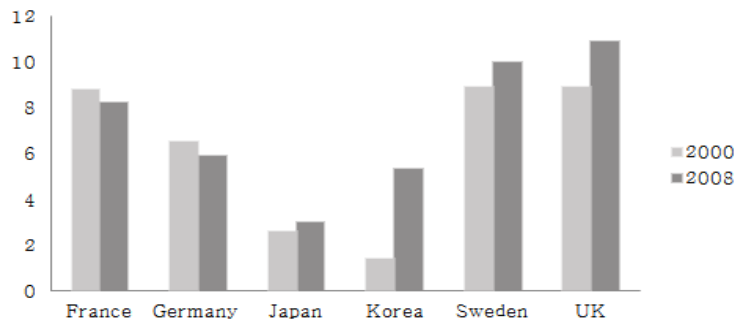
[Figure 3] Quality of care



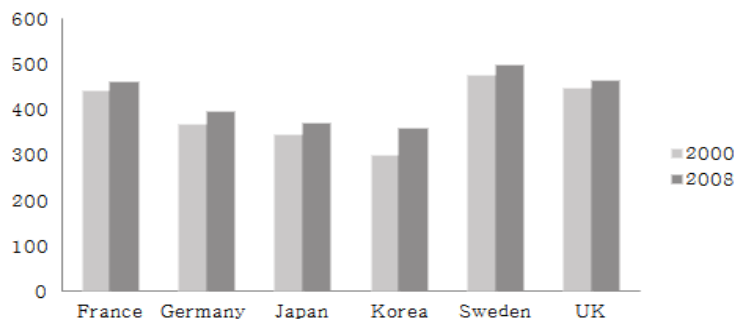
The fourth dimension is the degree of state intervention, which shows striking national differences. By the early 2000s, Korea and Japan were spending the least-an amount which accounted for only 15.7% of expenditures in Sweden and the UK. Over time, Japan, Korea, Sweden, and the UK demonstrated more intervention; Korea in particular increased its spending by nearly four times, approaching Germany. However, even with the increase, Japan and Korea rank lowest in spending among the countries under examination. Figure 5 shows the degree of social investment in care, which I sum up in terms of the values of the four

dimensions. It shows that during the 2000s, the social investment perspective on care was found to increase in all countries, Korea in particular. The UK also became closer to the levels of France and Sweden.

[Figure 4] State's intervention



[Figure 5] Social investment on care index



## 5. Discussions

Is it possible to classify nations? It seems feasible to group them into two based on the degree of social investment on care index (SICI): Sweden, France, and the UK as high SICI and Germany, Korea, and Japan as low. The high SICI group featured relatively high activation, gender equality, quality of care, and state intervention. By contrast, the low SICI member

countries demonstrate low to medium levels. A weak male-breadwinner family model is prevalent in Sweden (Lewis, 1992), which provides institutional structures with options for arranging childcare (Leitner, 2003) and childcare facilities as well as relatively long, well-paid leaves (Michon, 2008) (Table 1). Morgan (2012: 162) notes that the social investment approach in Nordic countries arose during the golden age of the welfare state, when the economic context favoured the greater involvement of women in the labour market. Social democratic governments have also supported the dual-earner model as a norm, with the expansion of public childcare services. In addition, the strong gender egalitarianism is attributed to the high proportion of women in government and the political parties of the left. France was classified as a moderate male-breadwinner family model and was found to be in the same group with Sweden, as optional familism in Leiner's analysis, and a coherent regime in Michon's work. Our results confirm the features of these countries in their legitimization of childcare during the 2000s.

The UK was also found by Lewis to lack gender egalitarianism (1992). With regard to activation and the role of the state, diverse ideas prevail. Leitner (2003) found that strong defamilisation was present in the UK in the form of institutional options offering care services provided by the state, market, and volunteer sectors, and a lack of support for family care (Leitner, 2003). In contrast, Michon (2008) classified the UK as a neutral model in which neither services nor supportive care policies are provided by the state; the family provides much of the care. Morgan (2012) argues that the decline in the working class base of the leftist parties in the UK has resulted in outreach to female workers which resulted in the path-shifting pattern in work-family reconciliation. Our analyses found that during the 2000s, state efforts to encourage women's involvement in paid work were noticeable and resulted in improvements in gender equality in paid work, in terms of rates and status.

While Sweden, France, and the UK might be grouped as one, it is also possible to divide them into two. The UK differs from Sweden and France in two dimensions: Gender equality in paid work and quality of care. The higher reliance on market solutions is distinctive to the UK. The number of children in public facilities in the UK was found to be the smallest

among the high SICI group. In addition, the country demonstrates lower female labour market participation and wages. According to OECD (2009), Swedish men spent on average 78.8% of the time spent by women on unpaid care work, French men spent 60.6%, while British men spent 54.3%. This means that as far as gender equality is concerned, the UK performs lowest among the high SICI member countries.

The low SICI countries also can be further divided into two: Germany differs from Japan and Korea. Germany was classified as explicit familism, in which families are actively supported in their caring activities (Leitner, 2003). Michon (2008) had a similar view. Our analysis shows that although their efforts were not strong enough to catch up to Sweden, France, and the UK, gender equality in paid work and state intervention in terms of social spending are greater than that of their East Asian counterparts. Morgan (2012) suggested that the Social Democratic Party of Germany sought to increase women's party involvement by adopting policies in support of the employment of mothers.

Japan and Korea were lowest in all four dimensions. By the early 2000s, Japan pulled ahead of Korea in its activation, gender equality in paid work, quality of care, and state intervention, but by the end of the first decade of the century, Korea was ahead of Japan in these areas except the quality of care dimension. This may be related to the features of political discourse. In Japan, family policy reform initiatives have increased and expanded in scale since the 1990s. The overall direction from the 1990s to the middle of the last decade was to provide more public support for care services while accommodating female labour market participation and addressing low fertility rates. However, it is important to emphasise that there has been a strong disparity in normative ideas about care. One side of the argument emphasises gender equality and the balance between work and family; this side has made childcare policies more interventionist through the expansion of leave systems and formal childcare facilities. At the same time, the traditional paradigm has persisted. This side claims that childcare is the responsibility of the family, and that the role of society and the state should be limited to providing supplementary support.

State intervention began in the 1990s in Korea but became more noticeable in the first decade of this century. Various lines of reasoning for the expansion of childcare services have prevailed in the political arena, such as pro-birth policies and work-family reconciliation. The state's interventions in childcare increased continually during the two centre-left governments of Kim Dae Jung (1998-2002) and Roh Moo Hyun (2003-2007), and the rightwing government under Lee Myung Bak (2008-2012). Peng (2004) highlights the success of the progressive agendas of centre-left governments and the role of the feminist agencies of these governments. Party politics worked efficiently to attract young voters in the elections for the second government of the left (Fleckenstrin & Lee, 2012). Korea has now become larger than Germany in their female labour market activation efforts, and similar to them in terms of state intervention through social spending. Our analysis provides empirical evidence confirming that the UK has become a strong path-shifter, while Germany has been a moderate shifter. Furthermore, we found that Korea has become one of the moderate shifters, and that Japan shifted their paradigm least towards childcare.

Does social investment have the potential to be an effective paradigm for care? From a normative viewpoint, the social investment approach stands on its own merit. It has the potential to expand women's social rights as paid workers, raising children as citizens who have the right to receive good-quality care, and repositioning the relationships between the state, market, family, and community sectors. Therefore, the social investment approach would contribute to social cohesion. However, the state's efforts to activate mothers have not coincided with good-quality jobs. Moreover, childcare expansions during the last decade have failed to make significant changes in gender equality for unpaid care work. Jenson (2009: 1) noted that adult women's claims for equality and attention to their needs are sidelined in favour of children. Further, the expansion of the state's role has increasingly involved market solutions, which carries risks of varying degrees of the quality of childcare services. This in turn might result in social and economic inequalities during early childhood, representing the failure to end the inter-generational transmission of disadvantage. In order for the social investment perspective to become a new paradigm for care, we must strive for the provision of

universal childcare services quality-controlled by the government, generosity in parental leave with job security, support for fathers as childcare providers, and activation of women in the labour market with good-quality jobs.

## 6. Concluding remarks

This paper examined how the social investment perspective could be utilized as a tool for a comparative analysis of care arrangements. This paper has found its usefulness. While previous analytic endeavours have exclusively addressed only a few dimensions—gender relations, familisation/defamilisation, or responsibility mix—the social investment perspective brings useful insights derived from a comprehensive analysis of the similarities and differences of varying degrees across countries.

The changing paradigm towards childcare is welcome; however, low-quality employment opportunities would not do much to ameliorate the two-track welfare system of full-time paid workers, mainly men, and part-time female workers. Regarding quality, good childcare is requisite in order to adequately reduce the caring burden on mothers; we also need to consider whether children's right to good care is being recognized (Hubenthal & Ifland, 2011). In addition, the relationship of mothers to the welfare state should be considered in parallel with that of the state, husbands, and family. Without changes in the gender division of unpaid care work, the social investment approach will not be significantly different from previous welfare paradigms.

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## 스웨덴, 프랑스, 독일, 영국, 일본, 한국의 아동 돌봄 체제와 사회투자에 대한 비교 연구\*

안미영\*\*

본 연구는 사회투자접근의 돌봄 체제의 국가 간 비교에 대한 분석학적 가능성과 유용성을 논의하고, 2000년대 스웨덴, 독일, 일본, 한국, 영국의 아동 돌봄 체제 변화에 대한 분석을 그 목적으로 한다. 이를 위해 노동시장 활성화, 양성 평등, 돌봄의 질, 그리고 정부의 개입 정도를 분석하였다. 휴직제도와 돌봄 서비스 이용 아동비율을 고려하여 노동시장 활성화를 측정하였다. 양성평등의 경우, 노동시장에서의 양성평등에 집중하였으며, 25-54세 여성의 노동시장 참여율, 종사상의 지위와 성별 임금 격차를 고려하였다. 돌봄의 질은 돌봄 서비스의 질로 선생님 1인당 아동 비율과 정부가 제공하는 돌봄 서비스를 이용하는 아동의 비율을 포함하였다. 마지막으로 정부의 개입 정도는 가족에 대한 사회지출의 GDP 대비, 총 사회비출 대비를 이용하여 측정하였다. 본 연구는 아동 돌봄에 대한 높은 사회투자관점은 스웨덴, 프랑스, 영국에서 발견한다. 이 국가들은, 높은 활성화 정도, 노동시장에서의 양성 평등도, 높은 돌봄 서비스의 질과 가족에 대한 사회지출이 상대적으로 높은 나라들이다. 반면, 독일, 한국, 일본은 낮은 사회투자적 돌봄 체제로서 상대적으로 낮은 활성화, 양성평등, 돌봄 서비스의 질 그리고 국가에 의한 개입을 보이고 있다. 또한, 영국은 스웨덴과 프랑스와 세부적인 성격을 달리하는데, 상대적으로 낮은 양성 평등과 돌봄 제공으로서 시장의 기능에 대한 높은 의존성이 두드러진다. 독일은 동아시아 국가들과 낮은 사회투자정도로 동일하나, 상대적으로 높은 정부의 가족에 대한 사회지출과 노동시장에서의 높은 양성평등 면에서 상이함을 발견한다. 영국, 독일, 한국 그리고 일본은 아동돌봄에 대한 기존의 패러다임에서, 정도의 상이함은 뚜렷하게 보이나, 정책적 발전에 있어 체제 전환을

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보이고 있다는 점에서 동일하다. 사회투자 관점은 돌봄체제의 국가 비교 연구의 분석학적 틀로서 그 유용성이 두드러진다고 하겠다. 정책의 변화에 따른 여성의 사회권뿐만 아니라, 돌봄 수혜자인 아동의 사회권에 대한 중요성을 부각시키며, 또한 정부, 시장, 가족, 지역사회간의 새로운 책임 분배 체제를 구축할 수 있는 가능성을 가지고 있기 때문이다. 사회투자적 접근이 돌봄 체제의 나아갈 방향으로 적절한 것인가? 이는 무급가사노동의 양성 평등, 여성 유급노동의 질적 개선, 국가에 의해 관리되는 보편적 제공 등의 도전과제의 해결을 통해 가능할 것이다.

**주제어:** 아동 돌봄, 사회투자, 노동시장 활성화, 양성평등, 돌봄 서비스 질, 가족에 대한 사회지출

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