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Family-provided long-term care and its coverage in European pension systems

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Abstract

Objective: In this contribution, the question is raised in how far family care work is covered in the social rights of European welfare states, focussing on pension entitlements for family-provided long-term care.

Background: Old-age pensions are the major redistributive system of present-day societies. Central to current discourses on pensions and their reforms is the relevance of work as paid employment for building up pension rights. Family care work is largely disregarded, although established welfare states broadly cover also this work form in their pension systems.

Method: By applying the SCQual method, this article systematically quantifies current pension entitlements for family-provided long-term care in ten European countries, and their change. It reflects on the results by means of testing assumptions drawn from the most relevant research strands in the field and contributes to contextualising cross-national variation and change.

Results: The results show that pension entitlements for family-provided long-term care are found in most of our study countries, and that all the assumptions deduced from the literature, with regard to both cross-national variation and change in entitlements, are refuted by the empirical findings.

Conclusion: This study contributes to both the conceptual challenges of comparative welfare state research in general, and the concrete analysis of social rights entitlements. These are based not only on paid employment, but in most European countries also on family care work, as has been shown here. The conceptual differences and changes are fruitfully addressed in this contribution.

Key words: family care work, social rights, international comparison and change, SCQual-method, quantification, comparative welfare state analysis, conceptual challenges, social orders



1. Introduction

In ageing societies, long-term care is a hot issue. Ageing alone, though, has not transformed long-term care supply into a societal challenge, since other issues strongly factor into this problem. Among them are the lack of professionals in long-term care services and facilities (and the various reasons for that), the ongoing debate of what good care is and how this relates to being cared for at home – perhaps within the family – or in a care institution, and the effects of professional or familial care supply at the various societal levels, from micro to macro. While for childcare a relatively clear idea has been developed and widely accepted of the different phases and providers of care that impacts on all societal levels, this is not the case for care of the frail (Brandt et al. 2023 in this special issue). In concrete terms, in some countries childcare social policy frameworks have been developed that combine some labour market interruption – enabled by benefits and employment rights – with social services and social security, but for long-term care the social policy frameworks are much less established. As a consequence, long-term care is strongly connected with economic drawbacks and increased risks of poverty, often for the person in need of care, or for caring family members who still play a major role in long-term care supply. Against this background many policy reforms can be observed. One tendency is to transform care work by family members – in parallel with childcare – from informal into semi-formal work (Geissler and Pfau-Effinger 1995) with related labour and social rights (Frericks et al. 2014). But the extent of these rights and their development are still little understood, particularly from a systematic, comparative perspective.

This contribution aims to shed light on the extent and development of these rights, but for conceptual and methodological reasons, it restricts the analysis to pension entitlements. The conceptual reason borrows from Kohli's (1986) life-course approach: that pensions are a society's valuation of people's contributions to the intergenerational and intragenerational contracts of society, which includes the provision of care. The methodological reason is that systematically comparing social rights is a highly challenging undertaking in methodological terms, and restrictions are inevitable. For these reasons I address pension rights for long-term care provided by family members: to what extent is long-term care provided by the family covered today in the pension rights of European welfare states, and how has this coverage changed over the past decades? To address this, pension entitlements for family-provided long-term care will be systematically quantified and compared by means of the SCQual-method that had been developed for this kind of analysis. Drawing on the relevant literature in the field, assumptions about both the international differences and changes will be made, tested and discussed. The aim of this contribution is to get a clearer picture of welfare state differences in this regard and in particular the conceptual challenges they present.

The contribution is structured as follows. After an overview of the research most relevant to this concern, assumptions pertinent to this investigation will be developed. Then the methodology and the applied method will be set out in detail, from which the findings will be presented. The major conceptual challenges of this welfare state comparison are then discussed in the conclusion.

2. State of research

Care supply by family members is a basic characteristic of most non-human and human animals. With the rise of social orders that refer to much bigger groups than the family or tribe, family care work started its long way towards a reconceptualization that is still far from being completed. Nation states and their corresponding institutions, as the prominently developed and still enforced social order, links persons who have perhaps never seen one another. They do so by collectivising and reducing a variety of social risks and, in part, by establishing care services. Within these so-called welfare states though, family, and the care provided by it, always formed part of the societal care arrangement, and it has been pointed out that it is not even possible to eliminate all care responsibilities from families (Fraser & Honneth, 2003). In the foundational concepts of the welfare state (Marshall, 1950; Titmuss, 1974), family and family care was already an implicit and uncontested part of social orders. These early concepts of the welfare state were then strongly criticised for their inherently gendered conceptualization of citizenship (Lister, 2003) and their ignorance of care work in it. And up to now, the position of care in current societies is unclear if not contested, both theoretically and politically.

The current debate on care supply by family members is highly controversial, and in part schizophrenic. On the one hand, women, as the still most involved in family care supply – should be “free[d] ... from the burden of family obligations” to fully and uninterruptedly participate on the labour market (Esping-Andersen, 1999: 88; also Korpi, 2000; and currently mainly studies that apply the so-called social investment paradigm, e.g. Hemerijck, 2018). This perspective is informed by different narratives: One addresses the wellbeing and financial independence of the woman herself, another the financial situation of the children, and again another is informed by macroeconomic interests. On the other hand, new value has been put on family care supply, again referring to different narratives. Among these are that children are best cared for in a care arrangement, that strongly includes also the family. Frail older persons, again, often wish to be cared for at home, and are considered most adequately cared for there, with family members involved in the care arrangements.

Another narrative in favour of care supply by family members focusses on the costs related to long-term care supply and advocates at best some low-level cash transfers to family carers in order to keep public spending low. And while one strand of literature advocates fully professionalised care so that each adult in the family can uninterruptedly participate on the labour market, and another one advocates care supplied by family members perhaps to reduce public costs, there are also concepts that combine these two extremes. One of these concepts emphasises choice of family members between both options and has been identified in some countries’ social policy framing (Pfau-Effinger & Rostgaard, 2011). Another concept, identified again in some countries’ social policy framing, combines concurrent labour market participation and familial care supply, enabled by specific social and labour rights (Frericks et al., 2014).

Despite these conceptual contradictions in the debate over family care, data show that women are still much more than men involved in the familial care both of children and frail family members (European Commission 2020). This family care supply is accompanied by reductions in labour market involvement in form of reduced working hours, interrupted labour market participation and reduced ambitions for careers and income. The cultural scripts around family care supply and the factual care situation are accompanied by a social order with its concrete regulations that react to, or stimulate particular care arrangements. In the past, European social orders with regard to care were mostly built on the female carer supposition that is embedded in the male breadwinner and family wage concept (Land, 1980; Fraser, 1994; Pfau-Effinger, 2005). The maintenance of family carers was guaranteed via the “head of the household’s” income and derived social security. Some European countries applied a more egalitarian approach that interpreted care less as a private issue than as a societal task, such as particularly childcare in some Northern European countries. Here, care tasks were to a very great degree transferred to the public sphere – social services or care institutions (Pfau-Effinger, 2004). Despite this socialisation of care, even in these countries many women continue to provide care and reduce their labour market participation and more than men do (for an overview, see Frericks et al., 2006; Frericks, 2015).

Country differences in social orders and care arrangements are in part reflected by the social rights established in them. In countries where the family is considered the major locus of care supply, the maintenance of the family carer forms part of the social rights order. Here, derived rights for the carer play an important role. In these countries, welfare state reforms and social policy change led to a decrease in family-related derived social rights, such as widows’ pensions. To interpret this change as deleting family-related rights and restricting social rights to those resulting from individual labour market participation only (the so-called adult worker model, Lewis 2004) would fall short of explaining the development. Family-related rights have not only been reduced; on the contrary, it has been shown that family-related rights have increased in many countries (Geissler & Pfau-Effinger, 2005; Knijn & Kremer, 1997), as have the resources attributed to them (Ferragina & Seeleib-Kaiser, 2014). In fact, I showed elsewhere that family-related rights have not simply been reduced, but instead robustly transformed from formerly derived rights into rights based on family care and granted to the caregiving individuals in the family (Frericks, 2013). This identified transformation will be verified here.

In countries that follow a more egalitarian approach, instead, social rights are also more egalitarian by universal and residency-based rights, particularly so in terms of pensions. Here, transformations are observed that increased the importance of the role of labour market participation in these countries’ pension systems (Frericks et al., 2006). Whether this transformation impacts on the care arrangement in those countries in terms of building up pensions will also be investigated here.

A review of the relevant literature shows us that, while social rights have been widely analysed also in a comparative perspective and in regard to their change, social rights related to family care, and in particular

family caregivers' pension entitlements, are still a kind of "black box". Conceptually, they have not been adequately grasped as an implicit part of social rights related to family, and still await empirical investigation now that family care is developing into a form of semi-recognised, semi-insured, i.e. semi-formal work (Geissler & Pfau-Effinger, 2005) accompanied by a shift in the direction of entitlements from the family to the individual (Frericks 2013). This study contributes to this special issue on care for older people by addressing the question in how far long-term care work by family members is covered in the social rights of European welfare states (for childcare work by family members, see Frericks, 2022, and Frericks et al., 2008). And since the mapping of social rights coverage in an international comparison is methodologically challenging, the focus is on pension entitlements (for employment and social rights, see Frericks et al., 2014). Finally, as welfare state research addresses intensively the issue of change, the different perspectives on welfare state change will be discussed with regard to the pension coverage of family-provided long-term care.

3. Assumptions

Comparative welfare state research has distinguished different types of welfare states. These types, generally referred to as welfare regime types, have been suggested to be valid independently of the focus of analysis. This is also true for research on welfare state differences with regard to family, or, as Mary Daly sums up: "The general consensus in the field on the basis of the gender-oriented typologizing is that the countries of the EU cohere into five main groupings in terms of their family/gender model." (Daly, 2020: 40). Also comparative studies of specific family policies reaffirm this country grouping (Naldini & Long, 2017). For reasons of connectability to established studies and for comparability, also this study will analyse family-related pension entitlements in countries of the identified regime types.

Different to the welfare regime typology, though, this investigation of the coverage of family-provided long-term care work in pensions distinguishes in its assumptions only between two major groups of countries – those with and without familial care-related pension entitlements. This perspective can be deduced from the literature on welfare state differences itself with its focus on the respective social order and the care arrangement. For social-democratic welfare states, for instance, with their egalitarian social order that expresses itself in residency-based "people's pension" and socialised care supply not only for children, it is reasonable to assume there are no pension entitlements for family-provided long-term care. The cases we analyse of this type are Sweden and Denmark. In countries of the liberal regime type, again characterised by an egalitarianising social order but through market mechanisms, the same lack of long-term care-related pension entitlements can be assumed. This time, the non-existence of family care-related pension entitlements draws on the principle of minimal state intervention that is violated only in order to reduce poverty (already in Marshall, 1981; Mahon, 2008). For the liberal welfare regime type, we analyse the UK and, as post-socialist countries generally seen to belong to the liberal regime type, Estonia and the Czech Republic (Cerami & Vanhuyse, 2009). Consequently, for these very different countries that represent the liberal, the post-socialist liberal, and the social-democratic welfare regime types, we assume we should find in our investigation – for different reasons – the same absence of pension entitlements for family-provided long-term care work.

On the other hand, we do expect to find pension entitlements for family-provided long-term care in other countries that represent still different regime types. The reasons for this assumption again originate in the welfare regime literature. First, in conservative countries where family is constructed as the main carer, one can expect entitlements for care supply by family members. Here, families were once the unit of traditional gendered roles, with the male breadwinner partner and the female carer partner, and a strong tradition of derived, family-related social rights. Of the identified countries of the "classically" conservative regime type, we analyse Germany and France, and as a post-socialist country that has widely been interpreted as conservative, we take Hungary (Cerami & Vanhuyse, 2009). Family as the main care provider also forms part of the social order in Mediterranean countries. That there should be pension entitlements for family-provided long-term care also in these countries, is less self-evident though, since they are already identified as countries that are "familialised by default", which is mainly due to the absence of policies towards care (Saraceno, 2016). Nonetheless, also in these countries pension setups in particular refer to the family as the unit of social rights, so that they may be interpreted as gender role-related entitlements of the Mediterranean life-course regime. Despite the uncertainty of assumptions as to

southern European countries, we investigate them empirically and add them to the group assumed to offer care-related pension entitlements. For this country group we analyse Italy and Spain. Consequently, for these very different countries representing the conservative, the post-socialist conservative and the Mediterranean welfare regime types, we assume the finding will be – for different reasons – the same, which is: the existence of pension entitlements for family-provided long-term care.

Table 1: Country selection and assumptions

Group	Regime Type	Analysed country	Mandatory “second pillar” schemes in addition to public scheme	Relevant regulation principle	Assumed pension entitlements for family care work
1	Social-democratic	Sweden	Yes	Egalitarian social order and pensions in the form of the residency-based “people’s pension”	None
		Denmark	Yes		
	Liberal Post-socialist liberal	UK	Yes	Egalitarianising through market mechanisms; minimal state interventions	
		Czech Republic Estonia	Yes		
2	Conservative	Germany	No	Family as the main carer: care work is traditionally covered via the family breadwinner and family membership	Yes
		France	Yes		
	Post-socialist conservative	Hungary	No		
	Mediterranean	Italy	No		
		Spain	No		

In addition to verifying these assumptions on international variation, also studying change in pension entitlements for long-term care provided by family members deserves attention. Relevant to this analysis are three of the literature’s main premises on change. First, the concept of individualisation identifies an increasing importance of the adult worker model in European welfare states along with a decreasing relevance of family and care-related social rights entitlements (Lewis & Giullari, 2005; Hemerijck, 2018). This can translate into assumptions for our analysis: in countries where in the past care work was covered by pension entitlements, the extent of this coverage has decreased, and in those where care work played no role in the past, it has not gained any importance. Another major strand interpreting welfare state change is the idea of retrenchment (Starke, 2006; Blum et al., 2014): that the financial pressure on welfare states has led to a decrease in welfare state “gifts”, including all entitlements not directly related to monetary contributions. The assumptions we can derive from this are the same as those based on the adult worker model: in countries where in the past care work was included in pension entitlements, the extent of this coverage has decreased, and in those where care work played no role in pensions in the past, it has not gained any importance. A third major interpretation of welfare state change is that of path dependency (markedly so in Esping-Andersen, 1990 and 1999; Béland & Powell, 2018). Here the differences, and with that the division of countries, are interpreted to be more or less permanent. In terms of pension entitlements for family-provided long-term care, the related assumption is that no relevant developments will be observed.

4. Method

The focus of investigation is the coverage of family-provided long-term care work in European pension systems. Consequently, the data this contribution needs to analyse is regulations to identify the social rights, in pension terms, that the different countries stipulate for family-provided long-term care. Outcome data cannot depict entitlements, as many other factors influence factual pensions (for a detailed discussion, see Frericks, 2017). The focus of analysis is therefore pension entitlements due to family care. Here, two clarifications are needed to explain the analysis that will be provided. First, the financial independence of family carers is not addressed because final pensions strongly depend on entitlements other than caregiving-based ones that cannot for various reasons be included here. The aim is, instead, to show the

degree of care-related pension rights as a share of pension rights in the pension system. Second, the analysis is comparative in nature and consequently does not identify a concrete monetary amount of the long-term care-related pension entitlements, since this amount could only be interpreted against the background of the national pension system and its generosity in relation to, for instance, the national median income. Instead, the analysis will identify the role that pension entitlements for family-provided long-term care play in the different pension systems: in concrete terms, the percentage these care-derived entitlements can constitute out of one's total pension entitlements.

To do this we need to identify a pension level that can be compared between the different countries. The pension level decided on is the construct of so-called full (or adequate) pensions, a central institution established by the different welfare states. This construct differs by country (or life-course regime; see Kohli, 1986) and sets different life-course norms that need to be fulfilled to build up this full pension. It includes residency in some countries, care of children in others, study or unemployment periods in again other countries and, at this stage, labour-market participation in all the analysed countries (Frericks, 2014). In how far this construct also contains family care work in terms of long-term care is at the center of this investigation.

Importantly, this concept as the particular pension system's setup for achieving full pensions, strongly differs from the concept of poverty-preventing pensions, which are not analysed here (see Marshall 1981, Frericks, 2013). The "full pensions" addressed here are public pensions, and in some countries are added to by obligatory supplemental schemes. This construct and its target level differ from factual final pensions, since other resources might add to final pensions, while the target level of full pensions might not be reached, given that it is a construct. This construct, though, shows us society's valuation of people's contributions to the intergenerational and intragenerational contracts of society that include care – to borrow from Kohli's (1986) "life-course" approach that I have further developed elsewhere (Frericks & Maier 2012).

Obligatory supplemental schemes exist in six of the ten study countries. This study analyses both (obligatory) schemes in these countries and weights them on their relevance to reaching full pensions (see example below). Obligatory supplementary schemes are analysed for Denmark (ATP and Folkepension), France (Régime Générale and the obligatory occupational pension programmes AGIRC resp. ARRCO), Sweden (in 1993: Folkpension und ATP, in 2020: inkomstpension and premiepension), the UK (Basic State Pension (BSP) and the Additional State Pension (1993 SERPS; 2020 State Second Pension (S2P)¹), Estonia (Pension insurance and kogumispension) and the Czech Republic (Flat-rate basic pension and pension insurance).

The focus here is on familial long-term care supply; therefore data are included on the long-term care of a partner and other frail family members. Pension regulations related to special care needs of (e.g. disabled) children are not included. This decision is based on the fact that most countries have particular regulations for special care needs that are, in general, not discussed in the debate on long-term care. Also, in a systematic comparative analysis such as this, to include the various special care-related regulations with their interrelatedness and the many exceptions with regard to long-term, care-related entitlements, and to try to correctly quantify them would overload the empirical analysis of this contribution. Where special care needs of adults form part of the definition of long-term care, as in the Czech Republic, they are included in the analysis and their particularity is taken into consideration by weighting. We analyse explicit entitlements for familial long-term care work. Status-derived rights such as those based on marriage are not considered since the focus is on care provision and its pension valuation. When a country's regulations add further conditions to that of being a family member and supplying long-term care, such as living in the same household, the data is weighted systematically.

To be able to measure the pension entitlements in a comparative manner, this study applies a newly developed method for analysing welfare-state regulations, the Method for Systematic Comparison of Qualitative Data, called SCQual (Frericks, 2021). It is based on Weberian ideal types and allows us to span a space of characteristics in which the empirical markedness of institutional regulations can be precisely identified between ideal-typical corner marks. Here, this is the measuring of complex social rights that depend on numerous conditions that need to be quantified into ordinal scales. The space of characteristics that is spanned for this analysis is between zero (no entitlements for familial care supply – null per cent) and 1, which is full pension entitlements built up for long-term care supply to a family member only (100 per cent).

1 The resetting of the basic and additional pensions for new pensioners has not been included here.

From what has been said about the reasons for building up pensions, it is obvious that these two extremes are ideal points of the most extreme markedness. And since we investigate two of these ideal points (full pensions based on long-term care entitlements for a partner's and/or frail family member's care) in relation to their opposite (no entitlements for long-term care), the ideal-typical space of this investigation is a square, and the highest possible combined value is 2 (for details, see Frericks, 2021). What this method allows us to do, in other terms, is to reduce complexity and in-depth case study description to, instead, systematically quantify qualitative data to facilitate our cross-country and historical comparison.

The data for this analysis are drawn from international databanks on the regulation of social rights. Two data sources informed the analysis – the International Social Security Association (ISSA), and the Mutual Information System on Social Protection of the European Union (MISSOC). Where possible, information on the regulations has been confirmed by related research studies and national databases. Where the databases contradicted each other or were unclear in the concrete calculation of entitlements, and other studies could not clarify the specific regulation, it was not included in the calculations. Thus only double-checked data were used and are presented in the findings. As a consequence, the findings display only the minimum degree of familial long-term care work coverage in pensions. The possibility of a higher coverage though does not harm the result of this contribution.

The years of investigation are 2020 for the most recent regulations at the time of study, and 1993 so that the eastern European countries could be included in the analysis without their being too distant from the original welfare regime study characterisation, since we build on that study's assumptions.

The calculation of pension entitlements based on family-provided long-term care is straightforward and yet complex, thus requiring explanation and exemplification. The basic rules for the calculation are the following. First, one has to calculate the values within the logic of the particular pension system. Second, all regulations that entitle family carers to pensions that might help them reach their full pensions are included in this calculation. Third, in every country the conditions imposed on these entitlements differ and enter the calculation in forms of weighting that follow the logic of the very pension calculation. Since for all systems all relevant regulations are considered, the calculation rules and the level of full pensions are strictly applied in every case, and the data are sound and transparent, direct comparisons of the share of long-term care-related pension entitlements in the different countries' pension logics are possible. If this calculation is repeated by other researchers, only their applying a somewhat different weighting might change the results; but the comparative insights of this investigation would not be put thereby into question. To make this as transparent as possible, we now look at the calculation of pension entitlements for long-term care for two of the study countries.

In the German case these entitlements have to be interpreted as obtaining possible "pension points": these depend on reducing or interrupting one's labour-market participation for a minimum number of months per year and hours per week, during which one provides care, and at the long-term care level as professionally assessed. For the calculation here, we take as the row value the mean of the minimal and maximal entitlement one can get for providing long-term care which is, in 2020, at max. 0.8 "pension point" and at least 0.267 of it, resulting in a row value of 0.53. The conditions explained above are included in terms of the weighting. Here, the entitlements depend on three conditions that affect the final entitlement value by weighting (each by 2/3, see Frericks, 2021). The conditions are: a restricted labour-market participation of the carer (weighting 1); the cared-for person's entitlement to care benefits (weighting 2); and the provision of the care at home (weighting 3). In the German case, regulations do not distinguish between caring for the partner or for another family member. For either, the value of entitlements for familial care supply is, consequently, 0.16.

A second example explains the entitlement calculation for a country with two pension schemes – the UK. In both the BSP and the S2P there are entitlements for a familial long-term carer. They depend on different conditions, such as receiving either "Income Support" or "Carer's Allowance", or providing care at least 20 hours per week or receiving the "Attendance Allowance" or other social benefits. Pension entitlements might add up to 22 years in this care situation. Within the BSP, the calculation of the entitlement is 0.73 as the row value (22 years of the necessary 30), multiplied by the relevance factor of the BSP in the calculation of full pensions (which is 77%) and twice weighted, resulting in 0.25. The value within the S2P is calculated in the same way, only that the relevance of the S2P in the calculation of full pensions is the remaining 23%, resulting in a value of 0.05. Taken together, since we are interested in the entitlements to reach full pensions, the value for the UK is 0.30 (both for caring for a frail partner and/or a frail relative).

5. Results

The following presents the findings of the analysis, first the basic results, which are then linked to the assumptions made above. The first set of findings refer to current international differences; the second, to the changes between 1993 and 2020.

5.1 Differences

The data show that in eight of the analysed ten countries there are pension entitlements for familial long-term care supply (see Table 2). Only Sweden and Italy do not have any, and those of Spain are negligibly low (0.04). Somewhat more pronounced entitlements were found in Hungary (0.12) and Denmark (0.22). Comparable degrees of entitlements for long-term care can be observed for France (0.28), Germany (0.32) and Estonia (0.36). And much more pronounced are the entitlements in the UK and the Czech Republic (both 0.6).

With regard to international variation, the findings confirm the necessity to deviate from the country distinction of regime types. The “five main groupings in terms of their family/gender model” are, indeed, not found when care-related pension entitlements are put at the focus of the analysis. Controlling for the country groupings, we see that the social-democratic group is split, with Denmark having quite different degrees of entitlement for long-term care supply to those of Sweden. Sweden and Italy also show comparable values, as do Estonia, France and Germany. However, a distinction between only two groups of countries based on whether family care-related pension entitlements exist or not, was also not found. Instead, we see that, first, eight of our ten study countries do show pension entitlements for familial long-term care; these are four of five countries of both of our groups. And second, and consequently, two countries are “in the wrong group”, since both the assumption of finding pension entitlements for familial long-term care in Italy, and the assumption of finding none of these entitlements in Denmark, are refuted.

The assumptions were based on particular regulation principles such as the egalitarian social order and pensions in the form of the residency-based people’s pension in the social-democratic welfare states, which led us to assume no pension entitlements for family-provided, long-term care. The results show that this is indeed the case for Sweden. In Denmark though, there are considerable pension entitlements for family-provided long-term care. In countries of the liberal regime type, the assumption was based on the notion of minimal state intervention, mainly poverty prevention. This led us assume no long-term care-related pension entitlements here, but this is strongly refuted by the results: the UK and Czech Republic have the highest values for these pension entitlements, and Estonia’s are considerable. In conservative countries, again, we expected to find entitlements for familial care supply. Indeed, in Germany, France and Hungary, there are pension entitlements for family-provided long-term care; they are, however, much less significant than those of the UK and Czech Republic, and not higher, on average, than those found in Denmark. The doubts about care entitlements for the Mediterranean countries, instead, were justified: for Italy, the assumption is refuted, and Spain has only negligible pension entitlements for long-term care supply.

Table 2: Pension coverage for family care work in Europe, 2020

	Partner	Other	Total
Czechia	0.30	0.30	0.6
Denmark	0.11	0.11	0.22
Estonia	0.18	0.18	0.36
France	0.14	0.14	0.28
Germany	0.16	0.16	0.32
Hungary	0.06	0.06	0.12
Italy	0.00	0.00	0
Spain	0.02	0.02	0.04
Sweden	0.00	0.00	0
UK	0.30	0.30	0.6

Note: 0 = no entitlements; 1 = full pensions based on family care work only; total = added values (max. 2)

5.2 Change

Before discussing the findings on change, one should quickly look at the situation in 1993. It might be argued that 2020 is too distant from the original identification of the welfare regimes to adequately reflect assumptions about welfare regime types based on 2020 data, well after important pension reforms have been in place. But what about 1993? For that year, the assumptions based on regime types should still hold.

For 1993, five of the study countries did not have any pension entitlements for familial long-term care, and a sixth country had only negligible ones (0.02). Four of the countries show considerable pension entitlements for family-provided long-term care: Denmark (0.22), the UK (0.34), Hungary (0.44) and the Czech Republic (0.6). Thus also for 1993 the assumptions about pension entitlements based on relevant characteristics do not hold. The country with the most considerable pension entitlements is a post-socialist liberal one, followed by a liberal, a post-socialist conservative and a social-democratic – thus mainly countries about which we assumed there were no pension entitlements for familial long-term care work. The others – all of the different regime types – form one group with no entitlements, though mainly contrary to expectation. The two groups assumed to have or not have pension entitlements for familial care supply, again, do not hold.

That said, the third assumption about change, i.e. its path dependency, is already off the record. Path dependent – independent of regime type – are only four of our ten countries. Long-term care-related pension entitlements remained unchanged on a high level in the Czech Republic, unchanged on a considerable level in Denmark, and at zero in Italy and Sweden. The change in Spain is marginal, too, from no entitlements to a very low level of 0.04. The other five countries show a more pronounced development of change, up to 0.36 of change.

Table 3: Pension coverage for family care work in Europe, 1993 and 2020

	1993			2020			(Total)
	Partner	Other	Total	Partner	Other	Total	
Czechia	0.30	0.30	0.6	0.30	0.30	0.6	+0
Denmark	0.11	0.11	0.22	0.11	0.11	0.22	+0
Estonia	0.00	0.00	0	0.18	0.18	0.36	+0.36
France	0.00	0.00	0	0.14	0.14	0.28	+0.28
Germany	0.01	0.01	0.02	0.16	0.16	0.32	+0.30
Hungary	0.22	0.22	0.44	0.06	0.06	0.12	-0.32
Italy	0.00	0.00	0	0.00	0.00	0	+0
Spain	0.00	0.00	0	0.02	0.02	0.04	+0.04
Sweden	0.00	0.00	0	0.00	0.00	0	+0
UK	0.17	0.17	0.34	0.30	0.30	0.6	+0.26

What is remarkable, though, is not only the fact that five of the ten countries changed considerably their long-term care related pension entitlements for family carers, but also that only one country, Hungary, reduced theirs. Thus also the other assumptions with regard to change are refuted. To claim that in countries where, in the past, family care work formed some part of pension entitlements, the extent of this coverage has decreased, or that, in those in which care work played no role in the past, it has not gained any importance, contradicts the result of this study. These results show that of the five countries that did not have pension entitlements for familial long-term care supply, three introduced them, with two of them to a considerable degree (+0.28 in France and +0.36 in Estonia). Of the other five countries that did have such pension entitlements in 1993, only one reduced them (Hungary), while two did not change them and two considerably augmented their level (Germany +0.32 and the UK +0.26).

Table 4: Assumptions about change in care work coverage by pensions and their verification

Assumption	Approaches	Verification
No change expected for all countries	Path- dependency	Assumption refuted for 6 of the 10 cases
Decrease in entitlements expected for all countries with family care entitlements	Retrenchment policies, Individualisation	Assumptions refuted for 4 of the 5 cases where entitlements existed before, and for 3 of the 5 cases where entitlements did not exist before

To round off the findings, two observations are remarkable but could not be investigated in more detail here. First, in all the study countries and at both points in time, there is an astonishing consistency between the relative degrees of long-term care-related pension entitlements regardless of whether the cared-for person is one's partner or another family member. Second, the assumptions about the countries' differences in terms of having or not having long-term care-related pension entitlements have not only not been confirmed, for 1993 there is rather the opposite of what was assumed. For 2020, after an increase of care-related pension entitlements, expecting to find two groups is, in hindsight, no longer relevant. But for good reasons it formed the starting point of our argument. The mainly contrasting picture of 1993 calls for in-depth debates between country experts over each single case, including reflections on the family wage, incentives to provide family care or strongly participate on the labour market, costs reductions for the public purse by means of cheaper family carers, and many other rationales that build the foundation of the various national welfare systems, including pensions and care. These debates however cannot be adequately approached here.

6. Discussion and conclusion

In this contribution the first question raised is in how far family care work is covered by social rights in European welfare states, focussing on pension entitlements for family-provided long-term care. This question is relevant for several reasons. First, the location of long-term care is time and again discussed, with care at home often preferred by different actors, either policymakers or the personally affected persons. Long-term care, or at least parts of it, is often held to be best provided by family members. In times that require individual labour-market participation, in particular in order to build up adequate pensions, this contradictory situation requires a fundamental discussion over the valuation of familial care supply. Indeed, our understanding of the options for and challenges of pension entitlements for familial care work, and long-term care supply in particular, is still in its embryonic stage.

Here, I have mapped social rights coverage in an international comparison and reflected on assumptions about international differences inferred from the literature. To meet the methodological challenge of mapping social rights, the study's approach applies the newly developed SCQual-method that perfectly fits its aims. The most important insights from this investigation are that pension entitlements for familial long-term care supply to either the partner and/or other frail family members (excepting those with special care needs) are found in most of our study countries. In addition, the most comprehensive entitlements were found in the UK and Czech Republic, i.e. in countries in which entitlements for familial care supply had been expected the least.

The second question concerned change; the different ideas about welfare state change therefore had to be analysed and discussed with regard to the coverage of family-provided long-term care in pensions thirty years ago and today. The findings contradict assumptions drawn from the literature. The first assumption is that in countries where in the past care work formed part of pension entitlements, the extent of this coverage will have decreased in the meantime; and in those in which care work played no role in the past, it will not have gained any importance. A second supposition is that differences, and with that the fundamental division among countries, are more or less permanent, leading to the assumption, in terms of pension entitlements for familial long-term care, that there will have been in the interim no relevant developments. The results of this investigation, however, refute both ideas on welfare state change, as there has been considerable change in at least half of the study countries: an increase in pension entitlements for familial long-term care supply. Only Hungary has significantly reduced these entitlements.

On these results, one might ask what knowledge is gained from ending up with only unexpected findings. Indeed, it is pleasanter to present data that fit the general assumptions or follow a clear logic. In this case, though, it is difficult to identify a clear logic and present a nicely fitting story. There are various explanations for this inability. The most obvious is that comparative analyses in general focus on very different questions and they use very different concepts, methods and data. It has been shown earlier though that an analytical focus other than on decommodification yields different divisions among countries, and rather blurred ones, than regime types (Frericks et al., 2016; Saraceno & Keck, 2010). So the first lesson one might draw from this investigation is, that it is indeed necessary to develop further the concepts and methods we have for comparative welfare state research. And it is in particular the combined

analysis of different policy areas that needs to be further developed, as here with care-related pension entitlements.

Currently there are several ongoing attempts to do this by analysing so-called life-course policies (focussing on individuals, e.g. Frericks & Höppner, 2018) and the combined effects of different policies (for household incomes, see Frericks & Gurín, 2023; for specifically combined social risks in a particular life-phase, Eggers et al., 2022). These attempts have in common the change of analytical perspective: from a work-centered, mainly male and “average” viewpoint that addresses, in general, one type of policy, to a more reality-based perspective about access to and levels of combined social rights. Obviously, this brings forth new challenges in terms of combinable concepts and comparable data and methods, and particularly in terms of generalizability and overall typologising. However, to better comprehend welfare state differences, we need to collect and combine the different pieces of the welfare puzzle and further develop comparative welfare state analysis. The analysis presented here shows that even reasonable assumptions based on acknowledged literature may not help much to foresee what we empirically find. No more and no less.

A second issue for discussion is the identification of differences arising in conceptualizing pension entitlements for family-provided long-term care. We included these conceptual differences in the calculation of this analysis by means of weighting, but they require further investigation for a better understanding of welfare state differences in this regard. These conditions are, first, labour market interruption and employment reduction, which form part of the entitlement calculation in different ways. One is implemented as a dummy; thus only if labour market participation is interrupted are entitlements granted. The other one is that the concrete reduction in labour-market participation forms part of the entitlement calculation. A third way is to approve pension entitlements independently of the beneficiary's interrupting or reducing labour-market participation, a method that is increasingly applied to familial childcare but much less to familial long-term care (Frericks, 2022). Finally, some countries take a very different path such as in Denmark, where family carers can be officially employed in the public sector, with all the social and labour rights that this entails (Frericks et al., 2014). This option enables those providing familial care to build up pensions not only in the public schemes but also in the additional schemes (even those that are not obligatory) that in general depend on contributions from wages. In times of the increasing importance of (differently set up) wage-related pensions in all European countries (for change in the valuation of life-course activities, see Frericks, 2014), this valuation of care supply is particularly interesting. That a time-out from the (“real”) labour market or a reduction in labour-market participation often has considerable consequences for one's career and future income, is only mentioned here to point out that also gender-aware social policies have many pitfalls (Frericks, 2012).

The particularity of the Danish pension entitlements might be interpreted as well-fitting in the Scandinavian social order with its stress on labour market participation. While this is true on the one hand, on the other, the commodification of care work that we observe in this case is very different from the general understanding of commodification. It is clearly connected with the private domain and constructed as a kind of de-commodification rather than as commodification, so that, after having cared for a frail relative, people return – and have the right to return – to their former jobs. This is very different from the setup of the “employment” of a family member, as for instance in the Netherlands (see Frericks et al., 2014). These conceptual varieties need to be understood in detail, with all the reasoning behind them and their potential effects.

With regard to pension reforms, the individualisation of formerly family-based rights is identified, but, as argued above, as a shift from status-based, derived rights of a “family father”, wife or widow, to the care-based individual rights of the care supplier. That is, the rights are transformed into entitlements that are added to individual pension accounts (Frericks, 2013). This might, in part, explain the strong entitlements of liberal countries that focus on the individual (the Czech Republic, Estonia and the UK), and, in part, the very low to non-existent entitlements in Mediterranean countries (Spain and Italy) that are still highly familialising (Saraceno, 2022). This interpretation of care-related pension rights might also explain the marked reduction in entitlements in Hungary, a country seen as one that is heavily re-traditionalising. As for the study countries of the social-democratic regime type, the results show that not all of them consider “people's pensions” as solving the issue of familial care supply – not even 30 years ago when people's pensions were still serving their original function (for their change, see Frericks, 2013). The results also show that, indeed, family policies in Europe have been extended over the past decades (Ferragina & Seeleib-Kaiser, 2014), here shown for long-term care policies. Long-term care, though, is a subject that is contested if not ignored in the much promoted social investment paradigm (Hemerijck, 2018).

Finally, approaches to and concepts of pension entitlements for familial care work have been discussed with the aim to help stimulate new debates in comparative welfare state analysis. With regard to family care work, much more has to be done to broaden and sharpen our understanding of it in conceptual terms, and to examine the "pros and cons" of factual entitlements – within the pension systems in particular and social orders in general.

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Information in German

Deutscher Titel

Sozialrechtsansprüche für Familienarbeit: Rentenanwartschaften für familiäre Pflege im europäischen Vergleich

Zusammenfassung

Fragestellung: In diesem Beitrag wird die Frage beantwortet, inwiefern familiäre Pflegearbeit im europäischen Vergleich zu Sozialrechtsansprüchen führt. Hierzu werden Rentenanwartschaften analysiert, die aufgrund familiärer Pflegearbeit gewährt werden.

Hintergrund: Altersrenten bilden das umfassendste Umverteilungssystem gegenwärtiger Gesellschaften. Im Zentrum gegenwärtiger Rentendiskurse steht die Relevanz von Arbeit als Erwerbsarbeit, um Rentenansprüchen aufzubauen. Familiäre Pflegearbeit ist größtenteils ausgeklammert, obwohl etablierte Wohlfahrtsstaaten auch für diese Form der Arbeit den Erwerb von zum Teil erheblichen Rentenansprüchen vorsehen.

Methode: Unter Anwendung der SCQual-Methode quantifiziert dieser Beitrag für 10 europäische Länder systematisch gegenwärtige Rentenansprüche und ihre Veränderungen für familiäre Pflege. Um die internationalen Differenzen und die Veränderungen zu kontextualisieren, werden die Ergebnisse in Bezug zu Annahmen gesetzt, die von den bedeutsamsten Forschungssträngen auf dem Gebiet hergeleitet werden.

Ergebnisse: Die Ergebnisse zeigen, dass die meisten der Untersuchungsländer Rentenansprüche für familiäre Pflege vorsehen, und dass alle theoretischen Annahmen, die auf dem Forschungsstand beruhen, von der Empirie widerlegt werden. Dies gilt sowohl für die erwarteten internationalen Differenzen in den pflegerelatierten Anwartschaften als auch für deren Veränderungen.

Schlussfolgerung: Die Studie liefert einen wichtigen Beitrag sowohl für die generellen konzeptuellen Herausforderungen der vergleichenden Wohlfahrtsstaatsforschung als auch für die konkrete Analyse von Sozialrechtsansprüchen. Diese beruhen, wie diese Studie zeigt, bei Weitem nicht nur auf der Erwerbsarbeit, sondern in den meisten europäischen Ländern auch auf familiärer Pflegearbeit. Die konzeptuellen Differenzen und Veränderungen werden im Detail dargestellt.

Schlagwörter: Familienarbeit, Soziale Rechte, internationaler Vergleich und Wandel, SCQual-Methode, Quantifizierung, vergleichende Wohlfahrtsstaatsanalyse, konzeptuelle Herausforderungen, Gesellschaftsordnung

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