

Dorota Szelewa  
PhD student  
European University Institute,  
Florence, Italy  
E-mail: [Dorota.Szelewa@eui.eu](mailto:Dorota.Szelewa@eui.eu)

“Three faces of familialism:  
comparing family policies in the Czech Republic, Hungary and Poland”

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**Introduction**

For more than two decades one could observe a great interest in family policies among Western scholars (Kamerman and Kahn 1981; Esping-Andersen 1999; Jenson and Sineau 2001; Gornick and Meyers 2003; Hantrais 2004). It has been raised both due to the demographic changes, as well as because of the challenge of globalisation: researchers started to analyse how the countries differ in their institutional arrangement of family policies and how they adapt to the new situation.

Most generally, countries in the West were observed to depart from the male-breadwinner model, as they were trying to mobilise potential labour force (and women are one of the biggest potential group to mobilise) (Orloff 2006). At the same time, post-communist countries were not following this trend of ‘farewell to maternity’. If anything can be said about the common trends that are present within the group of countries in the Central and Eastern Europe, and what has actually been described by several scholars, is that they have pursued the policies of re-familisation, which means that they have opted for the policies of male-breadwinner model (cf. Hantrais 2004; Pascall and Lewis 2004). Though these several authors already gave their attention to this problem, they tended to treat this region as a monolith (for exceptions see: Fodor, Glass et al. 2002; Saxonberg and Sirovatka 2006). Moreover, the existing studies have focussed mainly on parental leave schemes and family allowances and have left childcare services outside the spectrum (Fodor, Glass et al. 2002; Kocourkova 2002). In addition, studying past developments has usually been limited to the recent developments (for exception see: Haney 2002). Less attention was paid to the problem of long-term evolution of the institutions of welfare state and their possible resistance to change. As this paper argues, though, in spite of all these huge changes in political and

economic sphere that took place with the fall of communism, family policies underwent moderate reforms, without changing their core features.

The aim of this paper is to systematically compare the historical development of three *divergent* paths of development of family policies in the Czech Republic, Hungary and Poland. In contrast to most of the studies conducted so far, this paper argues that differences between the countries in the region of Central and Eastern Europe (CEE) are more distinct than this is commonly known. It will also complete the picture of family policies in CEE by outlining the most important points in the historical development of these three policy sets. Most generally, the three countries can be situated on a kind of continuum with Poland being the example of a least generous family policy, and Hungary as an example of a country with a very developed family policies, with the Czech Republic being somewhere in the middle. This is not only a difference in *degree* of generosity of or accessibility to different benefits within the whole mix of family policies, but also a difference in the *kind* of the policy mix. Most generally, the countries can be classified not only with regards to the general size of their support but also with respect to how they locate the responsibility for care (to family, state or market). For the question of clarity and for characterisation of the three mixes of family policies they are labelled as follows: Poland as the case of *implicit familialism* (lack of support implicitly locates the responsibility for care within family), the Czech Republic – *explicit familialism* (family is paid for providing care). Hungary, for its generous and more comprehensive family policies may go under the label of a *choice-oriented familialism* (family can choose between different forms of support).

The next section provides the most important analytical tools for the comparison. After short theoretical discussion, this paper follows with the general description of the most important developments of family policies in these three countries.

### **Theoretical debate. Familialism.**

Since the feminists reacted to the work of Esping-Andersen (Esping-Andersen 1990) it has become clear that the question of family should become the element of the debate on the welfare mix, since it is extremely important from the viewpoint of women's citizenship rights, and in particular women's economic autonomy (Orloff 1993). Alternative typologies undoubtedly contributed to the development of the studies of family policy comprising the gendered dimension of the welfare state. Breadwinner models (Lewis 1992; Sainsbury 1994), for example, have received a lot of attention as they focussed on the within-family

dependencies: between the breadwinner and the non-autonomous financially spouse, and between the care-provider and care-receiver.

Several studies on welfare state and family policy were dealing with these problems using the dimension of de-familialisation (Hantrais 2000; Leitner and Lessenich 2005). Most generally, they were relating their research to the question of how different arrangements locate responsibility for care within the welfare-mix. In other words, they focussed on the effect of family policies on de-familialisation the responsibility for care.

Some scholars describe policies pursued *in contrast* to de-familialisation. Rianne Mahon (2004) talks about the ‘new familialism’ with regard to the institutional evolution of family policies in France and Finland as a response to de-familialisation. As the author suggests, in these two countries the tendency to give ‘more choice’ or ‘the rights to care’ is present, which gives less priority to publicly provided childcare services as the locus of care provision. Similarly, Linda Hantrais (Morgan and Zippel 2003) talks about the neo-familialist policies in the Western Europe, and re-familialisation in the post-communist countries.

As Lynne Haney (2003) or Sigfid Leitner (2003) show, however, de-familialisation versus familialism does not represent a bipolar continuum, but that instead one can talk about different faces or varieties of familialism, mostly depending on the *degree* and *kind* of state activity. In other words, different kinds of familialistic policies (or de-familising) can be distinguished with regards to the answer to the following questions: how much family support is provided through the state, and then – what *kind* of support is this.

Sigrid Leitner (2003) differentiates between four types of policy mixes basing on the degree of presence of familialistic and de-familialising elements of the policy mix. Basing on this the author differentiated between three types of familialisms: implicit (no support), explicit (state supports care provided domestically) and optional (different kind of support exist. In the case of the policy mix of –de-familialisation, the element of cash payments for family-delivered care is weaker, which encourages families to use publicly provided care services rather than staying at home with the family member requiring care. In this last regime the responsibility for care is, thus, shifted away from the family.

Another example of different ‘faces of familialism’ have been presented by Lynne Haney (2003), when the author was describing welfare institutions in the Czech Republic and in Hungary. The author distinguished between two ways of channelling familialism – the ‘social-democratic’ way in the Czech Republic, and ‘liberal’ one in Hungary. The idea of channelling familialism through different combinations of policies and discourses in the way

Lynne Haney does it seems to capture variety of Eastern European family policies. However, it is also not free from shortcomings. One of them is connected with the classification of the ultimate state of Hungarian welfare state as 'liberal' (also elsewhere: see Haney 2002) on the basis of changes in the access to different kinds of family support. Haney omitted in her analysis the comprehensive system of parenthood-related benefits either work-related or universally accessible. The author also did not consider the access to childcare services. Even as compared to many Western countries Hungary has relatively high enrolment rates, especially within the group of children between 3 and 6 years of age. This, accompanied by a diversified and optional system of cash benefits does not allow for labelling Hungarian welfare system 'liberal'. Just the opposite, Hungary seems a good counterexample when compared with a residual family support available in Poland.

The framework for comparison proposed here allows for attaching a particular family policy model to a country representing it (or rather approaching it, since these are Weberian ideal-types). In sum, familialism takes different forms and might be the drive for different sets of policies, depending, most generally, on the historical, institutional context. After analysing the historical development of family policies in the Czech Republic, Hungary and Poland, three diverging paths of development can be observed. In other words, different character of the Czech, Hungarian and Polish familialisms is a consequence of a diverging paths of development that these three mixes of family policies took already during communism (with important impact of else some of the pre-war legacies). For the questions of clarity and for the problems with using the framework developed by Lynne Haney, I decided to use Leitner's labels (with small modifications), as this framework best captures the differences between these three countries. They would otherwise be classified as the cases of neo-familialism, and would be hard to find a label for them in the case of male-breadwinner models. Next, the theoretical framework is filled with concrete terms and dimensions, and afterwards – with data.

As already mentioned, this paper argues that though the new findings presented in this paper confirm that the trend towards re-familialisation is present in the region, there are different paths of re-familialisation policies present in the region of CEE. Some authors have already observed such diversities in the region (Fodor, Glass et al. 2002; Saxonberg and Sirovatka 2006). The next part describes how the three paths of familialism were shaped through the years, long before the fall of communism and even before the era of communism began.

## **Historical development of family policies in the Czech Republic, Hungary and Poland**

Beneath I am presenting the three national stories of development of national family policies as three versions of familialism. Following most of the works on childcare and family policies I am focussing on the solutions concerning maternity and parental leave, but also – importantly – on the development of childcare services. Additionally, the system of family allowances will also be mentioned.

### ***Poland – the road to implicit familialism***

*Pre-war period.* Similarly to Hungary and Czechoslovakia, Poland reached independence in 1918. Unlike Hungary and Czechoslovakia, Poland was split into three parts between Austria, Germany and Russia.

As different kinds of welfare legislation was adopted and at least on the formal level Poland was not a laggard. Paid maternity leave, though, became available as late as 1933 (Jonczyk 2001). It was paid for 8 weeks in total, and was split in two parts – before and after the childbirth (Sierakowska 2003). Additionally, breastfeeding mothers were receiving one bottle of milk daily (or its equivalent in cash) for 12 weeks after the birth. Maternity allowance was available only for working women and covered 50% of the previous wage.

As far as the development of childcare services is concerned, it was very slow. Most of the first childcare centres in Poland were run by the churches or monasteries and were to support the poorest (Kaminski 1980). Childcare for children under seven were introduced in 1932 (Wojcikowska 2004). For comparison - at this time already a quarter of children at the age of three to six were attending kindergartens in Hungary. In 1937 in Poland only 2.8% children under six were attending kindergartens. It is also hard to talk about some administration of the childcare centres, as there are not signs of public concern over the issue of childcare before the WWII. Therefore, if any centres existed, they were usually organised privately or by the Church.

During communism, having almost non-existing network of childcare services, Poland never managed to reach higher coverage rates for kindergartens and nurseries. The first nursery in Poland was opened already after the war and took place in 1958 (ibid.). As the development of childcare (described in more details in the next subsection) has always been very weak in Poland, this resulted in family being the ultimate locus of responsibility for care. One could, therefore, already at that time observe this tendency towards locating the responsibility for care within family (or, rather, refraining from introducing any serious measures that would take it over from families).

*The period of communism.* Unlike in Hungary and in Czechoslovakia (though only for civil servants), the system of family allowances in Poland was not introduced before the WWII, but after establishing the communist regime – in 1948. Family allowances were paid for each child under 25, and were added to the mother's salary (Klos and Szymanczak 1997). Its level differed according to the number of children, but also related to the level of earnings, and in that sense this kind of family support was of an insurance-based character.

Maternity leave remained without major changes until 1972. The Labour Code then granted women the right to paid maternity leave extended to 16 weeks in the case of the first birth, 18 weeks – for every next one and 26 weeks in case of the multiple birth (*ibid.*). Since then, also, the benefit has been fully covering the previous earnings (the replacement rate equals to 100%).

The extended leave was introduced in 1968<sup>1</sup>, just one year after it took place in Hungary. Women were entitled to a 12 months leave for taking care of a child under two. In 1972 the duration was prolonged to three years, in which the child could not be older than four years (Balcerzak-Paradowska 1991). Women could take the leave after 6 months of employment, a man could do it only in few cases, when it was impossible for a woman to take care of the child. There was no financial compensation for the break from work until 1981, when the extended leave allowance was introduced. It was means tested from the beginning. Not exceeding the sum of 3600 PLN of monthly income per capita in the family was the condition for receiving the allowance (*ibid.*). Afterwards, the principles were changed for a couple of times, but the most important came in 1989, when the threshold was established for 25% of the average wage in the economy (in the family per capita).

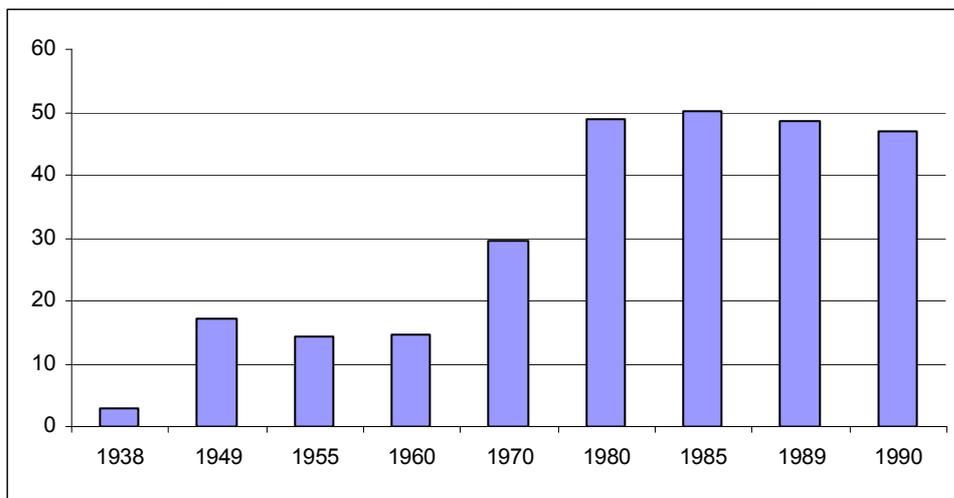
As mentioned above, the fact that Poland never had universally paid parental leave (here it is referred to the 'extended leave'), could stem from smaller problems with population development, as well as fewer women being already in the workplace. While in Poland women's economic activity rate in the 1960s was under 40%, in Hungary and in Czechoslovakia they already exceeded 50%. The low participation rates for women in Poland could be, in turn, the result of a weak development of childcare services.

As in the two other countries, communist governments, especially directly after the war, wanted to mobilise the prevailing part of the population to join the labour force. Therefore, in the first place, government was pushing towards building more childcare centres, both available locally as a separate unit under the supervision of local authorities, as well as day-care organised by the factories. Also similarly to these two other countries, Poland took direction towards more 'maternalist' policies at the end of the 1960s. This

development was a direct response to the pro-natalist and female mobilising policies of the regimes. Gender equality slogans together with developing childcare infrastructure lead to prevalence of dual earner model of family.

But creating day-care for small children (under three) was very controversial and proceeded slowly. In result, the rate of small children enrolled in the nurseries never exceeded 5% (Heinen 2002). For older children the provision of kindergartens was also far from being satisfactory, as the coverage rates were almost always under 50% (GUS 1991). Figure 1 shows the dynamics of enrolment rate in kindergarten for the children at the age of 3-6.

**Figure 1: Percentage of all children at the age of 3-6 enrolled in kindergartens in Poland 1938-1990**



*Source:* (GUS 1956; 1966; 1976; 1986; 1991)

Thus, the time of the biggest growth in the numbers of children enrolled in kindergartens was 1960s and 1970s. When the coverage rates reached the peak of their development in 1985, only 50.2% of children aged 3-6 was attending kindergartens. Not only were the childcare centres not sufficiently available, they were also overcrowded. For example in nurseries the number of children admitted per places formally available varied from 134 to 178 children per 100 places in 1970 and 1980 respectively. Then the ratio was diminishing and in 1990 almost reached its level from 1970 (GUS 1976; 1986). Similarly, the number of children per one kindergarten teacher has been quite large: for example while in Hungary there were about 15 pupils per one teacher in 1980, in Poland this amounted to about 23 (UNESCO, Institute for Statistics).

In sum, during communist period in Poland, though the most significant family policy programs were adopted, the tendency towards shifting the task of care from family and women were very weak. At the same time, as the next section shows, the core of family policies were also developed in the communist period.

*End of communism and transformation.* A 'big-bang' package of economic reforms left many people beneath any standards of minimum income. Unlike in Hungary or in the Czech Republic, the strategy of social policy was to compensate for rather than to prevent from the lost of income. For the reforms around social policy it meant far-reaching cuts in social spending, restricting the accessibility to benefits to the poorest, etc. (Ksiezopolski 1999). These processes took place with regard to the supply of cash benefits for the family, as well as the case of deterioration of the situation with childcare services.

The biggest change concerned the system of family allowances. Already in 1989 their level was established as flat-rate, and afterwards, in 1995, the access to these kind of support was restricted by income-testing (Klos and Szymanczak 1997). Furthermore, the age limit was shortened from 20 to 25 years of the child's age. At the same time, the right to a paid extended leave (after the end of the period of maternity leave), remained restricted to the poorest, though the regulations concerning the threshold for entitlement changed several times.

One of the most important attempts to reform the system concerned the length of maternity leave. In September 1999, the Parliament amended regulations concerning maternity leave extending its duration to 26 weeks by every birth with one child, 39 weeks in the case of giving birth to more than one child. At first, this entitlement was to be obligatory. However, the Senate adopted a compromise solution in which the new duration of maternity leave was to be introduced in two stages: first, in the year 2000 four weeks more (than before) to be given for every woman, and then in 2001 women would be entitled to another 6 weeks for each birth, and 9 weeks more for a multiple birth (Nowakowska 2000). Finally, the obligatory duration of the leave was 16 weeks, and women were to decide whether to use the additional weeks or not. On 25th of April 2001, Sejm adopted a bill, thanks to which the father could use the rest of the maternity leave, if the woman comes back to work after 16 weeks. It made it for instance 10 weeks of the leave for the father with keeping the right to the allowance, if the woman was entitled to 26 weeks. The next change was accepted on the 21st of December (in force since 13th January 2002), and basically turned back the leave's duration from before the reform prolonging it.<sup>2</sup> The obligatory duration of the leave is 14 weeks, and then the father could use the rest. It meant 2 weeks in the case of the first birth for instance.

The conservative coalition that came to power in 2005 undertook this initiative once again. This time, though very recently (in October 2006), the coalition managed to introduce some changes, though not so extensive as intended by their right-wing colleagues in 1999. In

the end, maternity leave was extended with two more weeks for women having the first and the second child (in the new version - 18 and 20 weeks respectively), and with 28 weeks of the leave in the case of multiple births<sup>3</sup>. The new law is in force since 19th December 2006.

Again, the two weeks added maternity leave do not change the situation much. This kind of support, without making the extended part of the leave universally available, or at least available on the base of insurance, is far less generous than the same systems functioning in the Czech Republic or in Hungary, especially when most of the families do not have the right to receive family allowances.

Changes for the functioning of childcare services also came after 1989, and were connected with decentralization of financial responsibility over day care centres. The latter was delegated to local authorities.<sup>4</sup> Because this way the direct donations from the state were "shut down", it meant liquidation for many of the centres, if their economic calculation showed deficits. The number of the centres' continues to decline: nurseries: from 1553 in 1989, to 818 in 1992 and 396 in 2001, kindergarten and zero classes: from 26358 in 1989, to 17 337 in 2001 (but that was also due to the demographic downfall).

Thus, the centres had to raise the payments for possible clients, but even then the payments covered 1/3 of their expenses, sometimes 50%, and the rest had to be covered by the local authorities. Higher payments discouraged many families from deciding to place their children there. As Jacqueline Heinen stresses, the monthly cost of a childcare centres for one child can be up to a third (sometimes even half) of an average salary (Heinen 2002). Additionally, almost all nurseries and two thirds of the company-owned kindergarten were closed. As a result, while in the 1980s every twentieth child under 3 attended nursery, in the 1990s, it was every fiftieth.

One of the reasons for withdrawal from the responsibility for maintaining childcare centres was the fact that the state completely cut their financing. As this is now the task of local authorities, and maintaining this kind of centres is costly and not profitable, municipalities find it difficult to find financial resources for such kind of activities. In other words, unlike in Hungary, they are not obliged to do it. The situation, combined with the lack of financial support for parents after the expiry of maternity leave, means that implicitly the state locates responsibility for care within family. Strengthened by the reforms of the last 17 years, this situation has already been present during the times of communism.

### ***The Czech Republic – explicitly familialist policy-making***

*Pre-war period.* Until 1918 Czechoslovakia was a part of the Austro-Hungarian Empire. After the World War I it gained independence and formed a Czechoslovak First Republic. A large part of social security schemes were simply incorporated to the legal system of the new state from the Habsburg Empire (Teichova 1988; De-Deken 1995), the same can be referred to the institutions that were administering social insurances program.

As far as family policy is concerned, similarly to the cases of Hungary and Poland, Czechoslovakia offered a basic system of maternity leave – 6 weeks before and 6 weeks after they gave birth to a child. Women also received maternity benefit for that period, as well as a special kinds of ‘marriage grant’ (Nash 1998). Like in Hungary, family allowances were paid only for civil servants. Other similarities between Hungary and Czechoslovakia existed with respect to the development of childcare services. The education for 6-year-olds was made compulsory already in 1869 (for comparison, in Poland this has been as late as 2005). The first act on kindergartens comes from 1869 that establishes three kinds of centres ‘taking care of and educating children not yet at the school age’ (OECD 2000). Kindergartens, nurseries and crèches have already represented different childcare centres with respect to the children’s age and the character of services. Therefore, for example kindergartens were designed for children up to 5<sup>th</sup> or 6<sup>th</sup> years of age.<sup>5</sup> That was in line with the system of ‘Trivial Schools’ founded by Maria Theresa 1775 (Teichova 1988), Consequently, the net of childcare centres was expanding and just before the WWII the rate of enrolments reached 20% of children under 6, which was comparable to 23% in Hungary (ibid.). Especially this already existing net of childcare centres and the administrative organisation with its ‘child-centred’ approach shared by the experts and administrators represented another resource for communist rulers that eventually took over in 1948.

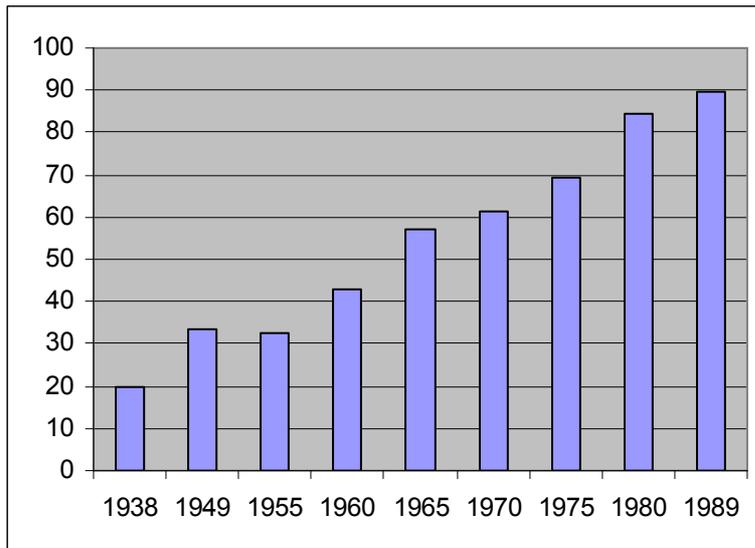
*Communist period.* After the conference in Yalta, Czechoslovakia, like the other two countries, ended up in the sphere of soviet political influence. The communists ultimately seized power after *coup d’etat* in 1947. The new regime stopped treating social policies as a separate sphere of policy aimed at poverty alleviation, or managing social risks, etc. Since joining labour force was an obligation, employment guaranteed access to different kind of ‘social rights’. Though directly after 1945 only provisional measures were undertaken in order to provide support for the ones touched by the war, in 1948 a comprehensive national insurance act was adopted (De-Deken 1995; Krejčí and Machonin 1996).

As in Hungary, the communist constitution of Czechoslovakia included the principle for gender equality (Swiatkowski 1981). As in the other two countries, women were mobilised to join labour force by a number of incentives. Since the very beginning, Czechoslovakia state offered women more extensive financial support for the period of first years of a child.

The system of family allowances for all the workers was also introduced very soon after the end of the war in 1945 (Heitlinger 1976). The level of payments was gradually increased, especially for the numerous families, as already at the end of the 1950s government was aware of the low birth-rate. The biggest increase took place in 1959 in the case of the third- and fourth- order children (ibid.). Already the Labour Code from 1956 gave working women the right to 18 weeks of paid maternity leave, which was the most extensive one among this group of countries (Swiatkowski 1981). In 1964 the 'further' maternity leave was added, however, it was unpaid and lasted for 30-34 weeks (ibid.). Therefore, in the literature it is 1970 that is regarded the date for introducing a paid parental leave ('extended leave'). In contrast with Polish and Hungarian cases, the right to the benefit got only women with at least two children, though women with one child became entitled to a one-year lasting benefit in 1985 (Kocourkova 2002). Additionally, the duration of a paid leave for women with two children was extended to two (in 1971) and three (in 1987) years.

The incentives for women to join the workforce were mixed with incentives to give birth to children. Czechoslovakia had the highest rates of women participating in the labour force within the groups of socialist countries (Kocourkova 2002) (see also table 2 in the concluding section). At the same time enrolment rates in the kindergartens and even in the nurseries were on a relatively high level, which could contribute to quite successful process of women's participation in the labour market. As in the case of Hungary, already in the early decades of the communist regime the numbers were quite impressive, even when compared with the situation in the Western world (O'Connor 1988). The enrolment rates in the Czech Republic in the mid-1990s were above 80% for kindergartens and about 14% for the crèches (which means, it was even higher than in Hungary, where it equalled to 12-13% at that time). Figure 2 shows the development of enrolment rate of children attending to kindergartens.

**Figure 2: Percentage of all children at the age of 3-5 enrolled in kindergartens in the Czech Republic 1938-1990\***



*Source:* For the years 1949-1980 information in (CSU 1984), for 1938 (OECD 2000), and for 1989 (Saxonberg 2003)

The communist rule produced the policy legacies that to a great extent influenced the present shape of the family policy mix in the Czech Republic. The communist Czechoslovakia offered a mixture of family policy measures, that relieved family in the task of care through the provision of childcare services, but at the same time more explicitly shifted responsibility for care in the hands of women (through extended maternity and parental leaves). These were also very strongly pro-natalist policies due to the preferences for numerous families. This mix of provisions cannot be yet described as *explicit familialism* in line with the analytical tools for specifying the variation. However, it is clear Czechoslovakia has already been set on the path of development leading to this type of policies after familialist ideas were revive after 1989. In this case changes that came after 1990 were *decisive* for the classification of the Czech family policy mix as *explicitly familialistic*.

*The fall of communism, transformation and split of Czechoslovakia.* Czechoslovakia became an independent country in 1989, after the so-called 'Velvet revolution' in November (a series of street protest and a general strike). In 1993 Czechoslovakia split into the Czech Republic and Slovakia. Unemployment, the rise of poverty and income inequalities was common phenomena in region. The goals of reforming social policies in the Czech Republic were to make them less paternalistic and at the same time more adhered to the needs of population. The basic principles of the new order was subsidiarity and the basis was the Bismarckian model of social insurances (Potucek 2004).

Both: systems of cash benefits and the system of childcare services were reformed to the greatest extent in the Czech Republic, as compared to the two other countries from the group, though it did not critically change the most important characteristics of the system. Instead, it rather strengthened its basic pillars. First, the system of parental leave was reformed – already in 1990 parents with one child were granted the right to use the ‘extended leave’ scheme with the receipt of allowance (Kocourkova 2002). This was to last for three years, however, the duration of the leave was extended in 1995 to 4 years and nowadays the Czech Republic has the longest parental leave in the world with universal entitlements.

The biggest changes concerned the availability of day-care for small children (under three). From 14% in 1989 the enrolment rate dropped down to 1% in 2000 (OECD 2000). Just like in Poland, this was the result of organisational changes, mostly decentralisation of responsibility for maintaining the centres. This, though, did not mean a disinterest in running kindergartens – the constant policy of developing the network of kindergartens resulted in over 90% of enrolment at the end of the 1990s. Additionally, some authors suggest that since there are no places available in the nurseries, kindergartens started to admit children at the age of 3 (Saxonberg and Sirovatka 2006). That is why the real enrolment rate for the youngest children is probably underestimated. In general, one can say that the most significant change in the policy was the drop in the availability of day-care for the youngest children and that this coupled with the extended parental leave allows for a classification of this country as the case of *explicit familialism*. Finally, the system of administering family policies was fully inherited from the communist period, though the decentralisation of services took place having major impact on the decline in the offer of publicly provided childcare centres for smallest children.

In the approach to *change* the Czech Republic is the least conservative country within the group that is here examined. Though, the most important features of the system were already present during communism. Family policies at the end of communism were already developed, cutting them represented a political risk, even for the ones that tried to make them less generous. Vaclav Klaus (the prime minister of the Czech Republic in the 1990s) for example, introduced the familialistic measures, which did not correspond to the neo-liberal profile of his party. In other words, as the sphere of family policies was already loaded, the meaning of policy legacies as mobilising other groups within the population rose. Similarly to the case of Hungary, while their meaning was crucial in the moment of transition from communism, the role of policy legacies rose as the policies were consolidated.

### ***Hungary: working on the 'choice-oriented' familialism***

*Pre-war Hungary:* Hungarian welfare system before the World War 1<sup>st</sup> based on several acts regulating social security issues mostly for the state employees. As the first country in Europe, Hungarian government (within the Austrian-Hungarian Empire) introduced a family allowance system for civil servants in 1912 (Szikra 2005). Only men having three and more children were entitled to the benefit, which equalled 20%-50% of their average earnings. This 'elitist' solution survived almost 20 years and almost directly referred to the Bismarckian type of welfare policies (ibid.). As this relieved some nationalist attitudes, one of the policy aims was to support population growth of Hungarians (Fodor 2003). One of the measures aimed at increase in births was the introduction of maternity leave for working mothers that from the start equalled to 100% of their previous salary paid for 12 weeks of the leave (ibid.). In 1939 the system of family allowances was extended to all the workers within industry (Tomka 2004).

Development of childcare services was also connected with the process of nation and state-building (Bicskei 2006).<sup>6</sup> Again, Hungary is the pioneer example of introducing child care centres. In 1836 the first ever and in 1879 the first state-run kindergarten in Central and Eastern Europe was opened in Budapest. So early as 1891, the attendance of kindergarten became obligatory for children between 3 and 6 years of age. Though after the WWI the situation of Hungarian state rapidly changed, the tendencies to develop childcare centres were inherited and sustained in the interwar period. This coupled with already existing maternity leave schemes created a basis for building a socialist state.

*Communist period.* Hungary suffered a huge material loss during the IIWW, and especially after the Red Army's occupation at the end of the war. In 1948 communists having strong links to the Soviet Union were ruling the country in a hard Stalinist manner. The economic and political hardship led to the biggest social protest that took place within the soviet block in 1956. It was pacified by the soviet troops, led to the death of thousands of people and massive emigration, and represented a national trauma for the next decades. But it also meant the beginning of some kind of 'goulash communism' - increase in the life standards, introduction of some elements of private property, and other reforms, especially during the 1980s.

Directly after the WWII and establishing the communist regime, the aim of the new government was to build a strong, industrialised economy, as well as to compensate for the demographic loss (Bicskei 2006). Therefore, while the number of weeks of maternity leave remained unchanged (12 weeks), the government aimed at women through supporting the

development of childcare centres. Both in Hungarian constitution and in the Labour Code the principle of gender equality was present and was to become the basis for further reforms of the social legislation (Swiatkowski 1981). Finally, the principle of status-preserving Bismarckian system of social insurances was replaced by an equal right to the same standards of employment and social security for all.

The most significant change with regards to parental leave came in late 1960s. First, maternity leave was extended to 20 weeks in 1965 (Haney 2002). Second, the ‘up-bringing’ leave was introduced (in this paper - an extended leave). Hungarian women had in 1967 been granted the right for 6-months of additional leave with a 100%-replacement rate cash benefit (GYES). In 1969 GYES was extended up to the 3<sup>rd</sup> child’s birthday, though the payment after the first 6 months was reduced to a flat-rate level (Fodor 2004). That was already a very generous system and the first paid parental leave in Europe (Bahle 2005; Szikra 2005). Additionally, in 1985 another layer was added to the already existing parental leave scheme—GYED, a 2-year extended leave for employed women, that provided them with a 75% replacement of their previous income (Fodor 2004). Nowhere in the communist block existed such generous and optional system.

Family allowances system (paid per child until its 8<sup>th</sup> birthday) was in 1948 extended to all the industrial workers, though still attached to the male-breadwinner having more than three children (Haney 2002). In 1959 the program covered also agricultural workers with more than three children, and industrial workers with more than two (ibid.). The right to this kind of support was universal.

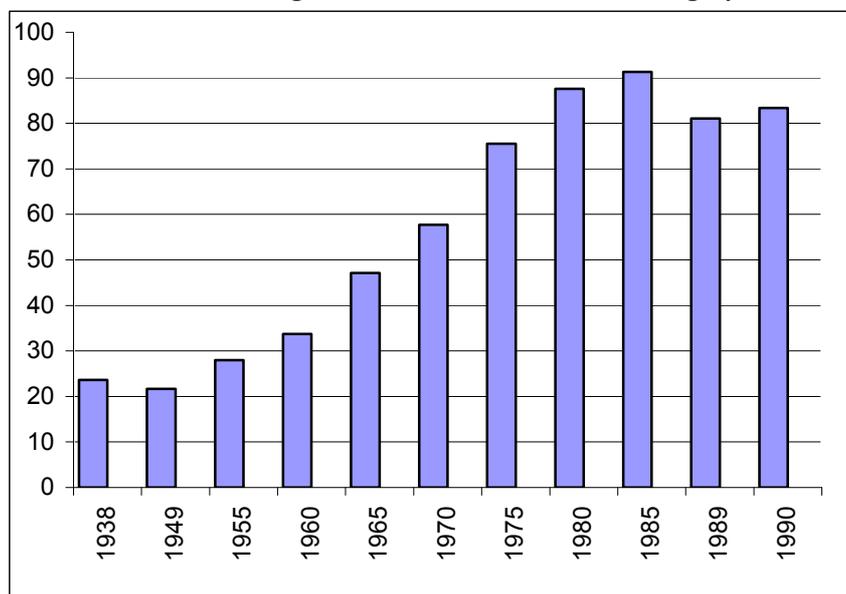
However, in the mid-1980s changes came, which were felt as strange by Hungarians themselves. This ‘something else’ (Haney 2002) meant the introduction of the principle of income-testing for the potential recipients of GYES and family allowances. Though it was not very restrictive, it could mean a shift towards liberalisation of the policies, and individualisation of needs (ibid.).

As already mentioned, the stronger development of the net of childcare centres took place in these three countries after the World War II. This development was a direct response to the pro-natalist and female mobilising policies of the regimes. Gender equality slogans together with developing childcare infrastructure lead to the prevalence of dual earner model of family. In contrast to the pre-war period, when childcare centres more often tended to put emphasis on the educational side of their activity, new communist state aimed at relieving family in its caring task (Bicskei 2006). Especially during the first years of state-socialism the reformers’ slogan was ‘child is our greatest treasure’, and so they started to introduce some

more standards into the task of care (ibid.). In 1953 all women having children under 2.5 years old received the rights.

Similarly to the two other countries, two basic kinds of childcare centres were developed: nurseries - for children under 3, and kindergartens - for children at the age of 3-6. Furthermore, one could distinguish between the centres established by the working places (both nurseries and kindergarten), nurseries' departments in hospitals, and kindergartens' departments for children at the age of six. The latter were also conducted by kindergartens, but then paid (for the meals), which made them kindergartens mostly the places for children between the ages 3 and 5.

**Figure 3: Rate of children at the age 0-3 enrolled in nurseries in Hungary 1938-1990**



*Source:* (KSH 1956; KSH 1966; KSH 1976; KSH 1986)

As figure 3 shows, the peak of development of the nurseries can be noted for the similar period, which is the 1980s. In the case of kindergartens in Hungary 23% of children at the age of 3-6 attended kindergarten in 1938 (contrast it with Poland, when it was only 2.8% at that time). This reflected the presence of relatively stronger tradition of public childcare in Hungary. In result, in 1984 nine out of ten children at the age 3-5, was attending kindergarten (Andorka and Harcsa 1992).

The quality of the newly opened childcare centres was, nonetheless, also not satisfactory (Toth 2005; Bicskei 2006). In Hungary crowded kindergartens were never such problem, though, the highest children/places ratio could be observed also in 1980, when it amounted to 124 children enrolled per places. Similar conclusions can be drawn while analysing the nurseries, Children accepted per places available ratio was even more

favourable than the one for kindergartens: the number of children exceeded the number of places up to the beginning of the 1980s, and then the nurseries were even underused: in 1990 there were only 60 children enrolled for 100 places available.

Hungarian network of childcare centres was far from being perfect. Low quality of nutrition, the lack of flexibility in the opening hours, overcrowding, lack of suitable equipment and educated teachers were all widely recognised among Hungarian women and recently described (Toth 2005; Bicskei 2006). However, the fact that this country has already comparatively developed network of childcare centres in place, made the female-mobilising trend in policies more available. This element of policies was also, as the developments of the 1990s show, more fragile for change.

*The period of transformation.* Reformist tendencies in Hungarian communist party at the end of the 1980s coupled with more overt social dissatisfaction with the rulers and the events almost everywhere else in the region, made the last communist party leader resign in October 1989. In 1990 Hungary had its first elections won by the conservative-Christian and nationalist government that was to bring about a 'social market economy' (Ferge and Tausz 2002). In 1994, though, when a socialist-liberal coalition seized power, their aim was to set Hungary on a path of development towards neo-liberalism. Therefore, as the next conservative-Christian coalition came to office in 1998, it returned to the generous measures and was, this time, more right-wing oriented (ibid.). Since 2002 social democrats have been in power. Hungary was an indebted country and for these reasons prone to the pressures coming from the World Bank or IMF that required cuts in social spending.

Almost immediately after establishing a democratic regime the access to GYES and family allowances became universal (in 1990). Additionally, parents with at least one (not like before – at least two) children became entitled to family allowance. Furthermore, to already existing parental leave schemes (GYES and insurance-based GYED), the third track was added – GYET, which became available for parents with at least three children. This scheme was established in 1993 and the level of allowance equalled to the minimum old-age pension.

An important change came in the mid-1990, when the liberal coalition came to office, with its leader Lajos Bokros. Bokros wanted to liberalise the system of social policies in Hungary with the reform plan known as 'Bokros package' (Goven 2000). One of its most important elements was returning to the principle of income testing, as far as the access to GYES, and the system of family allowances is concerned. At the same time the insurance-based GYED was to be abolished. The plan was brought to life, and for four years (1994-

1998), due to the new regulation, about 10%-15% of families (that did not meet the accessibility criteria) were excluded from these two family policy programs (Szikra 2005). Though a great majority of eligible population still received this kind of benefit, the new restrictions became extremely salient politically. Several authors describe societal mobilisation aimed at reversing these changes as one of the very few successful grass-roots initiatives supported by the media (Toth 1993; Goven 2000; Szalai 2000; Haney and Pollard 2003; Petho 2003; Szikra 2005). The usual rhetoric centred around the welfare of mother and a child, as needing a mother's care (Goven 2000). Under the slogans of maternalism, thus, organised groups of Hungarian women were able to persuade a universally (or insurance-based) available family policy system that was again in place in 1998.

The next, conservative coalition, also proposed some changes. In addition to family allowances paid per child, the government introduced tax credits for children. This, plus returning to the 'old' legislation concerning an earnings-related GYED, favoured the situation of higher income families. Again, even this kind of novelty became very fragile during the next term in office of a socialist-liberal coalition. In 2006 the government considered unifying the system of family allowances and tax credits and establishing a universally available family allowances system, with the increased (flat-rate) level of allowance.

In sum, the present system of cash benefits remains very generous and includes elements that were added gradually. To the already existing in socialism GYES and GYED, a new scheme was added for the numerous families – GYET, though GYES and GYED remained the pillars of parental leave arrangements in Hungary. Family allowance, on the other hand, having their roots already in the pre-war period, was sustained, and its role as income supporter, was strengthened (Szikra 2005).

Again, the system of childcare services was most vulnerable to change. At the beginning of the 1990s these highly subsidized systems were decentralized and local authorities took responsibility for their functioning. Municipalities, faced with financial constraints, were either raising fees or restricting if not liquidating nurseries' activities. In Hungary coverage rates dropped down to around 9%, as compared to 13.7 % from the beginning of the 1990s (Fodor 2004). Unlike in the case of nurseries, the development of kindergartens was quite stable: the coverage rate increased from 51% in 1970, to 87% in 1990 and 92% in 2000 (KSH 2004). Finally, the responsibility for functioning of childcare centres has been decentralized, though, as described above, maintaining childcare centres has already been a duty of local authorities already during communism and even before the WWII. Therefore, the payments for childcare services were raised, though it became highly

subsidized and, therefore, it still represents affordable standards. Hungarian government still provides about 25-30% of the cost of maintaining one child in the centre. In the end, however, payments for childcare services are not regarded as high (Fodor 2004). Parents still have to pay only for the meals.

The initial conditions for further reforming of Hungarian family policies represented a two-tiered parental leave scheme, universally available family allowances and relatively developed net of nurseries and kindergartens. In spite of several attempts, it was very difficult to remove the elements of the system. Therefore, while the basis for a *choice oriented familialism* was sustained, the reformers were adding new elements, to the system, like the scheme for numerous families, or tax credits for children. In other words, while politicians were trying to replace some elements of the policies with others, the protest towards it tended to raise distrust and in effect the new policy layer was added without dismantling the old one. The biggest change in the sense of decline of previous standards was, as in the case of other countries, the case of closing nurseries, which, among others, manifested itself in dropping coverage rates.

### **Classifying family policies in the Czech Republic, Hungary and Poland – three familialisms**

As the previous section describes how these policy sets came about, this part summarises the findings and systematises the comparison of the ultimate results of these developments. Table 1 below presents the data that represent a starting point for assessment of how the countries ultimately fit into the categories distinguished above.

**Table 1: Classification of family policies in the Czech Republic, Hungary and Poland**

Dimensions of variations		Poland	Czech Republic	Hungary
Parental leaves:	<b>Periods (in weeks): Maternity leave</b>	18- 1 <sup>st</sup> child, 20 – 2 <sup>nd</sup> child 28 – multiple 14 compulsory	28 or 37 for a lone mother or multiple birth	24 paid at a high level (part of GYES)
	<b>Entitlement to benefits</b>	Employment-based	Universal	Universal
	<b>Level of benefit (replacement rate)</b>	100%	69%	70%
	<b>Extended leave: period</b>	2 years	3 ½ years	3 years GYES 2 years GYED (from the birth)
	<b>Entitlements for benefits</b>	Income-tested	Universal	Universal
	<b>Work option availability</b>	No	Yes	Yes
	<b>The level of benefit;</b>	Wage-related, then flat-rate	Wage-related, then flat-rate	Wage-related, then flat-rate
	<b>Available for the father</b>	Yes	Yes	Yes
<b>Special incentives for fathers</b>	No	No	No	
Childcare	<b>Rate of children enrolled in crèches (0-2)</b>	2%	1%	9%
	<b>Rate of children enrolled in kindergarten (3-6)</b>	50%	87%	85%
	<b>Quality (pupils/teacher)</b>	11	12	12
	<b>The no of children per group</b>	25	25	25
	<b>Affordability (ceiling for payments as % of maintenance cost)</b>	No limits	30%	25%

The three policy sets represent, thus, an ultimate stage of historical development that was described in the previous section. Especially when observing parental leave scheme one can see how the following layers were added to the already existing schemes. The latter phenomenon is especially characteristic for the case of Hungary in the 1990s.

Though family benefits system and tax system were left apart from the table, one can draw several conclusions basing on the information with regard to parental leaves and childcare services. Therefore, the case of Polish family policy represents an example of a moderate to weak support. Though the periods of leaves are rather long, only the first part of the leave (18, 20 or 28 weeks) is connected with a high level of benefits. Then, as mentioned in the previous section, most of the families do not receive this support. Faced with the lack of affordable and easily available care services, families are rather encouraged to provide care by themselves, which then means it is done mostly by women; this is better for the family since men earn more on average.

In the Czech Republic women are encouraged to withdraw from the labour market at least for the period of the first years of a child's life, which always creates problems with re-integration with the labour market. Nonetheless they are supported, then, by the public

character of day care centres for children between the ages of 3-6. This combination makes them 'less important breadwinners' - there is a wage gap of more than 30 percentage points between women and men in this country.

The case of Hungary is especially interesting. Though policies here resemble the dual-earner model one could hardly say a principle of individualism drives the approach to family policy: women here are also expected to perform the duties of childcare. At the same time, any measures, like for instance affordable and available childcare centres are treated here as support for mothers and maternity, not as any form of facilitating of women's autonomy (Goven 2000). Women, who 'have to' work are relieved of their care responsibilities, though the assumption is rather that it would be better for them not to take up paid employment. In this way, though, Hungarian model is more 'realistic'. Women in those three countries have to work, because families need double incomes. The difference here is, how they are supported in this 'reconciliation' task. In Hungary the support seems to be the greatest, and in Poland the lowest.

Still, it seems good to keep in mind that these countries have their communist female-mobilising past behind, and that the policies of re-familialisation and re-masculinisation are examples of the rush to depart from communism (and everything that it involved) as quickly as possible. That is why the present policies of all those countries have a lot in common. If compared with the Western world, the communist countries had different features at the beginning of the transformation: specifically women-friendly policies and relatively sustainable demographic development. Once they started to modernise their economics, moving towards more conservative family policies, their rates of female economic activity and birth-rates started to decrease and in this they started to resemble the Western world.

In sum, following Lynn Haney (2003), I would argue that familialism is only channelled differently in those three countries. Therefore, Poland represents the example of *implicit familialism*. Accessibility to most of the benefits are restricted by the principle of means-testing and their level is very small. At the same time the access to public or private childcare services is rather limited. This means, that the responsibility for care is located within family, though implicitly. In the Czech Republic the situation is different, as the state explicitly supports the primary role of family in child rearing. The periods of payments are long, though the payments themselves decrease with time. This is accompanied by almost non-existing public day-care for small children. Hungary, on the other hand, has a family policy model with more options and more support. Both elements are present – the provisions of the generous cash benefits for care and more available and accessible publicly provided

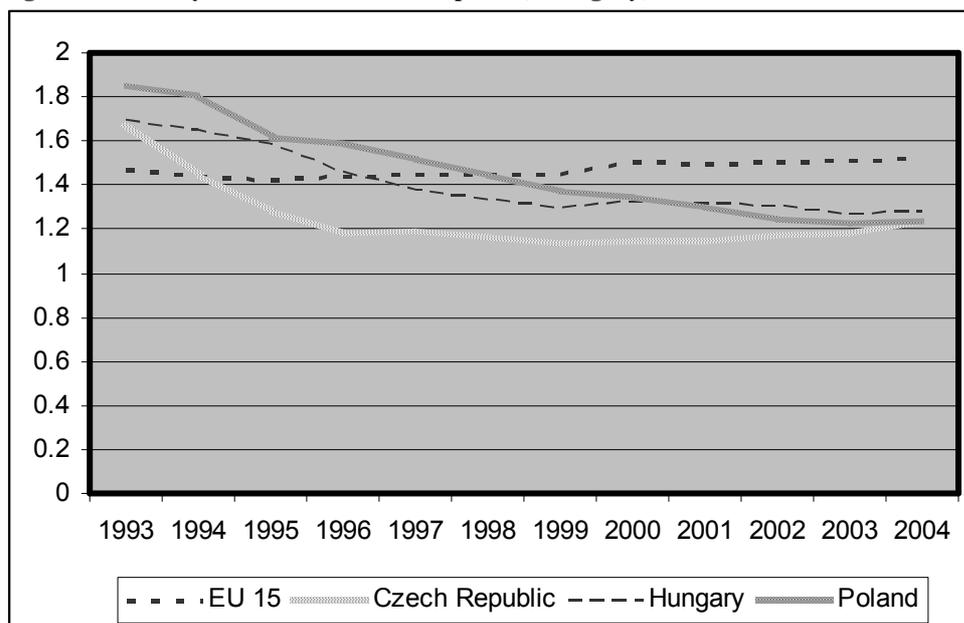
childcare centres, especially these for small children. None of these systems supports sharing care responsibilities between both parents, none of the countries, also, pursues the policies of explicit mobilisation of female labour force. Table 2 summarises the findings once again.

**Table 2:** Three cases of familialism: Poland, the Czech Republic and Hungary

Country/Type of familialism	Poland/implicit	Czech Republic/explicit	Hungary/choice-oriented
<b>Policies</b>	Family ‘not disturbed’ in the task of care. Residual welfare system does not support family or women in the ‘reconciliation’ task, care is a private task. Result: dropping fertility rates and/or fewer women on the labour market.	The state explicitly supports the traditional division of labour within the family. Higher family support, more explicitly placing women as carers (lowest enrolment of children in the nurseries, longest periods of the leave). Result: dropping fertility rates and/or fewer women on the labour market.	The state supports mothers in reconciliation of their domestic and professional obligations. Relatively high support for family (prevailing universal entitlement for different benefits), developed childcare system supports women’s paid employment. Generally policies aimed at ‘helping mothers’ in their ‘reconciliation’ task (but not de-familising) Result: dropping fertility rates and/or fewer women on the labour market.

As already mentioned by some scholars, these familialistic policies – though they took different paths and faces, result in similar trends concerning employment and demographic processes (Saxonberg and Sirovatka 2006). In the case of many countries in Eastern Europe, the withdrawal from the labour market is not the solution for the question of care, as the families cannot afford to have only one breadwinner. That is why even though women wanted to stay at home, they have to work to support their families. That is they would rather opt for a delay in childrearing than for having a child in the early stage of their carrier. That would also explain why in Poland the demographic downturn was the sharpest among this group of countries (see figure 4). The situation in the Czech Republic is slightly different, since women still represent a large part of economically active, and the biggest change took place in Hungary. At the same time, however, the Czech Republic noted the most rapid demographic downfall already in the first half of the 1990s. This might suggest, for instance, that in the Czech Republic women opted more for resigning from having families than from employment. Figure 4 and table 3 show the data for these two countries.

**Figure 4: Fertility rates in the Czech Republic, Hungary, Poland and the EU 1993-2004**



Source: Eurostat Population Statistics

**Table 3: Activity Rates as Percentage of Active Populations**

	Czech Republic		Hungary		Poland	
	1990	2001	1990	2001	1990	2001
<b>Male</b>	n.d.	71.90	83.60	67.80	74.30	64.30
<b>Female</b>	n.d.	67.90	75.90	52.40	57.00	49.70
<b>Total</b>	66.30	70.00	80.00	60.00	65.30	56.60
<b>female/male ratio</b>	n.d.	0.94	0.91	0.77	0.77	0.77

Source: (Fodor 2005: 6)

While the analysis of changes with respect to economic activity and fertility rates would require more attention in a separate text, they help to illustrate the familialistic effects of welfare policies in these countries. As the countries differ between each other also in this respect this can be the sign of the processes that have more than short-term perspective of the 1990s and may have something in common with the three divergent paths of familism.

### Conclusions

The main goal of this paper was to present a variety of family policies in the region of Central and Eastern Europe using the examples of the Czech Republic, Hungary and Poland. The framework of ‘varieties of familism’ was selected as it was most suitable for grasping the differences between these three countries, usually placed in the same cluster of ‘re-familialisation’ or ‘re-traditionalisation’. For the question of clarity and for characterisation of the three mixes of family policies in further work they were labelled as follows: Poland as the

case of *implicit familialism*, the Czech Republic – *explicit familialism*. Hungary, for its generous and more comprehensive family policies received the label: *choice-oriented familialism*.

Acknowledging variation in family policies between the CEE countries is very important, however, once the differences are presented in a dynamic, historical perspective, one crucial conclusion is that these policies were different already long time ago. In the context of regime change this is a very interesting conclusion. This unexpected stability can be a sign that the phenomenon of change as such has been overestimated by the scholars dealing with the problem of transition. Changes in the political and economic systems did not mean the shift in the functioning of other spheres, including institutional solutions concerning family support. In other words, the previous developments represented a crucial initial conditions for making further reforms. It also meant that, like in Hungary and in Poland in late 1990s, revolutionary changes were not acceptable. If change took place, it was mostly the case of the Czech Republic.

The next step would be to ask, what explains the variation and the stability, as well as and why changes afterwards happened in the Czech Republic to the greatest extend, but were more absent in the other countries. The most important conclusion from this paper is that limiting the analysis to the short-term perspective is not enough to understand the shape of policies and their possible impact on the choices concerning employment and family. The next step, thus, on the way to complete the picture of family policy development in these three countries, is to grasp the past developments and try to find out what kind of factors contributed to this case of institutional stability.

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<sup>11</sup> In Western Europe this division is not viable: however, in all the post-communist countries even the legislation now still describes 'maternity leave' as different from the 'parental leave'. The latter is the added part of the leave that was in most of these countries introduced in late 1960s.

<sup>2</sup> <http://www.zus.pl/swiadcz/zas003.htm>

<sup>3</sup> Ustawa z dnia 16 listopada 2006 r. o zmianie ustawy Kodeks pracy oraz o świadczeniach pieniężnych z ubezpieczenia społecznego w razie choroby i macierzyństwa [Act of 16 November 2006 on amendment of the Labour Code and the Act on cash benefits from social security in case of sickness and maternity], Dziennik Ustaw no 221, position 1615.

<sup>4</sup> *Ustawa z dnia 7 września 1991 r. o systemie oświaty* (Act of 7th September 1991 on the Education System), Dz. U. (Official Journal of Law) 1991 Vol. 95, position 425).

<sup>5</sup> It is not clear what the difference between 'nursery' and 'crèche' was. Usually crèches are designed for younger children – under 3. Nursery has most ambiguous meaning.

<sup>6</sup> This section is based on the text of Bicskei, E. (2006). "'Our Greatest Treasure, the Child": the Politics of Care in Hungary, 1945-1956." Social Politics **13**(2): 151-188.