

Reshaping Gender and the Labour Force: A Comparison of Social and Industrial Policy Impacts in the Australian and Canadian Community Sectors

15th World Congress of the International Industrial Relations Association (IIRA)
Sydney, Australia
August 2009

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INTRODUCTION

Data from a recent qualitative study comparing the community or nonprofit social services (NPSS) sector in Australia and Canada shows that the workforce employs a number of strategies to balance work and family demands. While some strategies are markedly similar in the two countries, others respond to gaps in social policies and entitlements in the two countries suggesting that larger social policy as well as work place entitlements shape options for women's workforce and social participation. In particular, Australia's lack of entitlement to paid maternity leave and the inadequate supply of reliable, high quality, public or nonprofit childcare were cited as reasons why women in child bearing and mature years (55+) were leaving the workforce or reducing their working hours. Leaving work and reducing working hours has serious ramifications for this predominantly female sector that has difficulty recruiting and retaining staff (Australian Services Union, 2007; Victorian Council of Social Service, 2007). Data from this project show that Canadian NPSS workers also take time off work for family responsibilities but they use public entitlements (paid maternity leave and nonprofit services such as community child care) and workplace benefits (parental, unpaid, educational and sick leaves, as well as job sharing), thus remaining continuously connected to the work force. This paper will explore the strategies community workers in Australia and Canada use to balance work and family demands, and investigate the links between social entitlements and benefits and the ways women are able to remain attached to the NPSS work force, or feel compelled to leave it, or voluntarily reduce their participation. This paper will also reflect on the ways that workplace and public entitlements reflect and reinforce gendered expectations of who should take on paid and unpaid care work and how care itself reflects and shapes gendered notions of uncomplaining feminine self-sacrifice.

BACKGROUND

The NPSS provides support and care for a variety of populations including: homeless people, youth, children, elderly people, recent immigrants, survivors of violence, people with disabilities and so forth. Since the mid-1980s, multiple waves of restructuring have swept through the nonprofit or community social services sector in the developed countries introducing decreased funding, increased service demand and pace, the erosion of professional autonomy and discretion, and new managerial models such as New Public Management. These changes have lengthened working hours, cut jobs and wages, and eroded working conditions (Baines, 2004, 2009; Cunningham, 2008; McDonald and Zeitland, 2004). A commitment to idealistic missions and an opportunity to live one's values within one's work

life are thought to provide at least partial compensation for low wages and poor working conditions in the nonprofit sector (Cunningham, 2008; Nickson et al, 2008; Brock and Banting, 2001) however a growing body of data suggests that workers have their limits and are responding by job leaving, absenteeism and unionization (Baines and Cunningham, under review; Richmond and Shields, 2004).

A subsector of the larger nonprofit sector, the nonprofit *social services* is a highly gendered sector with women forming the majority of front-line managers and employees; some place female participation at 80% (Anglicare, 2006), others place female participation at closer to 75% (Saunders, 2004). Workplace issues facing the NPSS tend to be highly gendered in that they impact the female workforce in particular and often disproportionate ways, reflecting and buttressing larger societal expectations, policies and perceptions. R. W. Connell (1987) uses the concept of a gender order to analyze the ways in which societies shape notions of masculinity and femininity through power relations. The term, gender regime is used to describe the gender order as it works in smaller settings, such as workplaces, families or neighborhoods. These concepts provide a useful way to understand changing nature in the opportunities and barriers to women's full participation even in a predominantly female sector such as the NPSS. Much of the work in the NPSS is care work or a series of activities and emotional states aimed at producing change or support to those in need. Rather than a form of highly skilled activities and knowledge, care work is often viewed as an extension of what women do 'naturally' (Meyer and Storbakken, 2004). This has meant that it has been difficult to increase the wages and prestige of care work, and facilitated the movement of this work from the paid sphere back to the family.

The aforementioned waves of restructuring have increased the intensity and difficulty of NPSS care work. Rather than full-time, permanent, unionized jobs, new forms of private sector work organization have been introduced which emphasize flexible staffing arrangements such as: "thin" staffing such as solo shifts; lean shifts (one or two workers per site, sometimes with cell phone access to workers or supervisors at other sites); split- shifts (wherein staff work an hour or two in the morning and return in the evening for a few more hours of work); part-time, contract, casual, and other forms of temporary work; and expanded reliance on volunteer work (Baines, 2004; Aronson and Sammon, 2000). Economically, employees experience increased job insecurity, decreased income and few or no benefits, while agencies save costs in these same areas. Increased pace and volume of work, coupled with increases in both the absolute number of clients and the level of care required, mean that workers must constantly struggle to remain on top of their workloads adding to the challenges of work-family balance.

Though much has been made of the need for family friendly policies (Human Resources Development Canada, 2009; Burgess *et al.*, 2007), significant gaps remain. Foremost among these is the lack of paid maternity or parental leave in Australia. Currently, twelve months of unpaid leave is available to employees who have had 12 months continuous employment with one employer. Short term paid maternity leave of 7 weeks is available to Commonwealth public servants, and often for managers (65 %) and professionals (54 %) though it is less common for part-time and uncommon for new or casual employees (Australian Bureau of Statistics, 2000). Though paid maternity leave is seen as essential to "provide genuine equal opportunity for women" (Hill & Pocock, 2008), and has been promised by the current federal government, it remains a long sought, but still unrealized policy goal (Richardson & Fletcher, 2009).

In contrast, Canada provides 52 weeks of paid maternity leave through the federal Employment Insurance system.¹ Better workplaces often top up the government payments which are a percentage of weekly wages up to a maximum and extend the leaves.² Changes in qualifying requirements have

¹ Maternity benefits are paid for 15 weeks, and only a birth mother is eligible to receive these benefits. Parental benefits are paid for 35 weeks which can be taken by either parent for a total of 50 weeks (and may be added to Maternity benefits), plus a two week qualifying period for a total of 52 weeks.

² Government benefits are 55% of insurable earnings, up to a maximum of \$447 per week.

excluded a growing portion of the population, particularly those working part-time or in temporary positions.

High quality, accessible, community-based child care has also been seen as essential to women's workforce participation (Baker *et al.*, 2005; Cleveland and Krashinsky, 1998). Both Canada and Australia have had a mixed economy of child care including both the private and nonprofit. In 1972, the Australian Commonwealth adopted the Child Care Act which established that child care would be community-controlled, funded by the federal government and regulated by state government. Private child care was not eligible for government funding. A series of changes through the 1990s and early 2000s³, paved the way for private centres and corporate care to receive government subsidies. In short order, though they have recently declared bankruptcy, the ABC Centres, an Australian chain became the world's biggest child care provider. Starting with one centre in 1988 and listing on the Australian Stock Exchange in 2001, ABC Centres had 1095 private child care centres in Australia and close to that number in the USA, as well as smaller holdings in the UK and New Zealand. Receiving substandard ratings on quality of care indicators, working their employees long hours at low wages and driving fees up across the sector (Rush, 2003), the rapid growth of corporate child care changed the public perception of child care. An increasing number of parents felt compelled to keep one parent, almost inevitably the mother, out of the workforce to provide care for children. Grandparents were also called upon to provide child care (de Vaus *et al.*, 2003) with grandmothers more likely than grandfathers to provide care for family members outside their own home.

In Canada, plans for a universal, inclusive, comprehensive, high quality, community-based child care system have been developed repeatedly and have progressed as far as proposed legislation on more than one occasion, most recently in 2005. Unfortunately for child care, the Liberal minority government who proposed the program in 2005 fell before the legislation was passed. In short, despite widespread popular and political support, this policy has never made it into legislation. Instead, child care in Canada is mostly a patch work of community nonprofit centres, struggling to exist on municipal subsidies (via transfer payments from the federal government) and parent fees. Child care is funded through a series of transfers from the federal, provincial and municipal governments resulting in stark differences between and within the ten provinces and three territories. Though serious gaps exist in the availability of nonprofit child care and for-profits co-exist in many communities, this patchwork remains the dominant model in Canada with reasonable quality child care available in all urban communities as well as many smaller centres (Baker *et al.*, 2005).

At a national level, child care and maternity leave have been identified as important components of family friendly policy. However, very little has been written in an international, comparative context about how services and entitlements shape women's workforce participation in a more global context. Comparative studies provide the opportunity to learn from other jurisdictions and policy regimes. This question is particularly pertinent to the Australian NPSS where increasing numbers of women are failing to return to work after the birth of a child and very commonly after the birth of a second child while older women are voluntarily reducing their hours of work or retiring early to provide childcare for grandchildren.

METHODS

The goal of this research project was to develop a multi-level portrait of changing conditions in the Australian and Canadian community sectors in order to begin to theorize the new processes shaping the sector and the lives of those employed within it. Data were collected through 82 semi-structured, in-depth interviews (Kirby, Greaves and Reid, 2005) with a variety of players in the nonprofit community sector in Australia and Canada (82 = 29 frontline workers, 17 local presidents or shop

³ In 1991, government subsidies were extended to for-profit child care provider, in 1996 subsidies were taken away from nonprofits and in 2000 subsidies were shifted to the demand-side (that is they were provided to parents not providers).

stewards, 16 union staff, 20 agency managers and executive officers), as well as a surface review of various agency documents. Audio recorded and transcribed (verbatim) interviews followed an interview guide in which participants were asked to comment on changes they had experienced in the last few years, reasons for working and staying in the nonprofit sector, changes they would like to see, advice they would give to others and their experience of working in their current environment.

Data were formally analyzed using a modified Grounded Theory approach (Strauss and Corbin, 1998) involving a constant comparison method until patterns could be established and themes confirmed within and across the data. NVIVO (a computer-based qualitative analysis package) was used to organize and manage data, including open coding and data mapping (Kirby, Greaves and Reid, 2005).

FINDINGS

Though a care deficit (Folbre, 2001) has been noted world wide, this deficit is particularly acute in the Australian community social services sector. The most significant loss is women who leave work after the birth of a first, almost always after subsequent, child (Anglicare, 2006). According to my data, this problem is particularly serious in professionalized and quasi-professionalized subsectors such as child welfare, community health and health promotion, and counseling services. As the mid-level manager at a well established child welfare service noted:

We have a high turnover of staff here, you know, and there's a few reasons for it, ok. One of the reasons is that we're not the highest paid workers in the sector, and also that the work can be quite challenging at times. And, that there aren't many supports for people with kids, and most of the staff are female.

Lack of options for part-time work in these subsectors often accentuates the problem. Options for high quality part-time work has been a noted strategy used by women to remain attached to the labour force and balance home and work demands (Baird & Charlesworth, 2007). Other gaps in policy and social entitlements contributing to the shrinking community services labour force include: the lack of paid maternity leave, lack of paid family responsibility leaves, the under performance of men in terms of unpaid work in the home and in care of their children, as well as an increased elder care demands. Though unpaid maternity leave is a public entitlement, options to work part-time, and paid maternity, parental and family responsibility leaves are provided at the discretion of individual employers. Indeed, Australia is one of only two OECD countries without a paid maternity leave; the USA is the other (OECD, 2005).

There was a widespread perception among the research participants that women quit the sector after having children. A research participant from a community health centre asserted, women in her workplace "never return to work after having a baby". The only person she could remember returning was a senior manager who came back to work after being promoted to CEO while on a maternity leave with her first child. Ironically, Baird and Charlesworth (2007) found that paid maternity leave is most common among managers and administrators (65%). This story suggests that paid leave may indeed ease women's decision to return to work in a timely manner, though promotions provide an additional incentive. A pregnant worker who had returned after her first child but planned to not return after her second, argued that:

It was just too hard to come back to think of coming back to work after seven weeks (the maximum paid leave at her workplace). I added in all my annual leave and took some unpaid time but it still meant I was back before my son was three months old. I cried for a half hour every day when I left him, I'd be very upset all day. I was a total wreck, he was a wreck. The stress was too much.

A number of workers noted that the number of women leaving work after the birth of a child means that this highly gendered sector has relatively fewer women with children on the job, compared to women's actual presence in the workforce. A union representative argued that this influences the kinds of bargaining demands workers put forward as men, and women without or not planning to have

children, are less likely to place a priority on paid maternity or family responsibility leaves, and those putting these demands forward cannot expect the widespread support of their peers. In the context of funding cuts and job losses, it is hard to get these demands to the top of a bargaining list, creating a vicious circle in which few people are present to advance the kinds of benefits that help women to balance work and family demands and ensure their presence in the workforce (and bargaining unit).

In the course of the interview, research participants often asked me about paid maternity rights in Canada and uniformly expressed antipathy to the lack of benefits in Australia. One participant summed it up thus,

It's (paid maternity leave) so long overdue, we can't even call it overdue anymore. It's an extension of our blokey culture where the guys just expect women to make everything work, at home, at work and keep smiling whether we're exhausted or depressed or half dead. (Mid-level, front-line child welfare supervisor)

Taking time off is one of the ways that workers deal with issues like exhaustion and poor health, or to try to prevent these problems. Flexible time off is particularly important to parents who often need time to care for sick children or aging parents. Though providing lieu time in place of paid overtime was the policy most agencies in the community sector, workers and managers reported that it is very difficult to ever take this time. Sometimes this is because "managers are discouraging, though rarely outright denying" (mid-level health promotion specialist). Other times it becomes an aspect of the self-sacrificing nature of the sector, where service users' needs are seen as more important than workers'. As a senior mental health worker noted that, "the policy (to take lieu time) is on the books but our workplace culture denies it, makes you feel guilty for even asking."

Grandmothers in this study noted that though they have worked many hours of unpaid overtime in their community service careers, lieu time is rarely available and it is not a dependable solution to the number of hours they require off work on a regular basis. They explained to me that they needed time off work on a weekly basis in order to provide care to grandchildren. All the grandmothers in this study provided child care to grand children from two parent families. It might reasonably be expected that the situation would be more acute for those providing child care to single parent families. It is important to note that this phenomenon was not found in the Canadian data. Though women were interviewed who identified as grandmothers, none of them were taking time off to care for grandchildren and none of them mentioned any plans to do so.

Framing their dilemma as wanting to provide their daughters with the opportunity they had to be part of the paid workforce, a number of senior women in the Australian community sector reported reducing their hours of work in order to have at least one day per week to care for grandchildren. Often this day was coupled with weekend days resulting in grandmothers providing care for two to three consecutive days per week. As a senior worker in street services put it, "I want to give my daughter a chance. I've had my career but she's just starting up." Though all the women expressed strong affection for their kids and grandkids and pleasure in providing care, they were also well aware of the gendered asymmetry. The following quote comes from a debt counselor who had worked three days per week to take care of her own children, returning to full-time employment once they were grown and now returned to part-time to care for grand children:

It's everyone in my age group, regardless of what kind of job we have, we're expected to do it (care for grand children). My husband does a little, but it is mostly me. It is mainly women who still do this stuff, still the expectation that they will do all, and that it is their role to make the sacrifices.

Many women are unhappy with this situation and recognize its costs. One grandmother who had cut her work hours and taken care of grandchildren for seven consecutive years noted:

Some of my friends really resent doing babysitting. They think they've done their years of raising kids and now it's their turn to enjoy a career. But, it's hard for young people, particularly young women. And the grandmothers are stepping up and caring for grandkids one or two or three days a week. It's exhausting.

Another grandmother added, “It’s a major issue across the board, there’s no back up, no services.” Another very senior policy analyst who also decreased her paid work in order to provide child care argued, “There’s no other option. It’s the women who do it. There’s a crisis. There’s no support for child care so we end up doing it.”

As noted earlier, in actuality there are child care services in Australia, though many of them are offered by for-profit, chains and provide care of questionable quality at high and increasing fees. The shift from credible, nonprofit community care to corporate care of substandard quality happened very quickly and very recently in Australia. It seems to have left even those working in the community sector with the sense that child care centres are not an option for their children or grandchildren. This leaves families with few alternatives and despite the fact that they are gainfully employed and often very senior in their organizations, grandmothers are expected to and seem to expect themselves to fill the gap. Some women felt that they had been overlooked for promotion, demoted or reassigned to less desirable jobs or shifts because of their reduced work hours. They resented these changes but felt compelled by ties of affection and commitment to continue to their care obligations.

Grandmothers reported filling other gaps in care as well, as did mothers. Known as the sandwich generation, a number of women reported needing additional time off paid work to care for children or grandchildren as well as aging relatives. As a senior housing expert who did both elder and grandchild care noted:

Life for me for the past twenty five years has been a constant juggle, juggle, juggle, juggle and I never get it right. Every time you rebalance something, you’re next bit goes out, it’s a constant balancing of priorities.

In the absence of cohesive family friendly policies and programs, most families draw on a number of public entitlements, workplace benefits and a range of formal and informal supports. Though the Australian participants in this study reported using all the benefits at their disposal, many ended up leaving the workforce or reducing their working hours at significant cost to their careers, income and level of exhaustion. Research participants in Canada also reported using a number of social entitlements and workplace programs as well as their own unique strategies to balance the demands of work and family. The most notable of these were deliberate choices to bear children close together in age in order to have more time off the job on maternity leaves. Many mothers reported returning to work pregnant for exactly long enough to qualify for an additional 50 week maternity leave and extending these leaves as far as possible by adding in vacation time, educational leaves, paid and unpaid family responsibility leaves and other entitlements providing paid or unpaid time off the job. Though not entitled to the full 50 weeks of paid leave, other mothers became pregnant as soon as possible after the first or subsequent child’s birth and simply adding the 37 additional weeks of leave (for which they were eligible) to the leave they were currently taking. Similar to Australia, these types of strategies were very common in child welfare, community health and health promotion where the predominantly female workforce is highly unionized and they have been able to bargain good workplace benefits (though they continue to struggle for better).

Workers and managers in these subsectors and others also noted an increase in the number of parents requesting job sharing as a way to balance work and child care responsibilities. These strategies were sought out to address the stress of the work environment and the responsibilities of home life. As a child and family worker told us, “I’ve used every possible way to get more time at home with my kids. I can’t deal with craziness here (at work) all day and then go home and expect to be a good mom. Sometimes I think I’m going to crack up - - it’s not fair to my kids.” Another worker felt that her workload was “so heavy” that she could not balance it with home life while her children were young. Taking advantage of a nominally subsidized education leave available at her workplace, this worker decided the life of a poor student would lend itself better to parenting responsibilities than her current job. She noted that “even if it only gets me out of here for a year, my kids will be one year older and we’ll all cope better”. In these two cases and others in the data, the women returned, sometimes repeatedly, to their original jobs after cobbling together various leaves. Anecdotally, the school of social work where I teach has a number of students from the NPSS who are on educational

leaves. Some have pieced together educational leaves, followed by maternity leaves or vice-versa. It seems they all return to their employer or to similar jobs in the sector, underscoring the way these benefits provide the latitude to balance multiple demands and still remain tethered to the workforce.

DISCUSSION AND CONCLUSIONS

At a practical level, the data suggests that in order to keep this gendered workforce connected to this unique but high stress sector, public entitlements as well as workplace benefits are pivotal. Central among public entitlements is paid maternity leave, with lengthy Leaves apparently providing employees with the time they need to rebalance households after the birth of a child, and strengthen themselves and their support systems for return to their fast paced, highly challenging paid work. In addition to paid maternity leaves, an array of other kinds of entitlements and benefits seem fundamental for those who need to extend maternity leave or take short breaks from the labour force in order to juggle the intensity of care demands that occur over the course of a woman's life. These options include but are not limited to: paid entitlements, paid benefits (such as family responsibility leaves; educational leaves, stress leaves); unpaid benefits (such as unpaid leaves); and access to quality part-time work and job sharing.

Accessible, credible, high quality child care is another important plank in the support system required to keep women tethered to the labour force. In Canada, the patchwork of child care, dominated by nonprofit provision, seems to nominally meet social service workers' needs. Regrettably, increasing costs and demand are pushing up fees, putting nonprofit child care out of the reach of many and eroding popular support (Kamerma *et al.*, 2003). Research confirms that a publically funded system of early childhood education and care can ensure the kinds of supports required by today's families and workforce (Baker *et al.*, 2005; Cleveland and Krashinsky, 1998). For example, publicly funded child care in Quebec, Canada shows sustained growth in female labour force participation, particularly among mothers with young children (LeFebvre & Merrigan, 2005), while the rapid decline in nonprofit child care in Alberta, Canada shows sustained decline in female labour force participation (Heyden, 1997). Though community-based early childhood education and care is important to many parents, in order to fully legitimate child care as a credible alternative to parental or grand parent care, nonprofit child care needs to include a number of high quality options for care within a publically funded system. This includes: the classic group care model found in most child care centres; smaller, home based care units affiliated to a public system; care provisions for those undertaking shift work (common in the NPSS); and ethno-specific care options to meet the diverse needs of this increasingly racialized workforce.

The data from this study suggest that in Australia, the absence of some of the pivotal pieces of this support system results in the loss of highly skilled professionals and quasi-professionals after the birth of a child or children, and the reduction of working hours among older women, often at the height of their careers with skills and knowledge that are difficult to replace. The same losses are not found in the Canadian data suggesting the female workforce has other means at their disposal to balance the demands of work and home.

At the level of theory, the absence of adequate supports shapes the gender regime within workplaces and the larger NPSS where women undertake paid care work on the job (or coordinate and supervise it), while juggling complex and often multi-generational care responsibilities in the home, family and community. This represents a blurring of lines between what are often thought of as the separate spheres of work and private life, and continuity between the two spheres in terms of care content, and in some cases, care tasks and emotional states in the lives of women (Baines, 2004b; Reitsma-Street & Neysmith, 2000). These gendered regimes reinforce the larger gender order in which women's caring is assumed to be enduring, endlessly expandable, and self-sacrificing. My previous research shows that employers depend on this understanding of femininity and its connection to care work, and consciously hire for and exploit it (Baines, 2004a, 2006). It is unlikely that the sector could function without it. Home life relies on a similar construction of feminine caring and is equally

unsustainable without it (Noddings 2002; Folbre, 2001). This suggests that though women can and are moving into the paid workforce, their presence, at least in this female dominated sector, reinforces starkly differentiated and inequitable gender roles for and assumptions about men and women. The basis of women's inequality as well as the source of the greatest rewards for this work lie in gendered notions of what it means to care about and for people and the complex under valuation and normalization of this , as well as the simultaneous ideological adulation and sentimentalization of the same. Neither provides the basis for fair and equal treatment; both undermine efforts to introduce the entitlements and benefits necessary to maintain the workforce in this sector.

ACKNOWLEDGEMENTS

The author would like to thank the Social Sciences and Humanities Research Council for funding this study, the research participants who gave generously of their time and experience, and my colleagues at the Centre for Applied Social Research, RMIT University, Melbourne who provided support, research contacts and cultural context, especially Sara Charlesworth. The work of the project's Research Assistant, Kirandeep Sibia, also requires recognition and thanks.

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