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PPL Evaluation: Final Report

ISSR RESEARCH REPORT

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Acronyms and abbreviations

ABS	Australian Bureau of Statistics
ACIR	Australian Childhood Immunisation Register
BaMS	Baseline Mothers Survey
BB	Baby Bonus
CATI	computer assisted telephone interviews
DAPP	Dad and Partner Pay
DSS	Department of Social Services
EIPE	Employer Implementation Phase Evaluation Study
EMPERIA	Employers Impact Analysis
FaHCSIA	Department of Families, Housing, Community Services and Indigenous Affairs
FaWCS	Family and Work Cohort Survey
HILDA	Household, Income and Labour Dynamics in Australia Survey
ISSR	Institute for Social Science Research
NCI	Not indigenous, not from a culturally or linguistically diverse background
LSAC	Longitudinal Survey of Australian Children
LSIC	Longitudinal Survey of Indigenous Children
NES	National Employment Standards
PLP	Parental Leave Pay
PPL	Paid Parental Leave

A note on authorship

All named authors made contributions to this report or the data on which it is based.

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Executive Summary

Introduction

Australia's first national Paid Parental Leave (PPL) scheme commenced on 1 January 2011.

Since its commencement, the PPL scheme has provided eligible working parents with up to 18 weeks of Australian Government-funded Parental Leave Pay (PLP) when they take time off from work to care for a newborn or recently adopted child.

The legislated objectives of the PPL scheme are to:

1. Signal that taking time out of the paid workforce to care for a child is part of the usual course of life and work for both parents; and
2. Promote equality between men and women and balance between work and family life.

The objective of PLP is to provide financial support to primary carers (mainly birth mothers) of newborn and newly adopted children, in order to:

1. Allow those carers to take time off work to care for the child after the child's birth or adoption;
2. Enhance the health and development of birth mothers and children;
3. Encourage women to continue to participate in the workforce; and
4. Promote equality between men and women, and the balance between work and family life.

The PPL scheme was augmented by the introduction of Dad and Partner Pay (DAPP) from 1 January 2013. Eligible fathers and partners can receive two weeks' pay at the rate of the National Minimum Wage, when they take unpaid leave or are not working for pay, to spend time with their newborn or recently adopted child.

The objective of DAPP is to provide financial support to fathers and partners caring for newborn or newly adopted children, in order to:

1. Increase the time that fathers and partners take off work around the time of birth or adoption;
2. Create further opportunities for fathers and partners to bond with the child; and
3. Allow fathers and partners to take a greater share of caring responsibilities and to support mothers and partners from the beginning.

This report provides results from evaluations of both components of the PPL scheme. Part B of the report focuses on the PPL scheme as it was originally established, with PLP as its centrepiece. Part C focuses on the DAPP component of the scheme.

The commencement of PPL in 2011 brought Australia into line with almost all comparable OECD countries. Prior to this, Australia and the U.S. were the only high-income OECD countries without such schemes (Ray et al. 2010). Across high-income OECD countries, the policy aims of paid

parental leave schemes generally focus on helping families in which both parents work to balance their paid work and family responsibilities, supporting mothers' workforce participation and, often, promoting gender equity goals. The PPL scheme's objectives are in concert with this international policy agenda and with international experience in implementing it.

The PPL Evaluation

In 2010, the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) (now Department of Social Services (DSS)) commissioned an evaluation of the PPL scheme, conducted in four phases to be completed in 2014. Part A (Chapter 1) of this report presents the evaluation methodology in detail.

The findings from Phases 1, 2 and 3 have been published on the DSS website (Martin et al. 2012, Martin et al. 2013, Martin et al. 2014):

- Phase 1 of the PPL evaluation used data collected in 2010 before the commencement of the PPL scheme. This phase established baseline data on key outcomes, to allow robust comparison and assessment of the impacts of the PPL scheme. Phase 1 showed most Australian working mothers were already taking time away from work after the birth of a child, with only 13 per cent returning to work within three months of the birth and 95 per cent of mothers being covered by statutory unpaid leave entitlements. However, less than half (46 per cent¹) of working mothers who would have been eligible for PPL had it existed were entitled to employer paid² maternity or parental leave. Moreover, access to employer paid parental leave was highly unequal, with very low levels of access amongst large groups of women, such as those in casual jobs and those working for small and medium businesses.
- Phase 2 of the PPL evaluation used data collected between July and December 2011, several months after the implementation of the scheme in January 2011 and following the commencement of the mandatory employer role³ in July 2011. This phase investigated how both employers and mothers were responding to the PPL scheme in its first few months of operation. Phase 2 showed the implementation of PPL had been relatively smooth and largely consistent with expectations. It showed that most mothers and employers felt positively about their experiences with PPL, although a small proportion of mothers and employers

¹ This figure is correct and is taken from Table 2 of the Phase 1 report. The text of the Phase 1 report is in error in stating that 51 per cent of working women had access to employer paid leave (see Martin et al., 2012: 19). In fact, the best estimate from the Phase 1 survey is that, before the introduction of PPL, 43 per cent of working mothers (including those who would not have been eligible for PPL had it existed) had access to employer paid leave.

² Throughout this report, the term 'employer paid leave' (or 'employer paid maternity leave' or 'employer paid paternity leave') is used to refer to leave that is funded by an employer.

³ From 1 July 2011, employers have been required to provide PLP to their long- term employees, including employees who have worked for them for at least 12 months prior to the birth, will be their employee for their PPL period and expect to receive PLP for 8 weeks or longer.

experienced some difficulties with the scheme, notably in the timeliness of receiving payments (mothers) and providing PLP (employers).

- Phase 3 of the PPL evaluation used data collected between April and December 2012, and compared it to Phase 1 and Phase 2 data. It focused on the short-term and intermediate outcomes of PPL. Short term outcomes included the progress of the scheme and its operation since Phase 2. Intermediate outcomes included trends in parents' leave-taking and duration of leave, and employers' experiences of and attitudes towards the scheme, and whether there had been any changes to employer provided parental leave policies and practices. Phase 3 found that awareness of PPL was almost universal amongst eligible mothers, and most chose PPL over the Baby Bonus (BB). Preliminary analysis of mothers' return to work patterns showed changes in line with PPL policy aims. The analysis suggested that PPL had resulted in a reduction in the proportion of mothers who returned to work within 18 weeks of the birth, and a possible increase in the proportion who returned by 12 months. There was virtually no change in employers' paid parental or other paid leave provisions following the introduction of PPL, costs of implementing PPL were minimal for most employers, and employers' attitudes to PPL became more positive between 2011 and 2012.
- Phase 4 assessed progress towards the 'ultimate' outcomes of the initial PPL Scheme. These outcomes relate to women's workforce participation, mothers' and babies' health and wellbeing, gender equity, and work-life balance. This report compares outcomes and experiences of mothers before and after the introduction of PPL to assess progress towards these ultimate outcomes.

PPL evaluation methodology

Phase 4 uses data from two random sample surveys of PPL-eligible mothers:

- BaMS (Baseline Mothers Survey) – a pre-PPL survey, conducted in Phase 1, of mothers who gave birth in October or November 2009 and would have been eligible for PPL had it existed at the time. The survey was conducted about 12 months after their baby's birth.
- FaWCS (Family and Work Cohort Study) – a post-PPL survey of mothers who gave birth in October or November 2011 and who were granted PLP or were granted BB and probably were eligible for PLP. The survey was longitudinal and conducted in two waves during Phase 3. Wave 1 data was collected when the babies were about six months old and wave 2 data when the babies were about 12 months old.

To assess the effects of the PPL scheme, outcomes observed in the post-PPL sample (FaWCS) were compared with those observed in the pre-PPL sample (BaMS). Statistical analysis was conducted to ensure that observed changes are likely due to PPL and not to other confounding factors.

Phase 4 also uses data from two qualitative studies:

- Pre-PPL in-depth interview study of mothers who gave birth in October or November 2009 and would have been eligible for PPL had it existed at the time. This study focused on mothers in groups of special policy interest: single mothers, Aboriginal or Torres Strait Islander mothers, mothers from culturally and linguistically diverse backgrounds, and mothers employed on casual contracts or who were self-employed before the birth.
- Post-PPL in-depth interview study of PPL eligible mothers who gave birth in October or November 2011. This study also focused on mothers in groups of special policy interest: single mothers, Aboriginal or Torres Strait Islander mothers, mothers from culturally and linguistically diverse backgrounds, and mothers employed on casual contracts or self-employed before the birth.

Data from these studies is used to elaborate on the mechanisms through which PPL may affect ultimate outcomes, and to assess the scheme's impact on ultimate outcomes from mothers' perspectives, especially for mothers of special policy interest.

Part A (Chapter 1) of this report explains the PPL scheme design and evaluation methodology.

Summary of key findings – Phase 4 of the PPL evaluation

The Phase 4 findings are presented in Part B (Chapters 2 – 6) of this report. The key findings are as follows.

Labour force participation and labour supply

A key policy aim of the PPL scheme is to provide mothers with the opportunity to spend more time away from paid work following a birth or adoption. The PPL scheme is also intended to support mothers' subsequent return to work, since international evidence shows that the availability of paid parental leave is associated with enhanced longer-term labour force participation for women (Productivity Commission 2009; Jaumotte 2003).

One of the key findings of the evaluation was that PPL had a clear effect of delaying mothers' return to work up to about six months after the birth of their baby, and then slightly increasing their probability of returning to work before the baby's first birthday. An indication of the size of the effect is provided by estimates of the proportion of mothers who had returned to work in matched pre- and post-PPL survey samples of mothers. These estimates indicate that:

- By 18 weeks following the birth of their child 85 per cent of post-PPL mothers had *not* returned to work, compared to 78 per cent of pre-PPL mothers.
- By 26 weeks (six months) following the birth of their child 64 per cent of mothers in both pre-PPL and post-PPL samples had *not* returned to work.
- By 52 weeks following the birth of their child (one year), 27 per cent of post-PPL mothers had *not* returned to work, compared to 31 per cent of pre-PPL mothers.

The impact of PPL in extending the amount of leave taken was most pronounced amongst mothers on lower incomes and with lower formal education, including those who had been on casual contracts before the birth of their baby. This was almost certainly because PLP represents a larger proportion of their earnings for low income mothers than for those on higher incomes, and because low income mothers (particularly those on casual contracts) were least likely to have access to employer paid parental leave before the introduction of PPL.

The PPL scheme also had a particularly strong impact in delaying the return to work of mothers who had been self-employed before the birth. Pre-PPL, these mothers tended to return to work particularly early compared to other mothers, and PPL substantially reduced this behaviour, though they continued to return to work earlier than other mothers.

PPL may have had a somewhat stronger impact on single mothers too, particularly in increasing the probability that they would return to work in the second six months of their child's life, although the difference between single and partnered mothers did not reach statistical significance.

PPL also affected the characteristics of the jobs mothers took when they returned to work. Thus:

- PPL resulted in an increase in the already high proportion of mothers who returned to the same job as before the birth, when they first went back to work. In matched analytical samples, this proportion increased from 73 per cent of those mothers who returned to work before PPL was available, to 77 per cent after the introduction of PPL.
- These effects on retention rates were concentrated amongst mothers without a tertiary qualification. In matched analytic samples, the proportion of returning mothers without a tertiary education who went back to the same job rose from 69 per cent before PPL to 77 per cent after PPL was introduced. In contrast, the proportion of returning tertiary educated mothers who went back to the same job was unchanged at 77 per cent after the introduction of PPL. This difference may be because mothers without tertiary education were least likely to have access to employer paid parental leave before PPL was introduced, so were most affected by any connections to employers and jobs forged by PPL.
- PPL also produced an increase in the proportion of mothers who went back to the same job with the same conditions (pay, hours, etc.). In matched analytical samples, this proportion increased from 28 per cent of mothers who returned to work before PPL was available, to 33 per cent after the introduction of PPL.

Overall, it is clear that PPL significantly slowed the rate at which mothers return to work up to about 6 months following a birth. This effect was particularly strong for mothers with lower incomes and those who had been employed casually or self-employed before the birth, strongly supporting the view that the period of predictable income provided by PLP allowed some mothers to remain at home with their babies longer than they otherwise would have. This interpretation is further supported by evidence from in-depth interviews with mothers whose income security and income levels would have been

most enhanced by PPL (casuals, self-employed and single mothers). In short, for a significant number of mothers, PPL provided both income security and the opportunity to spend time at home with their new babies.

Mothers' and babies' health and wellbeing

A key policy aim of the PPL scheme is to enhance mothers' and babies' health and wellbeing. Based on research evidence, it was expected that PPL might enhance mothers' health by reducing stress and allowing them to spend more time with their newborn. Babies' health could be improved if mothers extended breastfeeding as a result of the introduction of PPL, thus capitalising on breastfeeding's well-established benefits to infant health. Infant health might also be enhanced if mothers spent more time at home with their babies.

Mothers' physical and mental health

The PPL scheme produced small, but statistically significant, improvements in mothers' average physical and mental health, as measured by a well validated self-report measure (SF-12). Improvements in mothers' physical health are most likely due to mothers who delay returning to paid work also delaying placing their babies in formal childcare, since entry of babies into formal childcare increases their immediate likelihood of contracting infections and passing these on to their parents. Improvements in mothers' mental health probably arise from the reduced stress resulting from the secure, predictable income provided to mothers during their PPL period. In-depth interviews with mothers whose circumstances are particularly affected by PPL (notably casuals, self-employed mothers, and single mothers) confirmed these mechanisms for the impact of PPL on mothers' health. They indicated that both the availability and security of pay while on leave, and the rate of the payment relative to their previous level of pay were salient.

The small average improvement in mothers' physical and mental health is likely to have had important clinical effects for some women. There is strong evidence that, at the population level, exposing a large number of people to a small risk may generate more clinically significant cases than exposing a small number of people to high risk (e.g., Rose 1992). Chronic health outcomes such as depression or anxiety are particularly germane as symptoms occur on a continuum. Small reductions in the average level of mental health symptoms among a population subgroup such as mothers could therefore represent a considerable preventative health gain. Mothers for whom PPL made differences that were largest and most likely to be clinically significant were:

- Mothers who had been on fixed term contracts, who experienced greater physical health improvements than mothers on other employment contracts.
- Mothers who had been on casual contracts, who experienced greater improvements in mental health than mothers on other employment contracts.

Breastfeeding initiation and duration

Possible effects of PPL on breastfeeding initiation and duration were assessed because of the well-established association between breastfeeding and infant health and development. The World Health Organisation (2003) recommends six months of exclusive breastfeeding for optimal infant health, growth and development. Breastfeeding initiation rates in Australia are very high (around 95 per cent of new mothers in the evaluation surveys had commenced breastfeeding), but breastfeeding rates decline rapidly in the months after the birth and around 15 per cent of babies are exclusively breastfed to around six months (AIHW 2012). The PPL evaluation found that six months after the birth, just over half of mothers are still breastfeeding (not necessarily exclusively).

Mothers' return to work is a key factor in the timing of breastfeeding cessation, so it was expected that the delay in return to work associated with the introduction of PPL might also delay the cessation of breastfeeding for mothers who took PPL. The PPL scheme appears to have had no impact on Australia's already high rates of breastfeeding initiation. However, there was a small increase in the proportion of mothers who were still breastfeeding when their child was six months and older. The difference between pre- and post-PPL mothers widened from six to 12 months after the birth and at 12 months the difference was statistically significant. An indication of the size of the effect is provided by estimates of the proportion of mothers who continued to breastfeed at various times in matched pre- and post-PPL survey samples of mothers. These estimates indicate that:

- At 13 weeks after the birth (three months), about 75 per cent of mothers in both pre-PPL and post-PPL samples continued to breastfeed.
- At 26 weeks after the birth (six months), 58 per cent of post-PPL mothers continued to breastfeed, compared to 56 per cent of pre-PPL mothers.
- At 40 weeks after the birth, 45 per cent of post-PPL mothers continued to breastfeed, compared to 42 per cent of pre-PPL mothers.
- At 52 weeks after the birth (one year), 30 per cent of post-PPL mothers continued to breastfeed, compared to 26 per cent of pre-PPL mothers.

PPL's effect of increasing breastfeeding duration was fairly consistent across all groups of mothers in the evaluation, with one important exception. Results suggested that single mothers may have shown the opposite pattern to other mothers, with post-PPL single mothers being less likely to continue breastfeeding from about eight weeks, compared to pre-PPL single mothers.

Child Health

PPL might be expected to impact on infant health in several ways. For example, a delay in mothers' return to work could produce a delay in babies entering formal childcare, thereby delaying their exposure to infection. Another effect may arise if PPL leads to a reduction in mothers' stress or anxiety and provides them with additional time to spend with their babies.

The evaluation examined several indicators of infant health: immunisation rates, mothers' reports of babies' illnesses, and mothers' overall assessment of babies' health. Combining these indicators,

there were some signs of a small improvement in babies' average health following the introduction of PPL, but the evidence was not conclusive. The evaluation found:

- PPL appeared to have no effect on immunisation rates, with the majority of mothers (87 per cent) in both samples reporting that their baby's immunisations were up to date. The high rates of immunisation before PPL was introduced meant the scope for improvement was small.
- PPL had a small, but statistically significant, impact on the likelihood that mothers would report that their baby had experienced an illness of one week or more during the first year of the baby's life. The proportion of mothers reporting such illnesses fell from 45 per cent before PPL to 41 per cent after its introduction in matched pre- and post-PPL samples.
- PPL had no effect on the proportion of mothers who described their babies' health as 'very good' or 'excellent'.

Overall, the impact of PPL on child health in the first year of life was small. In-depth interview data suggests any impact was most likely due to mothers delaying their return to work which in turn delayed their infants' entry into formal childcare and exposure to infection.

Gender equity and work-life balance

Another policy aim of the PPL scheme is to improve gender equality and help parents to balance work and family life. The PPL evaluation examined indicators of household and workplace gender equity, overall work-life balance, mothers' relationship satisfaction and their views about their career prospects on return to work.

The evaluation found mixed evidence of change in these areas:

- There was no evidence PPL influenced the share of childcare, housework or total household work between mothers and their partners at 12 months after the birth.
- The introduction of PPL had no consistent impact on mothers' treatment at work while pregnant and their use of flexibility arrangements. Following the introduction of PPL, there was no evidence that fewer mothers experienced problems at work while pregnant or that more mothers were given assistance at work while pregnant. Moreover, there were no consistent indicators that the introduction of PPL was associated with any change in mothers' use of flexibility arrangements that might assist them to balance the demands of work and family life when they returned to work.
- PPL was associated with a small, statistically significant, improvement in mothers' perceptions of their career prospects. Almost one-third (32 per cent) of mothers in the post-PPL sample who had returned to work by the time their babies were 12 months old said that their career prospects were 'worse' than before they gave birth. This was less than the 38 per cent expressing this view in the matched pre-PPL sample.

- PPL appeared to produce a small, statistically significant decrease in the likelihood that mothers felt rushed or pressed for time when their babies were around 12 months old. The proportion of mothers who said that they ‘always’ or ‘often’ felt rushed or pressed for time decreased from 57 to 53 per cent in matched samples following the introduction of PPL. This effect was particularly marked amongst mothers who had been employed on casual contracts before the birth, a group for whom PPL is especially likely to reduce financial stress and increase the ability to take additional time away from work.

The evaluation assessed the impact of PPL on gender equity and work-life balance at an early stage (12 months after a birth and in the early stages of the PPL scheme’s operation). The effects of PPL on mothers’ career prospects will unfold over years following the birth, and other effects on gender equality and the balancing of work and family life may take time to become evident. Future monitoring will be required to assess these longer-term effects of PPL.

Conclusion

Phase 4 of the PPL evaluation focused on assessing the extent to which the PPL scheme is impacting the ‘ultimate’ outcomes. The evaluation assessed changes in mothers’ labour force participation and labour supply, mothers’ and babies’ health and wellbeing, and gender equity and work-life balance.

The introduction of PPL allowed mothers to take additional time away from paid work following the birth of their babies. The main effects of the scheme arise from the additional time mothers were able to take, and the financial security that was provided by a guaranteed income for up to 18 weeks.

Amongst the main effects were:

- PPL delayed mothers’ return to work during the first six months following a birth, so that more mothers stayed at home for at least 18 weeks after the birth of their baby. PPL also slightly increased mothers’ tendency to return to work in the longer-term, so that more mothers had returned to work by 12 months after the birth of their baby.
- The impact of PPL in delaying mothers’ return to work was most pronounced amongst lower income mothers and those with lower formal education, including those on casual employment contracts.
- PPL had a large effect in extending self-employed mothers’ time off work during the first six months.
- PPL increased employers’ retention of mothers when they returned to work. This effect was most pronounced amongst mothers with lower levels of formal education.
- PPL produced small improvements in mothers’ health, extended breastfeeding duration, and probably improved babies’ health slightly.
- The additional time and income security provided by PPL reduced the proportion of mothers who felt rushed and pressed for time, thus enhancing work-life balance.

- PPL produced no change in the household division of labour, or in mothers' treatment at work while pregnant. In both of these areas, it is likely cultural change over time would be required for improvements to occur.
- PPL was associated with a small improvement in mothers' perceptions of their career prospects on return to work.
- There was some evidence that PPL's impact on mothers' and babies' health and wellbeing and on work-life balance was concentrated amongst those for whom PPL made the most difference – mothers least likely to have access to employer paid parental leave, and those with least financial security due to their precarious employment.

While these effects were evident in the timeframe of the evaluation (focused on mothers who gave birth within the first year of the scheme's operation), further progress towards the wider PPL scheme's ultimate outcomes may occur in the future. Some outcomes (such as labour force effects and effects on child development) may not be evident until the scheme has been operational for a number of years, while achieving other objectives may depend on attitudinal change.

The DAPP evaluation

In 2012, the PPL evaluation was extended to include an assessment of the impact of DAPP. Part C (Chapters 7 – 11) of this report presents the findings of the DAPP evaluation.

The DAPP evaluation focused on DAPP uptake, the impact of DAPP on the time fathers and partners take away from work following a birth, and whether DAPP leads to increased opportunities for fathers to bond with their newborn, take a greater share of caring responsibilities and provide greater support for mothers following a birth. It also examined employer responses to DAPP.

DAPP evaluation methodology

The DAPP evaluation assessed the impact of DAPP in families with eligible fathers.⁴ Its approach was to compare the experiences and behaviour of families and employers before and after the commencement of DAPP.

The DAPP evaluation compares three sets of data collected before and after the introduction of DAPP:

1. In-depth interviews with families:
 - Pre-DAPP in-depth interview study of families in which the mother gave birth in September 2012, undertaken in April and May 2013.
 - Post-DAPP in-depth interview study of families in which the mother gave birth in April 2013, undertaken between September and December 2013.

⁴ Same-sex partners were deliberately not considered in the evaluation.

This qualitative research focused on fathers' leave taking and the factors influencing it, their experience of bonding with their newborns, their participation in household work, and their support for the mother.

2. Online survey of random samples of fathers:

- Pre-DAPP online survey of fathers whose partners gave birth in September 2012. The survey was conducted when babies were between six and nine months old.
- Post-DAPP online survey of fathers whose partners gave birth in April 2013. The survey was conducted when babies were 5-8 months old.

The survey asked fathers about their leave taking and involvement in household work and childcare.

3. In-depth interviews with employers:

- Pre-DAPP in-depth interview study of employers focusing on their understanding and views about DAPP before the payment commenced. Interviews were conducted between November 2012 and January 2013.
- Post-DAPP in-depth interview study of employers focusing on their understanding and views about DAPP and any experience they had of the scheme following its commencement. Interviews were conducted between October and December 2013.

Data from employer interviews were used to provide a picture of employers' views about DAPP and how it has operated.

Summary of key findings – DAPP evaluation

DAPP uptake

The post-DAPP online survey undertaken for the evaluation indicated that about 36 per cent of eligible fathers chose to take DAPP. Uptake was significantly higher amongst casually employed and self-employed fathers (around 50 per cent for both groups), reflecting their very limited access to employer paid leave of any kind. Knowledge of DAPP was widespread, with about 77 per cent of all eligible fathers being aware of DAPP (63 per cent of fathers who did not take DAPP said they were aware of it). Few fathers were aware of the provision that allowed employers to top-up DAPP to fathers' normal earnings, and virtually no fathers had been paid top-ups (six per cent of fathers who applied for DAPP said they were aware of the provision, and one per cent said they had been paid a top-up).

Impact of DAPP on leave taking

The introduction of DAPP was associated with a small, statistically significant increase in the average length of leave taken by all fathers during the first two months after a birth, though there was no change in the overall proportion of fathers who took leave. The timing of leave taking also shifted from later months to the first two months, so that there was no statistically significant change in the average

amount of leave taken by all fathers over the first six months. Fathers who took DAPP largely substituted unpaid leave for annual or holiday leave that they would have taken had DAPP not been available. One of the DAPP eligibility criteria is that the father must be on unpaid leave while the payment is taken.

- The average length of leave taken by fathers in the first two months after the birth increased by about one day to nearly 11 days.
- The average length of leave taken by fathers between three and six months after the birth decreased by about one day to three days.
- The proportion of fathers taking unpaid leave in the first two months after a birth increased from 15 per cent before DAPP to 22 per cent after its introduction, and the proportion taking annual leave declined from 47 per cent to 38 per cent (in analytic survey samples).

For the largest group of fathers, those in permanent jobs with some access to paid annual leave, DAPP provided the opportunity to take unpaid leave following a birth and retain their annual leave, possibly for use later in the first year of the new baby's life.

The effect of DAPP on fathers' leave taking can also be examined by focusing on leave after DAPP became available, and comparing fathers who chose to take DAPP with those who did not take it. This analysis showed that, all other things being equal, fathers who chose to take DAPP took an average of 3 days more leave than those who did not, in the first six months after a birth (an increase in leave duration of nearly 25 per cent from 13 days to 16 days). Much of this change was concentrated in additional leave taken in the first two months after the birth.

DAPP was particularly likely to be taken up by casually employed and self-employed fathers. It was also more likely to be taken by public sector employees and by fathers who knew other men in their workplace who had taken parental leave. In-depth interview data strongly suggested that the small average change in leave length masked important DAPP effects for some fathers who particularly needed to take leave. In particular, fathers in the following categories benefited substantially from DAPP:

- Fathers who previously had no access to paid leave following a birth, particularly employees on casual contracts, contractors and sole traders.
- Fathers who had exhausted other paid leave (especially annual leave) and had high family support demands that could not be met in other ways.

In effect, DAPP increased flexibility for fathers to take leave when the main leave motivators (family support needs and fathers' wish to spend time with their newborn) impelled them to do so.

Impact of DAPP on attitudinal change

In-depth interview data suggested that DAPP also had a significant effect on the attitudes of fathers and employers to leave taking by fathers after a birth. The availability of DAPP appears to have made some fathers more willing to be assertive about taking leave following a birth, and some employers more inclined to see such leave as legitimate and a normal aspect of the leave taken by employees.

Impact of DAPP on opportunities for fathers to support mothers and participate in care of their newborn

The introduction of DAPP was associated with small but statistically significant increases in the extent of fathers' engagement with the new baby and help with domestic tasks in the first two months after the birth. These small changes are most likely explained by the small increase in the amount of leave after the birth that DAPP produced (see above).

Behind these small average effects, in-depth interviews indicated that DAPP had important effects for some fathers. For example, when fathers had no access to employer paid leave and the mother or infant needed substantial additional support (for example, after a caesarean birth), DAPP significantly eased the financial burden associated with fathers' taking the leave that was needed. Similarly, when families had substantial needs for care and support but only limited help from extended family, DAPP allowed fathers who had used up their paid leave to take additional time at home.

Overall, DAPP clearly did provide additional opportunities for fathers to support mothers and to participate in the care of their newborn. Behind the small average impact of DAPP in increasing fathers' involvement, some families with significant needs for care and support and/or limited paid leave availability found DAPP a very important resource.

Impact of DAPP on fathers' opportunities for bonding with newborns

Insofar as the time fathers are able to spend with their newborns is central to bonding, DAPP does appear to have provided some new opportunities due to the small average increase in leave it produced (see above). Fathers appear to commonly substitute DAPP for paid annual leave they would otherwise have taken following a birth, thus allowing them to take annual leave later in the first year of the baby's life. For fathers who emphasised the importance of continuing to spend time with the baby, this substitution provides additional opportunities for bonding during the first year of life.

Employer responses to DAPP

Most employers in the pre-DAPP in-depth interview sample (30 of 55) were entirely unaware of DAPP or had minimal awareness of it. However, by the time of post-DAPP in-depth interviews, almost one year after the payment became available, almost all interviewed employers were aware of the payment and its basic requirements.

Employers were almost universally supportive of fathers and partners taking leave around the time of a birth, and about half of employers interviewed before DAPP commenced expressed in-principle

support for DAPP. Before DAPP commenced, employers whose workforce was primarily younger with lower income were most likely to expect that their employees would use it, as well as employers who said in interviews that they placed a high value on fatherhood. In workplaces where most employees had relatively high incomes, employers expected low uptake.

Following the introduction of DAPP, employers in the post-DAPP in-depth interview sample reported that employees who took DAPP often combined it with other forms of leave (if the employee was eligible for leave). Employers also noted that they would have expected some employees who took DAPP to have taken annual leave if DAPP had not existed, consistent with the pattern noted above of fathers substituting DAPP for annual leave. Employers usually expected that future uptake of DAPP amongst their employees would depend on how DAPP compared to their normal earnings.

Employers interviewed after the introduction of DAPP generally accepted it, and considered it easy for them to accommodate. There were indications of a small, positive shift in employers' views of fathers and partners taking paternity or secondary carer leave following a birth. Some employers noted a changing workplace culture that involved more fathers taking leave around a birth. While just over half of employers in the post-DAPP sample said that their workplace had not been affected by the availability of DAPP, some said that it had an impact. In almost all of these cases, this impact was seen to be positive in supporting employees to take time off work after a birth, or complementing or enhancing a culture the employer wished to foster. A few employers noted that operational issues might arise when fathers took longer leave (a month or more).

One employer interviewed after DAPP was introduced had provided an employee who took DAPP with a top-up payment. Most were not aware this was possible.

Overall, it appears that employers have accepted DAPP, and that DAPP has cemented a 'soft' norm of fathers and partners taking two weeks leave around the time of a birth. Most employers regard this as a positive development. These patterns appear to be consistent across employer size and sector.

Overall Conclusion

Part D (Chapter 12) of this report synthesises the Phase 4 and DAPP evaluation findings to explain the overall impact of the PPL scheme.

The PPL scheme seeks to achieve its main policy goals largely by removing or reducing financial barriers to parents spending more time away from work with their newborns or newly adopted children. The evaluation found strong evidence that PPL has had this effect: mothers were less likely to return to work in the early months following a birth (up to about six months). This effect was strongest amongst mothers for whom PPL had the largest effect in reducing financial barriers to taking time away from work after the birth. These mothers included those for whom the PLP amount was a significant proportion of their usual earnings, whose usual income was less secure, or who would not

have had access to employer paid leave. In-depth interviews confirmed mothers stayed away from work longer because of the financial security PPL provided.

The DAPP evaluation also found evidence that DAPP reduced the barriers to fathers taking leave following a birth, though the effect was smaller than the impact of PPL on mothers. DAPP resulted in a small increase in the average days of leave taken by fathers in the first two months after a birth, allowing some fathers to save other paid leave to be used later. The effect was larger when DAPP had a larger impact on the barriers to fathers taking leave. DAPP therefore had more effect on the leave taking of fathers for whom the DAPP payment was significant compared to usual earnings, whose usual income was less secure, or who would not have had access to employer paid leave.

Most of PPL's impact in making progress towards its other policy goals can be attributed to its effects in reducing or removing financial barriers to parents staying away from paid work for longer after a birth. These flow-on effects include a small improvement in mothers' average physical and mental health, small improvements in some indicators of babies' health, a small increase in breastfeeding after six months after the birth, and a small decline in mothers' tendency to feel rushed or pressed for time. In addition, the availability of PPL provides some families with increased income security following a birth, and this security reduces stress and improves well-being.

The evaluation found some evidence that the introduction of PPL has supported changes in attitudes and assumptions amongst both working parents and their employers. The main indications that the advent of PPL might be opening possibilities for cultural and attitudinal change were found in the DAPP evaluation. The advent of DAPP appears to have supported fathers and employers in opening a space to consider new expectations about men's role as fathers and how their roles as fathers fit with their work. DAPP appears to have made some fathers feel supported to insist on their right to take leave after a birth, even in the face of resistance from managers, workmates or employers. On the employer side, the commencement of DAPP supported some employers in assisting new fathers to take leave following a birth, even when this was not something that might have been expected in the past.

In contrast to these effects, the evaluation found less direct evidence that the introduction of PPL in its initial form (prior to the introduction of DAPP) had much effect on attitudes and expectations. It did not lead to any change in the division of labour between men and women within households, and there were no indications that it resulted in changes in how women were treated at work while pregnant.

Finally, the PPL scheme has clearly had the effect of supporting and encouraging mothers to return to work in the longer run, contributing to the policy objective of increasing women's workforce participation and overall labour supply. The scheme also increased the likelihood that mothers would return to the job they held before the birth. These effects could arise because of the incentives for mothers to return to work created by the availability of PLP, or because the PPL scheme somewhat increased mothers' attachment to their jobs because PLP was provided to mothers through their employers and/or through the KIT provisions of the scheme.

Overall, the evaluation has found that the main elements of the PPL scheme make significant and distinctive contributions to the scheme's policy objectives. The initial PPL scheme (without DAPP) reduced or removed barriers to mothers taking the leave they wished following a birth, resulting in mothers taking longer away from work. It provided some families with income security that was important to them following a birth. These effects had important flow-on effects for the health and wellbeing of mothers and babies. The initial scheme also resulted in mothers being more likely to return to work by their baby's first birthday. The introduction of DAPP allowed some fathers to take additional leave immediately following a birth, providing them with additional time to bond with their child and support the mother. Its other important effect was in supporting parents and employers to rethink the roles of fathers following the birth of a child. Taken together, these findings indicate the PPL scheme is contributing towards its 'ultimate' outcomes and is likely to continue to do so over time.

Part A – Introduction

Part A introduces the report by explaining the design of the Paid Parental Leave (PPL) scheme, and describing the methodology of the evaluation reported in the remaining Parts.

1 Introduction

Australia's first national scheme providing pay to eligible working parents following birth commenced operation on 1 January 2011. The Paid Parental Leave (PPL) scheme provides two Australian Government-funded payments to eligible working families: Parental Leave Pay (PLP) and Dad and Partner Pay (DAPP).

The commencement of the PPL scheme in 2011 brought Australia into line with almost all comparable OECD countries. Before this, Australia and the United States were the only high-income OECD countries that did not have national paid parental leave schemes (see Ray et al., 2010). In providing a flat rate payment, Australia's scheme is unlike most others in high-income countries where the payment is usually related to recipients' pre-birth incomes. The PPL scheme probably puts Australia around the middle of the range of generosity in high-income countries' paid parental leave provisions. Addition of the Dad and Partner Pay component of the scheme in 2013 placed Australia within a growing group of similar countries offering fathers paid parental leave that cannot be transferred to mothers (11 of 21 high-income countries offered similar leave in 2010; see Ray et al., 2010). Across high-income countries, the policy aims of these schemes cover a wide range of outcomes, but the focus is generally on helping families in which both parents work to balance their paid work and family responsibilities, supporting mothers' workforce participation and, often, promoting gender equity goals. Considerable research now shows that paid parental leave schemes can contribute to these goals effectively, though their impact depends on the exact design of the scheme. Indeed, the Productivity Commission (2009) referred to much of this evidence when it justified its blueprint for the scheme.

The objectives of the PPL scheme are to signal that taking time out of the paid workforce to care for a child is part of the usual course of life and work for both parents; and to promote equality between men and women and balance between work and family life.

From 1 January 2011 primary carers (mainly birth mothers) of newborn and newly adopted children could access PLP in order to:

- Allow those carers to take time off work to care for the child after the child's birth or adoption;
- Enhance the health and development of birth mothers and children;
- Encourage women to continue to participate in the workforce; and
- Promote equality between men and women, and the balance between work and family life.

An eligible working parent who is the primary carer of a child (usually the birth mother) may receive PLP for up to 18 weeks paid at the rate of the National Minimum Wage. To be eligible for PLP the primary carer must meet the PPL work, income and residency tests (see below).

The parent may receive PLP within the first 12 months following the birth. PLP may be taken before, after or at the same time as any paid leave. In the majority of cases, employers deliver the PLP to their eligible employees.

If the mother stops being the primary carer, for example if she returns to work early, she may transfer some or all of her unused PLP to an eligible father or partner who takes on primary care of the child.

From 1 January 2013, DAPP has also been available to provide financial support to fathers and partners caring for newborn or newly adopted children, in order to:

- Increase the time that fathers and partners take off work around the time of birth or adoption;
- Create further opportunities for fathers and partners to bond with the child; and
- Allow fathers and partners to take a greater share of caring responsibilities and to support mothers and partners from the beginning.

An eligible father, or partner of a birth mother, who is providing care to a baby may receive DAPP for two weeks paid at the rate of the National Minimum Wage. To be eligible for DAPP, the father or partner must meet the PPL work, income and residency tests (see below).

The parent may receive DAPP within the first 12 months following the birth. DAPP can only be taken during unpaid leave or while the parent is not-working, although employers may choose to provide a 'top-up' payment to their employee. DAPP is delivered to eligible parents by the Department of Human Services (DHS).

DAPP cannot be transferred to a secondary claimant – it can generally only be taken by a father or partner of a birth mother. If the father or partner becomes the primary carer of the child, the mother may choose to transfer some or all of her unused PLP to him. He may take this PLP before or after his DAPP period, up to a combined total of 18 weeks of payment.

1.1 Parental Leave Pay (PLP)

The main features of PLP are as follows.

1.1.1 Eligibility requirements

A parent is eligible for PLP if she/he:

- Is the primary carer of a newborn or recently adopted child. Generally, the birth mother must first be eligible for PLP, and if her partner is eligible and becomes the child's primary carer, the mother may transfer some or all of the unused PLP to her partner;⁵
- Worked for at least 10 of the 13 months (295 days in a 392 day period) prior to the expected date of birth or adoption;
- Worked at least 330 hours in that 10 month period (around 7.6 hours per week on average);
- Had no more than an eight week (56 consecutive day) gap between two consecutive working days;
- Had an individual adjusted taxable income of \$150,000 or less in the financial year before the birth or adoption, or date of claim, whichever is earlier;
- Is on leave or not working from the time she/he becomes the child's primary carer until the end of her/his PPL period (she/he may utilise 'Keeping in Touch' (KIT) provisions – see below); and
- Meets the residency requirements.

1.1.2 Payment delivery

PLP is provided through employers in the majority of cases. The employer role is intended to promote the attachment of the employee to their employer during the PPL period.

From 1 July 2011 an employer (with an Australian Business Number) must provide PLP to an eligible employee who:

- Has a child born or adopted from 1 July 2011;
- Has worked in the business for at least 12 months prior to the expected date of birth or adoption – consistent with the eligibility requirements for unpaid parental leave under the National Employment Standards (NES) in the *Fair Work Act (2009)*;
- Will be an employee of the business for their PPL period;
- Is an Australian based employee; and
- Is expected to receive at least eight weeks of PLP.

⁵ There is provision in the legislation for exceptional circumstances to be considered where the birth mother is incapable of being the primary carer.

Employers may opt-in to provide PLP to eligible employees for whom they are otherwise not required to provide the payment. PLP is provided by DHS to other eligible parents including short-term and non-ongoing employees, and non-employees such as the self-employed.

'Keeping in Touch' (KIT) provisions allow employees to do certain paid work activities on 10 days during their PPL period. These days are referred to as 'Keeping in Touch' (KIT) days. KIT activities may include participating in a planning meeting, performing on-the-job training, or performing work to become familiar with the workplace or the employee's role before returning to work. Self-employed parents may oversee their business and perform occasional administrative tasks.

1.1.3 Payment design

PLP is paid at the rate of the National Minimum Wage, currently \$640.90 per week, for up to 18 weeks, irrespective of the hours or earnings of the claimant before the birth.

PLP can be received at any time within the first 12 months of the child being born or entering the parent's care.

PPL must be taken in one continuous period without any break, even if it is transferred from the mother to her partner. Once a mother has returned to work she will be ineligible for PLP after this time.

PLP is taxable.

Family Tax Benefit Part B and some tax offsets are not available during the PPL period.

1.1.4 Payment uptake

Since the start of the PPL scheme in January 2011 until 30 June 2014, 444,425 families have received PLP. In 2013-14, 144,966 families started receiving PLP; an increase from 131,307 in 2012-13. Of those families who finished receiving their payment in 2013-14, 97.4 per cent received the payment for the full 18 weeks.

1.1.5 Baby Bonus

At the time the PPL scheme was introduced, eligible families with a newborn could also have been eligible to take the Baby Bonus (BB) payment instead of PPL. Parents who met the eligibility criteria for both PPL and BB could take either payment, but not both (except if eligible in the case of multiple births).

BB was a non-taxable payment available to a family following a birth if the family met a relatively generous income test (adjusted family income of \$75,000 or less in the six months following the birth). In the majority of cases, when taxation and interaction with other payments were taken into account, the PPL amount was worth more than the BB amount.

Phases 2 and 3 of the evaluation collected data on the reasons why some mothers chose to take BB instead of PPL, and found that single mothers, low income mothers, mothers who had been self-employed and mothers on casual contracts were more likely to have taken BB. These factors may have also affected some of the findings of Phase 4, and this is noted in this report where relevant.

Following the introduction of the PPL scheme, and after data for this evaluation was collected, a number of changes were made to BB. For children born or adopted from 1 July 2013, the BB payment amount was reduced from \$5,000 to \$3,000 for second and subsequent children. BB was abolished for children born or adopted from 1 March 2014 and replaced with the Newborn Supplement – an additional loading for families eligible for Family Tax Benefit Part A. This evaluation assessed mothers' experiences of the PPL scheme before these BB policy changes.

1.2 Dad and Partner Pay (DAPP)

The main features of the DAPP component of the PPL scheme are as follows.

1.2.1 Eligibility requirements

A parent is eligible for DAPP, if he/she falls into one of the following groups:

- biological father of the child;
- partner of the birth mother;
- adopting parent;
- partner of the adopting parent;
- parent in a surrogacy arrangement;
- partner of a parent in a surrogacy arrangement; or
- same-sex partner of:
 - the birth mother,
 - the biological father, or
 - the adopting parent

And he/she:

- provides care for a child born or adopted from 1 January 2013;
- meets the residency requirements;

- meets the same work and income tests as for PLP; and
- is on unpaid leave or not working during the DAPP period.

1.2.2 Payment delivery

DAPP is provided directly to the father or partner from DHS.

1.2.3 Payment design

DAPP can be taken for up to two weeks and is paid at the rate of the National Minimum Wage. Fathers and partners cannot be working or must be on unpaid leave during their DAPP period. However, employers may provide their employee with a 'top-up' payment to their normal earnings.

1.2.4 Payment uptake

Since the start of the DAPP scheme in January 2013, 102,521 fathers and partners have received DAPP, with 75,669 parents receiving payment in 2013-14.

1.3 The PPL evaluation

In 2010, prior to the commencement of the PPL scheme, the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (now the Department of Social Services (DSS)) commissioned the Institute for Social Science Research (ISSR) at the University of Queensland to undertake a comprehensive evaluation of the PPL scheme in the form it was to take on commencement on 1 January, 2011 (i.e., without DAPP).

This PPL evaluation has assessed the implementation of the scheme (Martin et al. 2012) and operational aspects of the scheme (Martin et al. 2013).

In 2012, ISSR's commission was extended to include an evaluation of the DAPP component of the PPL scheme.

The PPL evaluation is aimed at informing the Australian Government about the impact of the PPL scheme and to provide evidence to help inform future policy decisions.

The evaluation was conducted during the first two years of the PPL scheme. This timeframe allowed for an initial assessment about the effectiveness of the scheme and whether progress is being made towards the intended 'ultimate' outcomes.

It is likely the outcomes of the PPL scheme will take several years to be fully realised. For example, female labour force participation may increase after the PPL scheme has been operational for several years, as more women become aware of the eligibility criteria and increase their participation before and in between pregnancies in order to meet the work test. Some child health outcomes, such as the protective benefits of breastfeeding in reducing risk of childhood obesity, may not be detectable until

the children are older. The ultimate outcomes of the scheme would also interact and accumulate over time. For example, as maternal workforce participation increases, workplace cultures and household practices may change, which in turn would affect longer-term economic, social and wellbeing outcomes for individual families and society as a whole.

To assess the impact of the PPL scheme, the PPL evaluation proceeded in four phases:

Phase 1 (2010-2011) established robust baseline data in all areas related to the intermediate and ultimate outcomes of the evaluation. The findings were presented in a report available on the DSS website (Martin et al. 2012).

Phase 2 (2011-2012) evaluated the initial operation of the PPL scheme and its report is available on the DSS website (Martin et al. 2013).

Phase 3 (2012-2013) evaluated the short-term and intermediate outcomes of the PPL scheme and its report is available on the DSS website (Martin et al. 2014).

Phase 4 (2014) evaluated progress towards the ultimate outcomes of the scheme and is presented in Part B of this report.

The evaluation questions answered in this report are:

1. Are there indications that the PPL scheme is facilitating women's labour force participation, particularly by allowing them to take time out of the workforce following a birth and facilitating workforce re-entry?
2. Are there indications that the PPL scheme is enhancing the health and wellbeing of babies and mothers, by enabling working mothers to spend longer at home with their newborn children?
3. Are there indications that the PPL scheme is encouraging gender equality and improving the balance of family and work life in Australian families?

1.4 The DAPP evaluation

This report also presents the results of the evaluation of DAPP (Part C). The main evaluation questions answered are:

1. Is DAPP take up as anticipated, and what factors affect DAPP uptake?
2. Does DAPP lead to an increase in the time that fathers and partners take off work following the birth of a child?
3. Does DAPP lead to increased opportunities for fathers and partners to bond with their newborn?

4. Does DAPP lead to fathers and partners taking a greater share of caring responsibilities for their newborn?
5. Does DAPP lead to fathers and partners providing greater support for mothers following the birth of a child?
6. What are employers' views of DAPP and experiences with it?

1.5 Data used in this report

The PPL and DAPP evaluations have involved collecting a large amount of new data, as existing Australian datasets generally did not provide the required information and detail. The main data sources used in the evaluation are as follows.

1.5.1 Data used in Phase 4 of the PPL evaluation

The primary approach to evaluating progress towards ultimate policy goals in Phase 4 was to compare the experiences and behaviour of working mothers before the commencement of PPL (pre-PPL data) with that of similar mothers after its commencement (post-PPL data). The data were collected through large structured surveys and in-depth interviews.

Structured survey data were collected from a large random sample of mothers who were likely to have been eligible for PLP had it existed in 2009, and from a similar sample of mothers who were eligible for or likely to be eligible for PLP in 2011. Participants were surveyed through computer assisted telephone interviews (CATI). The two surveys were:

1. Baseline Mothers Survey (BaMS) – pre-PPL survey conducted in Phase 1. BaMS was a cross-sectional survey of mothers who gave birth before the PPL scheme commenced and were likely to have been eligible for PLP had it existed at that time. The sample for the survey was randomly drawn from recipients of BB for a baby born in October or November 2009. Participants were surveyed in November and early December 2010, or in February 2011. The sample consisted of 2,587 mothers.
2. Family and Work Cohort Survey (FaWCS) – post-PPL survey conducted in Phase 3 in two waves. FaWCS was a longitudinal survey of a sample of mothers who gave birth after the PPL scheme commenced, in October or November 2011, and who were eligible or likely to be eligible for PLP. Some mothers in the survey took PLP, and others took BB. Mothers were initially surveyed when their babies were about 6 to 8 months old (wave 1), and then surveyed again when their babies were about 13 months old (wave 2). The initial sample consisted of 4,201 mothers, with 3,501 having taken PLP and 700 having taken BB. The retention rate for the second wave of the survey was 83 per cent, with 3,487 interviews completed. Completed interviews for the second wave of the survey included 551 of the mothers who had taken BB, and 2,936 of the mothers who had taken PLP.

In-depth interviews were also conducted with two samples of mothers, a pre-PPL group who were mostly recruited from the BaMS survey and a post-PPL group mostly recruited from the FaWCS survey. These samples were not random samples and were not designed to be representative of the population of PPL eligible mothers. Rather, samples were chosen to represent mothers of particular policy interest: single mothers, Aboriginal or Torres Strait Islander mothers, mothers from culturally and linguistically diverse backgrounds, and mothers employed on casual contracts or self-employed before the birth. In addition to recruitment from the BaMS and FaWCS samples, some Indigenous mothers were also drawn from respondents to the Longitudinal Survey of Indigenous Children (LSIC) who had recently had a baby. An additional small group of mothers from culturally and linguistically diverse backgrounds were recruited through researcher networks. A total of 109 interviews were completed pre-PPL, and 100 interviews post-PPL. Most interviews were conducted face-to-face, and all were recorded and transcribed for analysis.

1.5.2 Data used in the DAPP evaluation

The primary approach to assessing progress towards policy goals in the DAPP evaluation was to compare the experiences and behaviour of working fathers before the introduction of DAPP (pre-DAPP data, collected in 2012) with that of similar fathers who were eligible for the scheme after its commencement (post-DAPP data, collected in 2013). The data were collected through in-depth interviews with fathers, mothers and employers, and an online survey of fathers.

Three methods were used to collect the data:

1. A large scale qualitative study involving face to face in-depth interviews with parents who had recently had a baby. The samples were drawn from applicants for PPL, BB and (in the post-DAPP sample) DAPP. A total of 102 interviews were conducted for the pre-DAPP sample (51 fathers and 51 mothers) and 105 interviews for the post-DAPP sample (63 fathers and 42 mothers). These samples included interviews in which both parents participated (13 pre-DAPP couples and six post-DAPP couples). The study was focused on fathers' leave taking patterns, the opportunities for fathers to engage and bond with their new children, their patterns of caring for new children, and the ways they supported the mothers.
2. An in-depth interview study of employers (55 pre-DAPP and 38 post-DAPP). Pre-DAPP, most employers were asked about DAPP as part of interviews being undertaken in Phase 3 of the PPL evaluation. An additional group of 15 interviews was conducted with employers who had registered for PPL but not paid it, to include employers in industries with few employees who take PPL. Post-DAPP employer interviews were designed to gather information on employers' experiences when an employee took DAPP or considered taking it, and their views and experiences about fathers taking leave around the time of a birth. Interview samples for this study were drawn from a list of employers registered for PLP.
3. A supplementary online survey of a large sample of recent (pre-DAPP and post-DAPP) fathers to gather information on fathers' paid and unpaid leave eligibility and uptake. The survey samples

were drawn from applicants for PPL, BB and (in the post-DAPP sample) DAPP. The pre-DAPP sample was drawn from the partners of PPL and BB customers born in September 2012, and the post-DAPP sample drawn from the partners of PPL and BB customers born in April 2013. The survey samples are representative of fathers with babies born in these months. The post-DAPP survey also covered fathers' experiences with taking DAPP or reasons for not taking it. These surveys achieved samples of 1,115 fully completed pre-DAPP responses and 1,208 fully completed post-DAPP responses.

Part B – Phase 4 PPL Evaluation

Part B presents the results of Phase 4 of the PPL evaluation. Phase 4 focuses on assessing whether PPL has assisted primary carers to take time off work to care for the child after the child's birth or adoption, and whether there is evidence of progress towards the scheme's ultimate aims of:

- Enhancing the health and development of birth mothers and children;
- Encouraging women to continue to participate in the workforce; and
- Promoting equality between men and women, and the balance between work and family life.

Results from qualitative data are also used to present a holistic picture of how PPL has affected mothers' experiences and actions.

2 Ultimate outcomes – Labour force participation and labour supply

The PPL scheme aims to extend mothers' time away from paid work following a birth, while increasing their lifetime attachment to the labour force. This chapter focuses on the extent to which women's labour force participation outcomes have changed since the introduction of the PPL scheme.

Over recent decades in Australia, there has been rapid change in women's participation in paid employment and education. Women's overall labour force participation rate has increased from 34 per cent in 1961 to 59 per cent in 2011 (ABS 2011), primarily through increasing employment of mothers. Between 1991 and 2011, the proportion of mothers in families with children under 18 who were employed rose from 55 per cent to 65 per cent (Baxter 2013). Women are now more likely to attain post-school qualifications, with 41 per cent of women aged 25 to 29 years having university degrees in 2011, compared to 30 per cent of men at that age (ABS 2012). Despite these changes, Australia has amongst the lowest levels of labour force participation in the Organisation for Economic Cooperation and Development (OECD) for women of prime childbearing age. In 2012, the labour force participation rate of women aged 25 to 34 years in Australia was 73.9 per cent which was below that of the US (74.1 per cent) and the UK (76.8 per cent), and well behind Canada (81.4 per cent), France (81.3 per cent), Germany (79.3 per cent), the Netherlands (85.5 per cent), Spain (84.6 per cent) and Sweden (83.8 per cent).⁶

No published studies focus on the causal effect of paid maternity leave on overall female labour force participation. Nevertheless, countries where parents have access to well-developed paid parental leave schemes (complemented with extensive, affordable childcare availability) show considerably higher maternal participation rates compared to countries where these schemes are not available. Jaumotte (2003) provides a comprehensive cross-national overview of women's labour force participation, showing the highest rates for Scandinavian countries and a much lower rate for Australia. Kalb and Thoresen (2010) specifically compare Australia and Norway, finding a difference of 20 percentage points in labour force participation of women with children aged one to four (60 versus 80 per cent in mid-2000), while women without children have comparable participation rates in the two countries.

The design of the PPL scheme is intended to promote mothers' attachment to their employer. For example, the mandatory role for employers in delivering PLP to employees is intended to promote attachment and help employers with staff retention. In addition, KIT provisions are designed to encourage mothers and employers to keep in touch while the mother is on leave, and to support activities that will facilitate the mother's return to work.

⁶ Figures retrieved from OECD online labour force statistics at: stats.oecd.org/Index.aspx?DataSetCode=STLABOUR. Accessed May 14, 2014

This chapter describes how the introduction of the PPL scheme impacted labour market outcomes following the birth of a child for PPL eligible mothers.⁷ The analysis focuses on i) how the introduction of the PPL scheme impacted on the time mothers remained away from paid work after the birth of a child, and ii) how it impacted on whether they returned to the same employer, and their job conditions on return to work. This chapter evaluates the scheme's impact on the whole population of PPL-eligible mothers. It also examines differences between mothers with high income or low income, mothers with high or low education levels, mothers who were single or partnered at the time of birth, and mothers who were on different employment contracts before the birth (permanent, contract, casual or self-employed).

The chapter begins by briefly outlining the statistical approach adopted to ensure pre- and post-PPL samples are comparable. It then focuses on the possible impact of PPL on mothers' time away from paid work after the birth of a child, followed by the possible impact of PPL on mothers' job characteristics if they returned to paid work. In each case, the chapter also assesses whether any effects of PPL are concentrated in certain subgroups, such as low-income, low-education, self-employed, casually employed or single mothers.

2.1 Sample matching methodology – use of propensity score matching

To assess the impact of PPL on mothers' labour market outcomes, this chapter compares outcomes in the pre-PPL sample of mothers who would have been eligible for PPL had it existed (BaMS), with those in the post-PPL sample of mothers who had PPL available to them (FaWCS). The profile of mothers in BaMS and FaWCS differs somewhat (see Appendix 2), so the analyses are adjusted to ensure that those differences in profile are taken into account when outcomes for pre- and post-PPL mothers are compared. The adjustment is based on 'propensity score matching', a technique that makes the two samples directly comparable by assessing the similarity of the samples on a case by case basis, and then reweighting cases in one sample to ensure that the overall profile of the samples is virtually identical. This technique works well for the analyses reported in this chapter (for details on the matching approach and the quality of the matching, see Appendix 3, especially section A3.1.3).

2.2 The impact of PPL on the duration until return to work after birth

A key policy aim of the PPL scheme was to extend the amount of time mothers took off work in the first months of a baby's life, and then increase the likelihood that mothers return to the workforce.

Simply calculating the average time until mothers return to work is not sufficient to assess whether this aim has been achieved, for two reasons:

⁷ The PPL scheme was also intended to impact women's pre-birth labour market behaviour, by encouraging women to participate in the labour force in order to become eligible for paid parental leave. This impact was not investigated because appropriate data do not exist. The evaluation surveys only include women whose pre-birth labour market attachment already qualified them for PPL.

1. The time until return to work was not observed for any survey participants who returned to work after the date of their survey interview (when their child was aged 12-13 months). As a result, a comparison of average time until return to work before and after the introduction of PPL could only include women who had returned to work before the survey.
2. In addition, this comparison does not take into account any changes in the timing of the mothers' return to work. If the impact of PPL is to first slow down the process of return to work in the period shortly after birth, and then speed it up later, an analysis based on the *average* duration until return would cover up both effects.

The approach used here to assess the impact of PPL is survival analysis – a technique suited to describe and estimate the time that it takes for a transition from one state to another to occur. In this case, the interest is in the time that elapses after birth until the mother returns to work. The time until an event happens can be described by the 'hazard rate'. A hazard rate is the probability that an event will happen "right now", at the next possible moment, given that it did not happen before. For example, the hazard rate measures how likely it is that a mother will return on the 183rd day after her baby was born, given that she was not back at work on the 182nd day after her baby was born, and so on for each day after birth. Hazard rates can be used to estimate the proportion of mothers who have not returned to work at any point in time following the birth.

There are different ways of calculating hazard rates. Results from two appropriate techniques have been used to ensure that the results are robust, and not affected by the technique chosen. The main set of estimations is based on the Kaplan-Meier approach and is presented in this chapter. The second set of estimations is based on a Cox model and is presented in Appendix 5. The two approaches differ in the assumptions they make about the data.⁸ Although they vary somewhat in detail, the two techniques produce essentially the same story, adding confidence to conclusions about the impact of PPL.

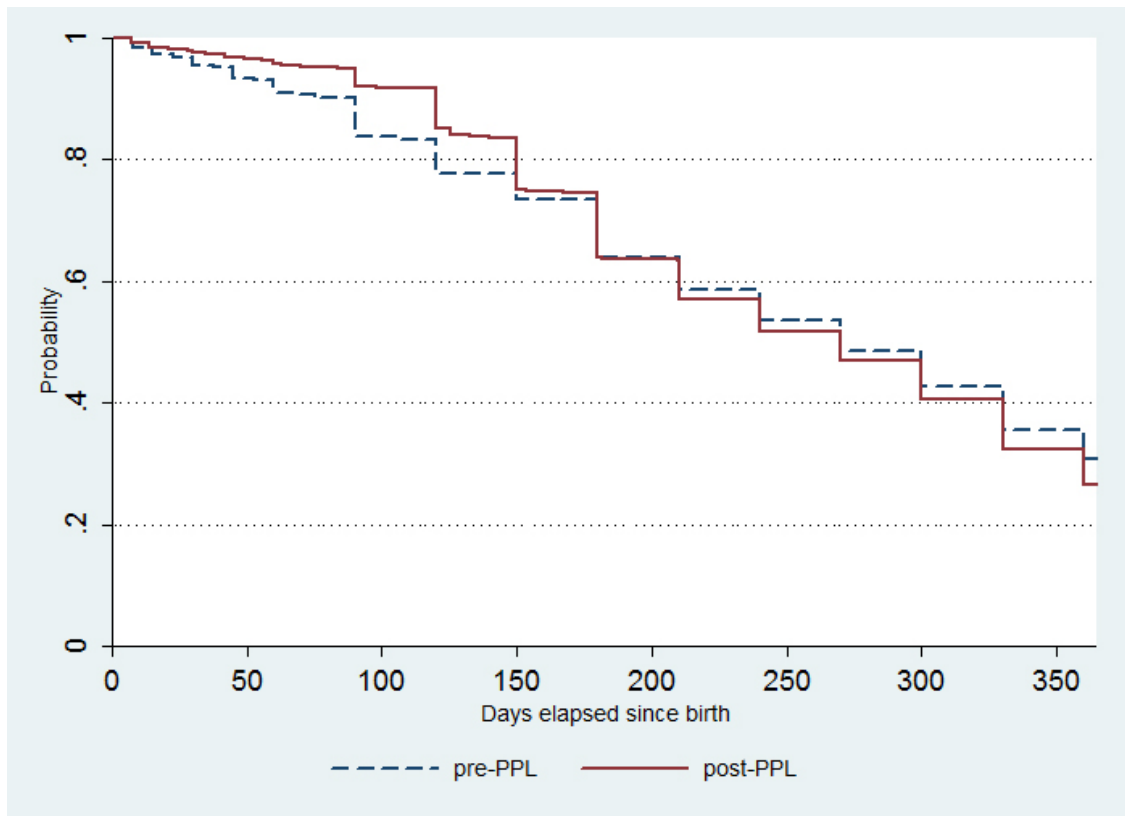
The probability that mothers had not returned to work at time points from the birth up to their babies' first birthday (the so-called 'survivor function'), based on the chosen survival analysis, is shown in Figure 2.1.⁹ The solid red line represents the survivor function of mothers who had access to PPL (the post-PPL sample); the dashed blue line is the survivor function for the matched pre-PPL sample. The divergence between the two lines in the first five to six months of the child's life shows how the introduction of PPL has first slowed down the return to work, and then has sped it up. In the first three months, post-PPL mothers are clearly less likely to return to work, but in the second three months more of them return, catching up with the pre-PPL mothers. When the child is six months old, the

⁸ The Kaplan-Meier approach is 'non-parametric', imposing very little structure, while the Cox model is 'parametric' imposing a more rigid structure for the relationship between mothers' characteristics and the duration until return to work. For technical details on the two approaches, see Appendix 4.

⁹ To ensure that the results in Figure 2.1 are not influenced by differences in the profile of mothers in BaMS and FaWCS, they are calculated using weights derived from the propensity score matching, as outlined in Appendix 3. For comparison, Appendix 5 (Section A5.1) presents results based on estimation without applying the propensity score matching approach.

post-PPL mothers have caught up, with just under 40 per cent having returned (and just over 60 per cent not yet returned) – the same proportions as for the pre-PPL mothers.

Figure 2.1 Survivor function of being away from paid work before and after introduction of PPL - Kaplan Meier estimate (after matching)



Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

Description: Figure 2.1 is a survivor function titled “Survivor function of being away from paid work before and after introduction of PPL”.

The horizontal axis represents ‘Days elapsed since birth’ on a scale from 0 days to 365 days, in 50 day increments. The vertical axis represents the predicted probability that a mother remains away from work between 0 and 1 in increments of 0.2.

There are two lines plotted on the graph. One line represents pre-PPL (after matching) and the other represents post PPL. Both lines begin with a predicted probability of one on day zero and end at about 0.3 on day 365. The post-PPL line appears slightly above the pre-PPL line until approximately 180 days on the horizontal axis, at which point the two lines intersect. From approximately 200 days the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that the predicted probability of remaining away from paid work post-PPL is higher than pre-PPL for the first 180 days following birth. It is about equal from 180 to 200 days and then becomes higher pre-PPL than post-PPL.

This seems to be exactly the desired effect of the policy: the return to work is somewhat delayed during the first few months, but not in the long run. The scheme's main effect is that mothers who otherwise would have returned in months one to three now return in months four to six.¹⁰ Returns after the child is six months old are much less affected – there is a tendency that mothers with access to PPL are more likely to return between months six and 12, but the effect is small (albeit statistically significant). As mentioned in the introduction of this chapter, this might be the result of the PLP being provided by the employer and of the KIT measures, which were designed to encourage the mothers' pre-birth employers to keep in touch between birth and returning to work.

Results of the survivor analyses can also be represented through estimates of the proportion of mothers who remained out of work at various points in time following the birth of their babies (see Table 2.1). Comparing the predicted proportions before and after the introduction of PPL provides a useful indicator of the magnitude of the scheme's impact on the likelihood that mothers have returned to work at given points in time.

Table 2.1 Proportion of mothers expected to remain away from paid work at different points in time – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	83.9	92.0	8.1**
18 weeks	77.6	85.2	7.5**
26 weeks	63.9	64.0	0.1
39 weeks	48.5	47.0	-1.5
52 weeks	30.7	26.6	-4.2**
N	2587	4193	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

[†] ppt = percentage points

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

The Kaplan-Meier estimates indicate that at 13 weeks (three months) and at 18 weeks (the maximum length of PLP that was available to new mothers under the PPL scheme), the proportion of mothers who were expected not to have returned to paid work yet was about 8 percentage points higher (and significantly so) after the introduction of PPL than before (see Table 2.1). That is, before PPL, 78 per cent of mothers were expected not to return to paid work by 18 weeks, compared to 85 per cent after PPL was introduced. Six months after the birth, the effect of PPL was no longer evident, with 64 per cent of mothers not having returned to paid work before and after the scheme's introduction. However,

¹⁰ These results are confirmed by a parametric estimation of the hazard rate using a Cox model (the second technique described in Appendix 4). Several specifications of the Cox model were used to ensure that results did not differ much between plausible specifications (See Appendix 5, section A5.1).

at 39 weeks after the birth, mothers were somewhat more likely to have returned to work after PPL was introduced compared to before it, although the difference is insignificant. One year after the birth, this increased probability of return was clearly evident and significant again, with a 4 percentage point gap: 27 per cent of mothers were expected to remain out of paid work after the introduction of PPL, compared to 31 per cent before it.

These results are similar to the results found in other Western countries. Baum (2003) found that entitlement for twelve weeks of (unpaid) maternity leave in the US increased the probability of a return to work within one year by three to four percentage points, but slowed down the return to work in the first two months after birth. Likewise, Berger and Waldfogel (2004) also found a delay in return to work when US mothers have access to paid or unpaid leave, but the return-to-work rate increased after the maximum leave entitlement ended, with a positive net effect. Rønsen and Sundström (2002) found the same result for paid leave entitlements in Sweden, Norway and Finland. The net effect (of the increased and decreased rate of return) is positive overall if the leave does not exceed seven months in Finland and just over one year in Sweden. Hanel (2013) analysed employer paid parental leave in Australia and found that women who are eligible for paid parental leave delay their return to work from the first to the second half of the first year after birth. Baxter (2009) came to a similar conclusion on delayed return to work based on mothers' actual leave taking rather than their eligibility.

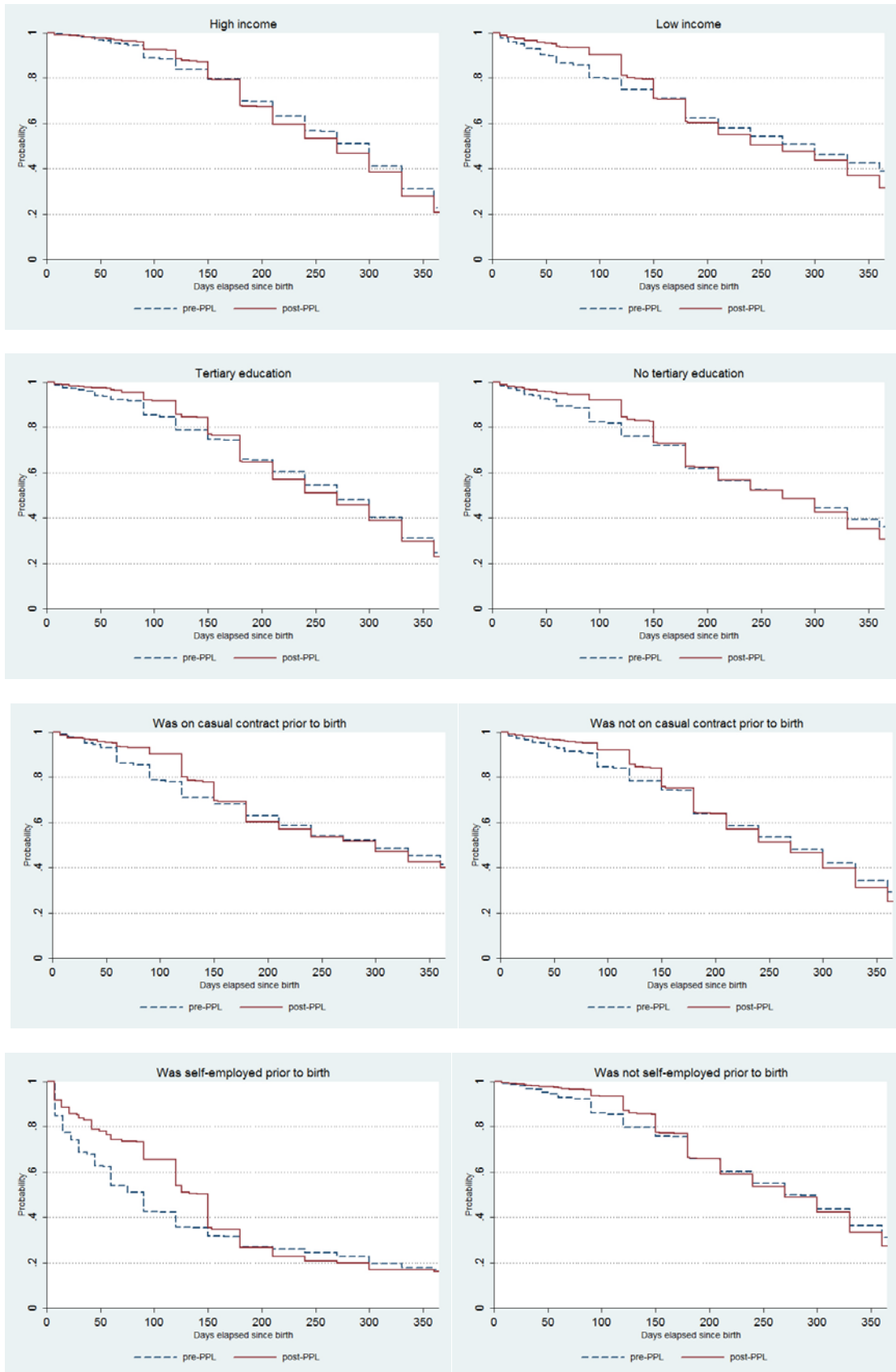
Figure 2.2 shows the same survivor function as Figure 2.1, but now estimated separately for different groups: mothers with high income and mothers with low income¹¹, mothers with and without a tertiary education, self-employed mothers versus employed mothers, casually employed mothers versus other employed mothers, and mothers with and without a partner at the time of birth.¹² Tables 2.2 to 2.6 show the predicted proportion of mothers before and after the introduction of PPL who returned to work by various time points after the birth in these groups. They mirror the patterns in Figure 2.2, and provide an easy-to-read estimate of the impact of PPL at fixed points in time, as well as providing indicators of where the pre- and post-PPL differences are statistically significant.

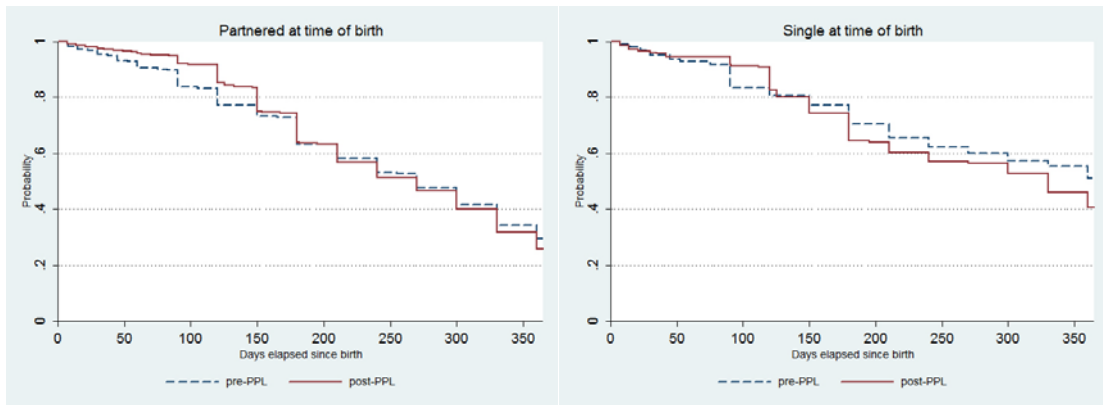
These analyses by subgroup show that PPL's impact on return to work patterns occurs primarily because low-income mothers and those with limited employment protection changed their behaviour following the introduction of PPL. Nearly all of the differences between before and after PPL in the first three months after birth are statistically significant for these subgroups, and for some groups they are significant at later points in time as well. Where PPL did have an effect on subgroups, the differences between respective subgroups were generally not statistically significant, with few exceptions (at the 5%-level, high-income vs. low-income mothers experienced different effects of PPL, and at the 10%-level, self-employed vs. employed mothers did).

¹¹ For the remainder of this chapter, high-income mothers are those whose pre-birth income was greater than \$59,058 (in 2012 \$AUD), while low-income mothers are those whose pre-birth income was less than \$37,202 (in 2012 \$AUD). This corresponds to the upper and lower tercile of pre-birth incomes in the full sample (Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2 combined). Note that the number of low-income and high-income mothers reported in the tables do not correspond exactly to one third of the full sample, because several mothers report identical incomes.

¹² The corresponding coefficients are reported in Appendix Table A5.2.

Figure 2.2 Survivor function of being away from paid work before and after introduction of PPL – Kaplan-Meier estimate by income, education, employment arrangements and partner status (after matching)





Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. For the size of the subgroups, see Tables 2.2 to 2.6.

Description: Figure 2.2 is titled “Survivor function of being away from paid work before and after introduction of PPL”. The figure contains ten graphs. On each, the horizontal axis represents ‘Days elapsed since birth’ on a scale from 0 days to 365 days, in 50 day increments. The vertical axis represents the predicted probability between 0 and 1 in increments of 0.2 that a mother has not returned to work. There are two lines plotted on each graph. One line represents pre-PPL (after matching) and the other represents post PPL.

The first graph pertains to women with a high income. Both lines on the graph begin with a predicted probability of one on day zero and end just above 0.2 on day 365. Both lines decline at about the same rate until about day 50, at which point the post-PPL line appears slightly above the pre-PPL line. At approximately 150 days on the horizontal axis the two lines intersect. From about 180 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women with a high income the predicted probability of remaining away from paid work is higher post-PPL than pre-PPL for the first 150 days following the birth. The predicted probability is equal from 150 to 180 days. It then becomes higher pre-PPL than post-PPL.

The second graph pertains to women with a low income. Both lines on the graph begin with a predicted probability of one on day zero and end with a predicted probability of about 0.3 on day 365 for post-PPL and 0.4 for pre-PPL. The post-PPL line appears above the pre-PPL line until approximately 150 days on the horizontal axis at which point the two lines intersect. From about 180 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women with a low income the predicted probability of remaining away from paid work is higher post-PPL than pre-PPL for the first 150 days following the birth. The predicted probability is about equal from 150 to 180 days and then becomes higher pre-PPL than post-PPL.

The third graph pertains to women with a tertiary education. Both lines on the graph begin with a predicted probability of one on day zero and end just above 0.2 on day 365. The post-PPL line appears slightly above the pre-PPL line until approximately 180 days on the horizontal axis at which point the two lines intersect. The post-PPL line then appears slightly below the pre PPL line.

Comparing the two lines shows that for women with a tertiary education the predicted probability of remaining away from work is slightly higher post-PPL than pre-PPL for the first 180 days following birth. The predicted probability then becomes higher pre-PPL than post-PPL.

The fourth graph pertains to women with no tertiary education. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.3 on day 365. The post-PPL line appears above the pre-PPL line until approximately 180 days on the horizontal axis, at which point the two lines intersect. From about 290 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women with no tertiary education the predicted probability of remaining away from paid work is higher post- PPL than pre-PPL for the first 180 days following birth. The predicted probability is about equal from 180 to 290 days and then becomes higher pre-PPL than post-PPL.

The fifth graph pertains to women who were on a casual contract prior to birth. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.4 on day 365. The post-PPL line appears above the pre-PPL until approximately 180 days on the horizontal axis, at which point the two lines intersect. From about 180 days, the post-PPL line appears below the pre PPL line, except between approximately 240 to 290 days where the two lines appear even.

Comparing the two lines shows that for women who were on a casual contract prior to birth the predicted probability of remaining away from paid work is higher post- PPL than pre-PPL until 180 days following the birth. The predicted probability then becomes higher pre-PPL than post-PPL except between approximately 240 to 290 days where the predicted probability is approximately the same for pre and post-PPL.

The sixth graph pertains to women not on a casual contract prior to birth. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.3 on day 365. The post-PPL line appears slightly above the pre-PPL line until approximately 180 days on the horizontal axis, at which point the two lines intersect. From about 210 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women who were not on a casual contract prior to birth the predicted probability of remaining away from paid work is higher post- PPL than pre-PPL for the first

150 days following birth. The predicted probability is about equal from 150 to 210 days and then becomes higher pre-PPL than post-PPL.

The seventh graph pertains to women who were self-employed prior to birth. Both lines on the graph begin with a predicted probability of one on day zero and end just below 0.2 on day 365. The post-PPL line appears significantly above the pre-PPL line until approximately 180 days on the horizontal axis, at which point the two lines intersect. From about 210 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women who were self-employed prior to birth, the predicted probability of remaining away from paid work is higher post-PPL than pre-PPL for the first 150 days following birth. The predicted probability is about equal from 180 to 210 days. It then becomes slightly higher pre-PPL than post-PPL.

The eighth graph pertains to women not self-employed prior to birth. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.3 on day 365. The post-PPL line appears slightly above the pre-PPL line until approximately 180 days on the horizontal axis at which point the two lines intersect. From about 210 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women who were not self-employed prior to birth, the predicted probability of remaining away from paid work is slightly higher post- PPL than pre-PPL for the first 150 days following the birth. The predicted probability is about equal from 180 to 210 days. It then becomes slightly higher pre-PPL than post-PPL.

The ninth graph pertains to women who were partnered at time of birth. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.3 on day 365. The post-PPL line appears above the pre-PPL line until approximately 180 days on the horizontal axis, at which point the two lines intersect. From about 200 days, the post-PPL line appears slightly below the pre PPL line.

Comparing the two lines shows that for women who were partnered at the time of birth the predicted probability of remaining away from work is higher post- PPL than pre-PPL for the first 180 days following the birth. The predicted probability is about equal from 180 to 200 days. It then becomes higher pre-PPL than post-PPL.

The tenth graph pertains to women who were single at time of birth. Both lines on the graph begin with a predicted probability of one on day zero and end at about 0.4 on day 365 for post-PPL and 0.5 on day 365 for pre-PPL. From 0 to 50 days the lines decline at the same rate. The post-PPL line appears above the pre-PPL line from approximately 50 days to approximately 125 days on the horizontal axis,

at which point the two lines intersect. From about 150 days, the post-PPL line appears below the pre-PPL line.

Comparing the two lines shows that for women who were single at the time of birth the predicted probability of remaining away from paid work is higher post-PPL than pre-PPL between 50 to 125 days following the birth. The predicted probability is about equal from 125 to 150 days. It then becomes higher pre-PPL than post-PPL.

For low-income mothers, the gap between the pre-PPL (blue) and the post-PPL (red) survivor functions (represented by the lines in Figure 2.2) is quite large. However, for high-income mothers, the gap is small, indicating little change in behaviour following the introduction of PPL. Table 2.2 confirms this pattern, showing that the introduction of PPL was associated with a large, statistically significant, increase in the proportion of low-income mothers not returning to work by 13 weeks (from 80 per cent to 90 per cent not returning). In contrast, the corresponding increase for high-income mothers was small and statistically significant (from 89 to 93 per cent not returning). This differential impact between high- and low-income mothers at 13 weeks is the only comparison where the difference in the size of the impact of PPL between subgroups is statistically significant at the 5%-level.

PPL's effect of increasing mothers' tendency to return to work by 52 weeks was also larger amongst low-income mothers than high-income mothers (seven percentage point change for the former, compared to two percentage point change for the latter).¹³ These results are not surprising since the flat-rate payment for 18 weeks at the national minimum wage corresponds to a low wage replacement rate for high-income mothers and a high wage replacement rate for low-income mothers. That is, PPL is a higher proportion of usual income for low-income mothers, thus offering them a proportionally greater reduction in the opportunity cost of delaying return to work than high-income mothers.

¹³ However this difference was not statistically significant, possibly due to the relatively small number of mothers remaining away from work after one year.

Table 2.2 Proportion of mothers expected to remain away from paid work at different points in time by income – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate					
	High Income [‡]			Low Income [‡]		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference (ppt [†])	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	89.1	92.9	3.8*	80.2	90.3	10.1**
18 weeks	83.8	88.7	4.8*	75.1	81.4	6.3**
26 weeks	69.9	67.8	-2.1	62.4	60.8	-1.6
39 weeks	51.2	47.0	-4.2	51.0	47.9	-3.1
52 weeks	22.7	20.7	-2.0	39.1	31.7	-7.4**
N	804	1184		783	1385	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

[‡] 'High income' and 'Low income' refer to pre-birth incomes greater than \$59,058 and lower than \$37,202 respectively (in 2012 \$AUD).

* significant at the 5%-level; ** significant at the 1%-level.

[†]ppt = percentage points.

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

Similar results can be observed for mothers with and without a tertiary qualification (Table 2.3).

Mothers with a tertiary education show a seven percentage point increase in the proportion not yet returned to work at 13 weeks, while mothers without a tertiary qualification had a 10 percentage point increase at 13 weeks. Again, by 52 weeks, PPL's effect is to increase mothers' tendency to return to work (by two percentage points for tertiary educated mothers versus six percentage points for mothers without a tertiary education). As there is substantial overlap between the subgroups of highly-paid mothers and highly-educated mothers, this is in line with the interpretation of the difference in results by income.

Table 2.3 Proportion of mothers expected to remain away from paid work at different points in time by level of education – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate					
	Tertiary Education			No Tertiary Education		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference (ppt [†])	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	85.5	92.2	6.7**	82.4	92.0	9.6**
18 weeks	79.1	85.9	6.8**	76.2	84.7	8.5**
26 weeks	66.0	65.2	-0.7	61.8	62.9	1.1
39 weeks	48.1	45.8	-2.3	48.7	48.6	-0.1
52 weeks	24.7	23.0	-1.7	36.2	30.6	-5.6**
N	1301	2044		1286	2146	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level.

[†]ppt = percentage points.

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

In addition to the fact that PLP represents a low replacement income for high-income mothers, the other reason for a lower effect for high-income and high-education mothers is that they were already much more likely than other mothers to be in jobs which have access to employer paid maternity leave (Human Rights and Equal Opportunity Commission, 2002; Whitehouse et al., 2013). As a result, PPL is less likely to be as important to them as to low-income mothers who were less likely to be eligible for any paid maternity leave before PPL was introduced. In-depth interview data showed that mothers who said that PPL made no difference to their time away from work were all partnered and in comfortable financial situations (see Section 5.2).

This is confirmed when comparing subgroups by employment arrangements. Before PPL, 79 per cent of workers employed on casual contracts were away from work at 13 weeks which is a relatively low rate. PPL had a statistically significant impact on this group, increasing the proportion away from work at 13 weeks by 11 percentage points to 90 per cent (Table 2.4). The impact on non-casual workers is also substantial at seven percentage points but smaller than for casual workers (although the difference between the two is not statistically significant). Similarly to low-income mothers and mothers without a tertiary qualification, casually employed mothers rarely have access to employer paid maternity leave.

Table 2.4 Proportion of mothers expected to remain away from paid work at different points in time by casual contract before birth – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate					
	Not on casual contract before birth			On casual contract before birth		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference (ppt [†])	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	84.6	92.2	7.6**	79.1	90.4	11.3**
18 weeks	78.6	85.9	7.3**	71.2	80.0	8.9*
26 weeks	64.1	64.5	0.4	63.2	60.4	-2.9
39 weeks	48.1	46.6	-1.5	52.3	51.8	-0.5
52 weeks	29.4	25.0	-4.4**	41.5	40.2	-1.3
N	2286	3735		301	458	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level.

[†]ppt = percentage points.

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

The strongest response, however, is found for self-employed women. Figure 2.2 shows that, before PPL they returned to work much faster than other mothers, with results indicating that only 36 per cent of all self-employed mothers had not returned to work by the time their baby was 18 weeks old (Table 2.5). Post-PPL this rate increased by 18 percentage points to 54 per cent, which is still a much lower rate compared to other mothers at 18 weeks but is a stark improvement over pre-PPL levels. The difference in response to PPL between self-employed mothers and employee mothers at 13 weeks is so large that it is close to being statistically significant at the 5%-level despite the small number of self-employed mothers in the samples.

In-depth interview data also showed that mothers who had been on casual contracts and self-employed mothers often said that PPL made a large difference to the time they took away from work. A number indicated that the timing of their return to work was closely tied to the end of their 18 week PPL period (see Section 5.2). This is also clear from Table 2.5 where the difference between pre- and post-PPL plummets after 18 weeks, and from Figure 2.2 where the difference can be seen to be reduced substantially after 150 days (around 21 weeks).

Table 2.5 Proportion of mothers expected to remain away from paid work at different points in time by self-employment status before birth – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate					
	Not self-employed before birth			Self-employed before birth		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference (ppt [†])	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	86.2	93.7	7.6**	42.7	65.7	23.0*
18 weeks	79.9	87.2	7.3**	35.8	54.0	18.2*
26 weeks	65.9	66.4	0.5	27.2	26.3	-0.9
39 weeks	49.9	48.9	-1.0	22.7	19.8	-2.8
52 weeks	31.4	27.6	-3.8**	17.0	16.4	-0.7
N	2397	3936		190	257	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level.

[†]ppt = percentage points.

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

A somewhat different picture emerges for single mothers versus partnered mothers.¹⁴ Since 95 per cent of all mothers had a partner at birth, the results for mothers with a partner are very similar to the results for the entire sample. However, the subgroup of single mothers displays an interestingly different behaviour: after around six months, the proportion of single mothers not yet having returned to work decreases substantially slower than for partnered mothers.¹⁵ This indicates that single mothers return to paid work more slowly than partnered mothers.

In addition, single mothers' response to the introduction of PPL is similar to that of partnered mothers, but appears to be stronger in size although none of the effects are statistically significant (Table 2.6). The sample of single mothers is relatively small, so this result is based on just 368 observations, which implies that some caution when interpreting this result is appropriate.

¹⁴ In the analyses in this chapter single mothers are those who were not living with a partner at the time they gave birth. Although a few of these mothers had partners (who they were not living with), the vast majority did not have a partner.

¹⁵ Differences in behaviour between partnered and single mothers could be a true effect of single motherhood, caused by problems with regard to obtaining childcare or due to issues regarding institutional settings. Alternatively, they could result from selection into single motherhood. This problem is outside the scope of this analysis.

Table 2.6 Proportion of mothers expected to remain away from paid work at different points in time by partnership status before birth – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate					
	Partnered at time of birth			Single at time of birth		
	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference (ppt [†])	Pre-PPL (per cent) (matched)	Post-PPL (per cent)	Difference [°] (ppt [†])
13 weeks	83.8	92.0	8.2**	83.5	91.8	8.3
18 weeks	77.4	85.3	8.0**	80.8	82.6	1.8
26 weeks	63.5	63.9	0.5	70.6	64.5	-6.1
39 weeks	47.8	46.6	-1.2	60.1	56.5	-3.6
52 weeks	29.5	25.9	-3.6**	51.3	40.6	-10.8
N	2436	3976		151	217	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level.

[†]ppt = percentage points.

[°] All results are rounded after taking the difference between the pre-PPL and post-PPL result which means pre-PPL numbers and the difference may not exactly add up to the post-PPL numbers.

2.3 The impact of PPL on job characteristics after birth

In addition to the effects of the availability of PPL on the time mothers take before returning to work, the PPL scheme may also have an impact on the types of job mothers go back to when they return. This section of the report considers mothers who have returned to work by their child's first birthday. Before the introduction of PPL, around 69 per cent of mothers had returned to work by their child's first birthday. After the introduction of PPL, around 73 per cent had returned to work by their child's first birthday.

This section examines the impact of PPL on those mothers who had returned to work by investigating:

- Whether these mothers return to the same employer; and
- Whether they return to the same conditions (working hours, annual pay etc.) as in their pre-birth job.

For mothers who changed employer or who started a job with different conditions, changes from the pre-birth job to the first post-birth job are analysed, again comparing those changes for mothers before and after the introduction of PPL. For mothers whose conditions changed, the focus is on:

- How much their annual pay changed from the pre-birth to the first post-birth job;
- How much their occupational prestige changed between jobs;
- How much their working hours changed;
- Whether they changed from a permanent employment contract to a non-permanent contract; and

- Whether they changed to another industry.

The analytical framework for all these outcomes is straightforward; means for mothers in the post-PPL sample are compared with weighted means for mothers in the pre-PPL sample. The weights are derived from the matching procedure described in Appendix A3.1 to ensure that the results are not biased by differences between the two samples' observable characteristics.¹⁶

If the measures that encourage employers and employees to keep in touch with each other while the employee is on parental leave (such as KIT provisions and providing PLP through the employer) have the desired effect, PPL may improve retention rates with the pre-birth employer. Table 2.7 confirms that this may have occurred: while 77 per cent of all mothers with access to PPL returned to the same job (i.e., the same position with the same employer) when they returned from leave, only 73 per cent would have done so in the absence of PPL. The effect is even stronger for a return to the same job with the same job conditions, such as annual pay, weekly hours and leave rights with 28 per cent of mothers returning to the same job conditions before PPL. PPL improves this retention rate by 5 percentage points to 33 per cent. This amounts to a relative increase of 18 per cent, which is closely aligned to the findings from a number of international studies of the impact of a right to unpaid parental leave in other Western countries. Rights to unpaid parental leave increased the probability of a return to the pre-birth employer by between 10 and 17 per cent in one U.S. study (Baum, 2003), and by 16 and 23 per cent in another study using U.K. and U.S. data respectively (Waldfogel et al., 1999).

However, if mothers return to work but either take up an entirely new job or change the conditions of their old job, there is no clear pattern in the impact PPL has on the changes they make. This is perhaps not surprising. The scheme has features such as payment through employers and KIT provisions that are designed to encourage mothers to return to their pre-birth job. However, it does not provide mechanisms or incentives that might influence which jobs mothers take up after the birth when the pre-birth job is *not* maintained.

There are a few small differences between the pre- and post-PPL samples (Table 2.7) that suggest that post-PPL mothers who changed jobs moved to slightly worse conditions. Although these are not statistically significant, they all move in a similar direction and therefore warrant further investigation. Mothers in the post-PPL sample who changed jobs after birth reduced their hours slightly more than mothers in the pre-PPL sample by an average of 16 hours versus 15 hours per week. This is accompanied by a reduction in median annual pay of around \$17,000 for pre-PPL mothers and \$18,000 for post-PPL mothers, and a slightly larger reduction in occupational prestige for post-PPL mothers. Mothers with access to PPL also changed industries from male-dominated industries to female-dominated industries somewhat more often. It is difficult to interpret these trends, particularly given the increased rate at which women returned to the same jobs after PPL, which means the groups of mothers changing jobs before PPL and after PPL may be compositionally different.

¹⁶ The matching quality for the two subgroups of mothers analysed here is high, as reported in Appendix 3 (Section A3.1.3).

Table 2.7 The impact of PPL on job characteristics when mothers return to work

	Pre-PPL (Matched)	Post-PPL
<u>Number of observations</u>		
All mothers	2587	4201
Mothers returning to work by age 1 of child	1667	2652
Mothers returning to work with same employer and position by age 1 of child	1248	2055
Mothers returning to work with same employer, same position and same job conditions by age 1 of child	496	883
<u>Out of all mothers who returned to work:</u>		
Returned to same employer and position	73%	77%*
Returned to same employer, position, and job conditions (pay, salary, etc.)	28%	33%**
N	1667	2652
<u>Out of all mothers who returned to work, but changed employer, position, or job conditions:</u>		
Contract type		
Changed from permanent to non-permanent	21%	21%
Changed from non-permanent to permanent	3%	3%
Change in average hours	-14.95	-15.68
Change in median Annual Pay (2012 \$AUD)	-17326.56	-18332.87
Median percentage change in Annual Pay (2012 \$AUD) ^o	-37%	-39%
Change in average Occupational Prestige (0-100) [†]	-0.38	-0.51
Moved from female-dominated to male-dominated industry	3%	3%
Moved from male-dominated to female-dominated industry	3%	5%
N	1168	1746

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2; sub-population of mothers who returned to work by age 1 of their child.

* significant at the 5%-level; ** significant at the 1%-level (Robust standard errors are used).

^o 'Median percentage change in annual pay' means that 50 per cent of all mothers experienced a percentage change in their annual pay that was greater than the median, and 50 per cent experienced a change in their annual pay that was smaller than the median.

[†] Occupational prestige was measured using the Australian Socioeconomic Index 2006 (AUSEI06). AUSEI06 assigns a 'status score' to each occupation coded according to the Australian and New Zealand Standard Classification of Occupations (ANZSCO). The scale is a continuous measure that ranges from 0 to 100.

The reasons why mothers who returned to work and changed jobs after the introduction of PPL seem to accept slightly "worse" labour market outcomes are unclear and merit further investigation. It is possible that there is a small income effect arising from PPL, in the sense that the additional income provided through PPL enables mothers to accept a greater reduction in income on their return to the workforce.

The overall result appears to be that PPL has increased employer retention and job retention, and also increased the probability that mothers returned to the same conditions they had prior to the birth. However, if the previous job is not maintained, PPL does not have a strong impact on the type of jobs to which mothers returned after birth.

The analysis was repeated for several different subgroups: those with and without a tertiary qualification, and high and low pre-birth income earners.¹⁷ Given the smaller number of observations that are part of these analyses, single and partnered mothers, self-employed and employee workers, as well as permanent and casual employees were not compared. The results by income and education are presented in Table 2.8.

The results show that the improvement of retention rates in the pre-birth job was statistically significant for mothers without a tertiary qualification. Since tertiary-qualified mothers had a considerably higher chance of being covered by an employer paid maternity leave scheme prior to the introduction of PPL, it seems reasonable that they responded less strongly to the additional incentives provided by PPL compared to their less advantaged counterparts without a tertiary qualification. The same result is observed for mothers with low income whose increase in job retention was also statistically significant. The results for high-income mothers and tertiary-qualified mothers are much smaller and not statistically significant.

The probability of not only returning to the same job, but also to the same conditions, is also presented in Table 2.8. The effect of PPL on mothers with a tertiary qualification was almost identical to the effect on those without a tertiary qualification, with an increase of four percentage points for tertiary educated mothers and six percentage points for those without tertiary qualifications. The same is true for high-income and low-income mothers. While high-income mothers appear to have a much lower probability of returning to the same job conditions than their low-income counterparts, the impact of PPL on that probability was nearly the same for both groups at about four (high-income mothers) and five (low-income mothers) percentage points, although the effect was only significant at the 10-% level for low-income mothers and insignificant for high-income mothers. The fact that this five percentage point increase is significantly different from zero at the 5%-level for tertiary and non-tertiary qualified mothers, and not for high-income mothers and low-income mothers, is most likely due to the smaller sample size in the latter case, where one third of all mothers are dropped from the sample of analysis.

The impacts of PPL for mothers who changed employer, position or job conditions do not reveal a clear pattern. Some noteworthy significant impacts are that post-PPL high-income mothers are significantly more likely to change from a permanent to a non-permanent job after birth, and they

¹⁷ The estimation by education uses all observations of which about 50 per cent have a tertiary qualification and 50 per cent have not. The estimation by income uses only mothers with a pre-birth income below \$37,202 or above \$59,058 (the upper and lower tercile of the full pre-birth income distribution), while mothers with a pre-birth income in between those values are removed from the analysis.

reduce their hours of work by a (significantly) larger amount whereas the impacts for pre-PPL high-income mothers are smaller and insignificant. It is not clear why this would be the case.

Table 2.8 The impact of PPL on job characteristics when mothers return to work by income, education and partner status

	Pre-PPL (Matched)	Post-PPL
<u>If returned to work by age 1 of child</u>		
Returned to same position and employer		
Tertiary Education	77%	77%
No Tertiary Education	69%	77%**
High Income	74%	77%
Low Income	72%	78%*
Returned to same position, employer and job conditions (pay, salary etc.)		
Tertiary Education	27%	31%*
No Tertiary Education	28%	34%*
High Income	21%	25%
Low Income	34%	39%
N: Tertiary Education	887	1360
N: No Tertiary Education	780	1289
N: High Income	553	806
N: Low Income	452	779
<u>If returned to work by age 1 of child, but changed employer, position, or job conditions</u>		
Changed from permanent to non-permanent contract		
Tertiary Education	17%	19%
No Tertiary Education	26%	23%
High Income	14%	19%*
Low Income	25%	22%
Changed from non-permanent to permanent contract		
Tertiary Education	3%	4%
No Tertiary Education	3%	2%
High Income	3%	2%
Low Income	4%	5%
Change in hours		
Tertiary Education	-15.61	-16.62
No Tertiary Education	-14.37	-14.63
High Income	-17.69	-19.58*
Low Income	-9.23	-10.94
Median Change in Annual Pay (2012 \$AUD)		

	Pre-PPL (Matched)	Post-PPL
Tertiary Education	-19878.24	-20834.47
No Tertiary Education	-14589.72	-16345.09
High Income	-32238.66	-35008.42
Low Income	-6077.36	-8636.79
Median percentage change in annual pay (2012 \$AUD) ^o		
Tertiary Education	-37%	-39%
No Tertiary Education	-37%	-40%
High Income	-40%	-44%
Low Income	-25%	-33%
Change in Occupational Prestige [†]		
Tertiary Education	-0.47	-0.74
No Tertiary Education	-0.26	-0.26
High Income	-1.03	-0.60
Low Income	0.08	-0.08
Changed from female-dominated to male-dominated industry		
Tertiary Education	1%	3%*
No Tertiary Education	5%	3%
High Income	2%	3%
Low Income	5%	5%
Changed from male-dominated to female- dominated industry		
Tertiary Education	2%	4%*
No Tertiary Education	4%	5%
High Income	2%	5%*
Low Income	4%	5%
N: Tertiary Education	624	916
N: No Tertiary Education	544	846
N: High Income	425	594
N: Low Income	289	465

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2; sub-population of mothers who returned to work by age 1 of the child.

* significant at the 5%-level; ** significant at the 1%-level (Robust standard errors are used.)

^o 'Median percentage change in annual pay' means that 50 per cent of all mothers experienced a percentage change in their annual pay that was greater than the median, and 50 per cent experienced a change in their annual pay that was smaller than the median.

[†] Occupational prestige was measured using the Australian Socioeconomic Index 2006 (AUSEI06). AUSEI06 assigns a 'status score' to each occupation coded according to the Australian and New Zealand Standard Classification of Occupations (ANZSCO). The scale is a continuous measure that ranges from 0 to 100.

To summarise: PPL has no bearing on the types of job to which mothers return if they do not keep their previous job or if the conditions of the job changed upon their return, but it has a significant impact on the likelihood of mothers returning to their pre-birth job. The positive impact on returning to one's previous job is largest for women without tertiary qualifications, and to a lesser extent (and only at the 10% significance level) also for those with low income. The increase in the probability of not only returning to one's old job, but also the same conditions, is found more or less equally across all groups of mothers.

2.4 Conclusion

This chapter has evaluated the impact of PPL on mothers' labour market outcomes. It has compared the behaviour and experiences of samples of equivalent working mothers before and after the commencement of PPL. To ensure that assessment of the impact of PPL through this comparison has not been confounded by other influences, it has used propensity score matching to control for any observable differences between the pre- and post-PPL samples.

The analysis shows that the sampling design was largely successful in obtaining a comparison, or control, group of pre-PPL mothers for the group of post-PPL mothers in which the characteristics of the control group are mostly very similar to those in the treatment group (the post-PPL group who had PPL available to them). The few remaining differences are resolved through the propensity score matching approach. In addition, comparing a number of ABS key statistics on the labour market situation and childcare pricing around the time when the children in the two samples turned one year of age, before and after PPL was introduced, shows that the labour market situation was quite similar in the two periods. Unemployment was slightly higher in the pre-PPL period than in the post-PPL period (5.2 per cent vs. 5.0 per cent), while the employment rate amongst women aged 15-64 years was the same at 66.5 per cent (ABS, 2013c). Childcare prices have increased by much more than inflation, over 17 per cent from December 2010 to December 2012 (ABS, 2013b), which is likely to have had a dampening effect on women returning to work, working in the opposite direction of the observed effect. As a result, it can be plausibly argued that the differences in labour market outcomes between the two groups are due to the introduction of PPL from January 1, 2011.

The comparison showed that:

- Mothers initially returned to work at a slower rate after the introduction of PPL.
- After this initial slower start, the rate of return to work increases, and overtakes mothers' pre-PPL rate of return to work by around six months after the birth.
- Mothers who originally returned to work in months one to three now return later, and are most likely to return in months four to six.

Distinguishing different subgroups of women, the results indicate clearly that:

- Low-income mothers (bottom third of income), mothers without tertiary education, mothers in casual work and self-employed mothers responded most strongly to the introduction of PPL.

These results are as expected, given that:

- PPL provides payment at the national minimum wage for up to 18 weeks, which is a larger proportion of their usual income for low-income women than for high-income women.
- High-income women and tertiary-educated women are more likely to have access to employer paid parental leave compared to other women. For these women, the availability of PPL makes a relatively small difference to their leave options. In contrast, low-income and low-education women are more likely to be in jobs without access to any paid parental leave before PPL, so the availability of PPL makes a large difference to their leave options.
- Self-employed and casually employed women are very unlikely to have access to employer paid parental leave, so for many of these women the introduction of PPL was a substantial change.

The second component of the analysis focussed on mothers who returned to work by the time their child turned one year of age. Amongst this group, PPL led to:

- A significant increase in the probability that mothers returned to the pre-birth job.
 - This effect is largest for women without tertiary qualification, and to a lesser extent (and only at the 10% significance level) also for those with low income.
- A significant increase in the probability of women returning to the same job with the same conditions, with little variation between groups of mothers.

PPL appears to have limited bearing on the type of jobs to which mothers return if they do not return to their pre-birth job and conditions.

3 Ultimate outcomes – Mothers’ and babies’ health and wellbeing

Improving maternal and child health are ultimate outcomes of the PPL scheme. In particular the scheme has the goal of *enhancing the health of babies and mothers, and the development of children, by enabling mothers to spend longer at home with their newborn children*. This chapter examines the extent to which this goal has been achieved in the short term.

Enhancing the health of mothers and children has been a fundamental goal for maternity leave policy in most nations (International Labour Organisation 2010). Evidence on whether paid maternity leave improves health is mixed, and when health effects are detected, they often tend to be small (Baker and Milligan, 2008). While maternity leave gives families time, employment gives families income and both are resources that are important for health. Paid maternity leave can reduce the time-income trade-off for families, delivering both resources. In circumstances where leave is not paid or is paid at a rate lower than wages, early return to work for mothers could increase family income even if it reduces mothers’ time with infants, whereas taking unpaid leave may increase time but reduce family income. Such combinations of countervailing influences may underpin the mixed evidence for the association between maternity leave and health found internationally.

This chapter begins by investigating whether the availability of PPL has had any effect on the health and wellbeing of new mothers about 12 months after they gave birth. Mothers’ health is measured using the Short Form 12 (SF-12). The SF-12 is a widely used and well-validated self-completion measure of health status that provides summary assessments of physical and mental health (Ware et al. 1996).¹⁸

The chapter then assesses the impact of PPL on several indicators of infant health outcomes. First, it considers the impact on breastfeeding initiation and duration. Breastfeeding is widely accepted as contributing significantly to babies’ health, particularly during the first year of life, as well as in relation to later outcomes. In Australia and internationally, it is recommended that infants be exclusively breastfed up to six months of age for optimal health, growth and development (NHMRC 2003; WHO 2003). It is then recommended that solid foods be introduced at around six months of age with continued breastfeeding until the age of 12 months and beyond, if mother and infant wish (NHMRC 2003). Indeed, for this reason, extending the average duration of breastfeeding was a key aim of the PPL scheme as envisaged by the Productivity Commission in its initial design (Productivity Commission 2009). The impact of PPL on babies’ health was also assessed through three more direct measures: whether babies are up to date with their immunisations, whether mothers report that their

¹⁸ The SF-12 provides separate physical and mental health scores. There are no general Australian population norms available for the SF-12. However, population norms were established for the South Australian population in a 2003 survey. The overall mean of the physical component summary (PCS) for adult (18 and over) South Australian women was 48.4, while the mean for the mental component summary (MCS) for women was 51.4 (Avery et al. 2004).

babies have had an illness that lasted a week or more, and mothers' reports of the general health of their babies.¹⁹

Like other chapters, this chapter relies primarily on comparison of a pre-PPL sample of mothers with a post-PPL sample. This comparison enables an assessment of the impact of PPL by comparing outcomes for mothers who had access to PPL with those who did not have access. As noted previously, the profile of the pre-PPL sample (BaMS) is somewhat different from that of the post-PPL sample (FaWCS) and analyses reported in the chapter again use 'propensity score matching' to adjust for these differences, ensuring that any identified differences between the samples are likely to be due to the introduction of PPL rather than differences in the sample profiles. This technique is very effective for the analyses reported here.

3.1 The impact of PPL on mothers' health

Optimising maternal health in the postpartum period, immediately after giving birth, is a widely supported aim. In addition to directly enhancing mothers' wellbeing, good maternal health also impacts on infant and child wellbeing, and supports mothers' workforce engagement. Children's lives are intertwined with their parents' lives, and this interlinkage is evident in the mutual impact of mother's and child's health on each other. The health and wellbeing of infants and young children is closely dependent on family routines, resources, and relationships, particularly through parent mental and physical health (Goodman and Gotlib, 1999). Thus, to the extent that policies like PPL can support mothers' physical and mental health, they can additionally benefit children's.

Several studies have found that maternity leave of 12 weeks or longer may benefit mothers' mental health (Chatterji and Markowitz, 2012; Staehelin, Berteau, et al. 2007). In one of the most comprehensive comparisons of maternity leave and health, Whitehouse et al (2013) found that taking more than 13 weeks leave was associated with less psychological distress among mothers. Breastfeeding can also lead to better mental health in mothers postpartum, a period of heightened risk (Mezzacappa, 2004; Watkins and Meltzer-Brody et al., 2011). Thus any improvements in breastfeeding rates may translate into improved health outcomes for mothers.

3.1.1 Mothers' health – physical and mental health components

To investigate whether the introduction of PPL influenced mothers' health, mothers' scores on the physical component summary and the mental component summary of the SF-12 were compared before and after the introduction of PPL. The physical and mental component summaries are indicators of mothers overall physical and mental functioning and wellbeing (Ware et al., 1996).

¹⁹ Beyond babies' health, the chapter does not consider possible effects of PPL on child development because these effects cannot be meaningfully assessed until children are well over 12 months old. Given the timeframe in which the evaluation was conducted, no data capable of directly assessing child development could be collected.

There were small, but statistically significant, improvements in both mothers' physical health and mental health following the introduction of PPL. In the post-PPL analytic sample, mothers' average score on physical health summary was 54.8, compared to 53.5 in the (matched) pre-PPL sample. Mothers average score on mental health summary was 52.2 in the post-PPL analytic sample, compared to 50.8 in the (matched) pre-PPL sample (Table 3.1). Though statistically significant, the differences between the pre- and post-PPL mothers are small.²⁰

The changes in physical and mental health are consistent with the patterns of change in the time mothers spend away from the workforce described in Chapter 2. Additional time out of paid work, particularly during the first six months of a new baby's life, is likely to reduce stress on new mothers, leading to improvement in mental wellbeing. In-depth interviews strongly indicated that mothers often identified a reduction in stress arising from financial security and additional time with their baby as an important result of taking PPL (see section 5.3). At the same time, if mothers delay their return to paid work following the introduction of PPL, they are also likely to delay placing their children in formal childcare. The entry of children into formal childcare is often associated with increased illness amongst the children, as they encounter new infections, and this increase in illness may be passed on to mothers, resulting in lower physical functioning. Thus a delay in children entering childcare may also contribute to an improvement in mothers' average physical functioning/health. Data from in-depth interviews strongly support this interpretation. In these interviews, mothers often described how their baby's entry into formal childcare led to poorer health for babies. Moreover, mothers in these interviews were much more likely to describe their babies as 'getting sick a lot' if they were in formal childcare than if they were not (see section 5.4).

Table 3.1 Mean SF-12 scores for physical component summary and mental component summary (after matching).

	Pre-PPL (matched)	Post-PPL
Mother's physical health (mean)	53.5	54.8**
Mother's mental health (mean)	50.8	52.2**
N	2521	3269

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 2.
* significant at the 5%-level; ** significant at the 1%-level

3.1.2 SF-12 for groups of special policy interest

It is possible that PPL might deliver more benefits to some mothers than others (e.g., mothers with fewer resources or from differing social circumstances). The overall improvement in mothers' mental wellbeing observed in Table 3.1 was not entirely universal. Table 3.2 below shows that mothers with

²⁰ In general, it can be complex to determine whether the results of health-related quality of life (HRQOL) assessments are clinically and socially meaningful (Crosby, Kolotkin, and Williams, 2003). As one of the several well-known generic HRQOL instruments in wide use, SF-36 (and also SF-12V2) provides results that need to be interpreted with caution (Crosby et al., 2003). Generally, it is accepted that a 5 point score difference in the physical and mental component summaries can be regarded as significant differences in clinical conditions and in social outcomes (Bjorner et al., 2007; Hays and Woolley, 2000; Sørensen, Sørensen, Skovgaard, Bredahl, and Puggaard, 2011). In other words, a change of less than 5 points on each scale might not be considered an important clinical difference even though the difference is statistically significant.

partners (either in marital relationships or cohabiting relationships) had higher levels of both physical and mental wellbeing after the introduction of PPL (i.e., in the post-PPL sample) compared to before it (i.e., in the matched pre-PPL sample). On the other hand, single mothers showed no change in physical or mental health following the introduction of PPL. This latter result may arise because a much higher proportion of single mothers than other mothers chose the BB over PLP, so the number of single mothers in the survey who took PLP was small and any small positive effects on health as a result of PPL are less likely to be detected in this group.

Table 3.2 Mean SF-12 scores for physical function and mental wellbeing by relationship status (after matching)

	Pre-PLP (per cent) (matched)	Post-PLP (per cent)
Marital status at birth: Partnered		
Physical component	53.4	54.8**
Mental component	50.9	52.4**
N	2391	3091
Marital status at birth: Unpartnered		
Physical component	54.6	53.4
Mental component	48.5	49.1
N	129	179

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

Similarly, the health benefits may not have been evenly distributed for mothers who had been on different types of work contracts before the birth (Table 3.3). Mothers who had been in permanent or ongoing jobs showed the same small improvements in both physical and mental health found in the overall samples. Although casual workers in the post-PPL analytic sample showed a significant and relatively large improvement in mental health compared to those in the pre-PPL sample, they showed no change in physical health. On the other hand, mothers who had been employed on fixed-term contracts or self-employed showed improvement in physical health, though no evidence of change in mental health. It is possible that the lack of improvement in casually employed mothers' physical health partly reflects differences in the use of formal childcare - mothers employed casually may have been less likely to use childcare than other mothers and hence less likely to benefit if childcare use was delayed. PPL had a large effect in delaying return to work amongst self-employed mothers (see Chapter 2), so that a significant improvement in mothers' physical health arising from delayed entry of infants into childcare could occur in this group. With regard to mental health, an improvement in mental health that is both statistically and substantively significant amongst casually employed mothers may reflect the significance of PPL for them. The additional time and financial security provided by PPL represents a particularly large change for these mothers, given their previous low likelihood of having access to employer paid parental leave and the relatively high wage replacement rate provided by PLP to them. Certainly, in-depth interview data indicated that mothers for whom financial and employment insecurity were important issues often thought they experienced lower

stress because of the financial security provided by PLP (see section 5.3). It is less clear why self-employed and fixed-term mothers did not experience an improvement in mental health.

Table 3.3 Mean SF-12 scores for physical function, mental wellbeing and general health, by employment contract (after matching)

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Contract type: Permanent/ongoing		
Mother's physical health (mean)	53.5	54.7**
Mother's mental health (mean)	50.9	52.4**
N	1893	2504
Contract type: fixed term		
Mother's physical health (mean)	51.9	55.1**
Mother's mental health (mean)	52.7	51.1
N	134	208
Contract type: casual		
Mother's physical health (mean)	54.1	54.7
Mother's mental health (mean)	48.4	52.0**
N	287	342
Contract type: Self-employed		
Mother's physical health (mean)	53.6	55.1
Mother's mental health (mean)	51.1	51.3
N	183	195

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

In summary, the results indicate that PPL probably had a small average effect of improving mothers' physical and mental health. In terms of population health impact, these changes are likely to be important since smaller changes that affect large groups in the population can have powerful health impacts. For example, Rose (1992) shows how, at the population level, exposing a large number of people to a small risk may generate more clinically significant cases than exposing a small number of people to high risk. Chronic health outcomes such as depression or anxiety are particularly germane, as symptoms occur on a continuum. Small reductions in average mental health symptoms among a large population subgroup, such as mothers, could therefore represent a considerable preventative health gain. Evidence about whether these effects vary by key sub-groups was mixed, though significant improvement in the mental health of casually employed mothers was evident. It also seems likely that there was no improvement in the physical or mental health of single mothers following the introduction of PPL.

3.2 The impact of PPL on breastfeeding

Breastfeeding is a critical maternal and child health indicator that is unique to the postpartum period. There is growing evidence that breastfeeding improves mother–infant bonding and secure attachment between mother and child (Allen and Hector 2005), an important factor in early childhood

development. To date, the most consistent evidence on the health benefits of maternity leave (paid and/or unpaid) is for improved rates of initiation and duration of breastfeeding (Berger and Hill, 2005; Ogbuanu et al 2011; Staehelin et al 2011). For infants, breastfeeding is protective against wheezing, infectious diseases, gastrointestinal illnesses and otitis media (Australian Centre for Asthma Monitoring 2009); for mothers, breastfeeding aids recovery from childbirth and is protective for breast cancer (Allen and Hector, 2005; Quigley and Kelly, 2007). There is evidence that breastfeeding may also be protective for allergies and atopic illness, improve cognitive functioning and reduce risk for later obesity or cardiovascular disease in children (Allen and Hector, 2005; Fewtrell et al, 2011).

3.2.1 Impact of PPL on breastfeeding initiation

PPL may have produced a small increase in breastfeeding initiation, though the change was not large enough to reach statistical significance. This result is not surprising, given the very high rate of breastfeeding initiation before PPL was introduced. Some 95 per cent of mothers in the post-PPL analytic sample initiated breastfeeding, compared to 94 per cent in the (matched) pre-PPL sample.²¹ These results are in the same direction as the international evidence that suggests higher levels of breastfeeding uptake when mothers have maternity leave provisions.

Table 3.4 Proportion of mothers who initiated breastfeeding (after matching)

Indicator	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Child was breastfed (per cent)	93.6	95.0
N	2585	3308

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2; differences between pre- and post-PPL were not statistically significant.

3.2.2 Breastfeeding initiation in groups of special policy interest

In Australia and elsewhere, early return to work is a key reason that mothers cease breastfeeding (Ban and Andrea, 2010; Berger and Hill, 2005; Cooklin and Rowe, 2012; Ogbuana and Glover, 2011). Continuing to breastfeed may be particularly difficult for low-income and low skilled mothers if they return to work (Kimbrow, 2006). Breastfeeding initiation and duration were therefore compared among single and partnered mothers and among mothers with differing employment contracts.

The results in Table 3.5 do not show consistent patterning of the impact of PPL on breastfeeding initiation by mothers' marital status at the birth of her baby. The introduction of PPL may have had a somewhat smaller impact on breastfeeding initiation amongst single mothers than partnered mothers. However, any effect of PPL on breastfeeding initiation was small irrespective of mothers' marital status, largely because breastfeeding initiation rates are high for all mothers.

²¹ These rates are consistent with other Australian data. The most recent national survey of breastfeeding in Australia (AIHW, 2011) found that while most mothers (96%) initiated breastfeeding, just over two thirds of infants were being breastfed (at all) by 4 months old. Only 15% of infants were exclusively breastfed to 6 months (AIHW, 2011).

Table 3.5 Proportion of mothers who initiated breastfeeding, by relationship status (after matching)

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Marital status at birth: Partnered		
Child was breastfed (per cent):	93.8	95.4
N	2249	3124
Marital status at birth: Single		
Child was breastfed (per cent):	89.5	88.6
N	135	185

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2; differences between pre- and post-PPL were not statistically significant.

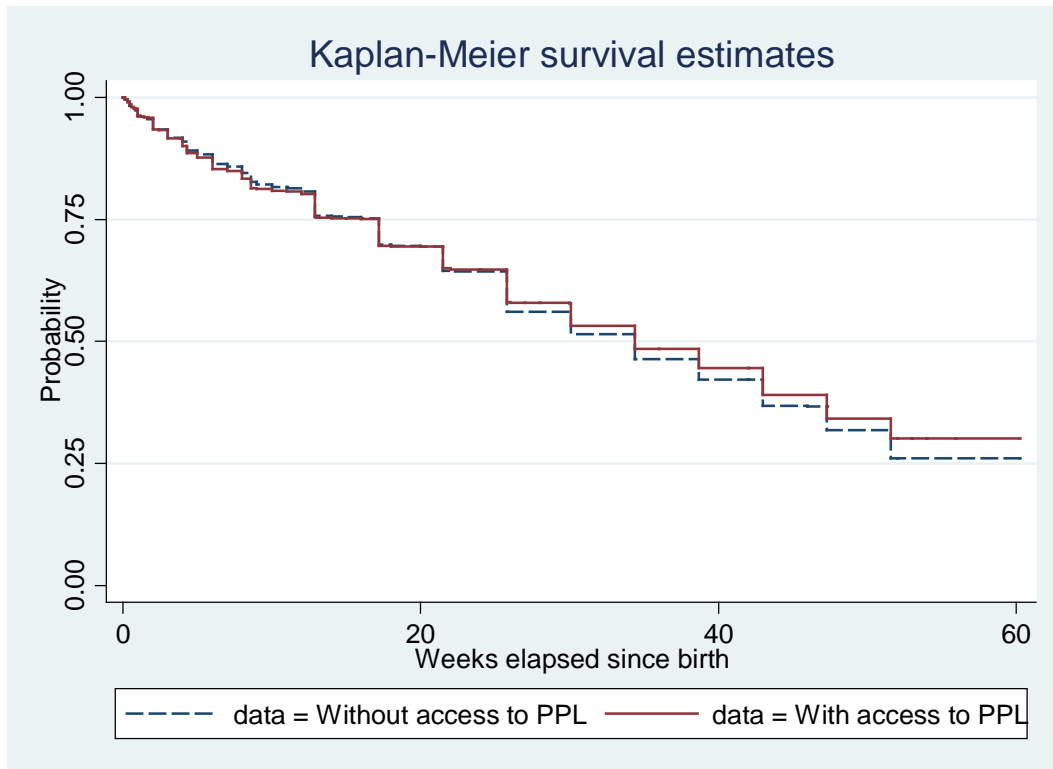
The impact of PPL on breastfeeding initiation rates was assessed within groups defined by mothers' employment contract before the birth (permanent, fixed-term, casual, or self-employed). There were no significant differences in breastfeeding initiation depending on type of employment contract.

3.2.3 Breastfeeding duration (survival analysis with propensity score matching)

While the information in the previous section provides a summary of breastfeeding initiation, this summary does not shed light on the timing of breastfeeding cessation. In particular, breastfeeding cessation is closely related to return to work for many women (as noted in Section 3.2.2 above), and Chapter 2 has shown that PPL has delayed some mothers' return to work during the first six months following birth while also encouraging return to work after about nine months. If breastfeeding cessation is closely related to this pattern, PPL could have important effects that would be masked by examining only breastfeeding initiation and average duration of breastfeeding. To overcome this problem, the nature and extent of differences in the time dependency of breastfeeding duration were examined using survival analysis. This analysis uses the same statistical technique as the survival analysis used in Chapter 2 in relation to the timing of return to work.

The survival function, presented in Figure 3.1, shows the proportion of respondents who were still breastfeeding each week in the first year after birth in the post-PPL analytic sample and the (matched) pre-PPL sample. This approach provides a more detailed and nuanced picture of possible change in breastfeeding duration patterns following the introduction of PPL. The survival function suggests that there were no differences between pre- and post-PPL mothers in the first 15-20 weeks after birth, with 75 per cent of mothers in each survey still breastfeeding at this time. However, after that point differences begin to emerge. The survival function indicates that a slightly higher proportion of post-PPL mothers continued breastfeeding after about 26 weeks, compared to pre-PPL mothers. Thus, PPL has had the effect of delaying cessation of breastfeeding somewhat if mothers continue to breastfeed beyond about 20 weeks.

Figure 3.1 Breastfeeding survival before and after introduction of PPL – Kaplan Meier estimate (after matching)



Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

Description: Figure 3.1 is a survivor function titled “Breastfeeding survival before and after introduction of PPL”. The horizontal axis represents ‘Weeks elapsed since birth’ on a scale from 0 weeks to 60 weeks, in 20 week increments. The vertical axis represents the predicted probability between 0 and 1 in increments of 0.25 that a mother will still be breastfeeding at a given time after the birth.

There are two lines plotted on the graph. One line represents the predicted probabilities before PPL was introduced (‘without access to PPL’) (after matching) and the other represents the predicted probabilities after the introduction of PPL (‘with access to PPL’). Both lines begin with a predicted probability of one on week zero and end at about 0.25 on week 60. Both lines decline at the same rate until about week 20, at which point the ‘without access to PPL’ line appears slightly below the ‘with access to PPL’ line.

Comparing the two lines shows that the predicted probability of continuing to breastfeed declines equally for women with and without access to PPL until approximately 20 weeks following birth, at which point the predicted probability of breastfeeding is slightly higher for women with access to PPL.

Survival analysis can also be used to provide estimates of the proportion of mothers who can be expected to still be breastfeeding at various time points following the birth of their babies. Table 3.6 provides these point estimates at various key ages. It shows that PPL had little effect on breastfeeding

rates up to about five months after birth. However, at five to six months after birth, the introduction of PPL had produced a two percentage point gap. The effect continued to increase until at least one year after the birth, when 30 per cent of post-PPL mothers were still breastfeeding, four percentage points more than in the pre-PPL sample.

Overall, the survival analysis strongly suggests that the introduction of PPL provides mothers with the capacity to continue breastfeeding for longer, probably primarily because of its effect in delaying their return to work.

Table 3.6 Proportion of mothers expected to keep breastfeeding at different points in time – Results of Kaplan-Meier estimate with matching

Time since birth	Kaplan-Meier estimate		
	Pre-PLP (per cent)	Post-PLP (per cent)	Difference [†] (ppt)
13 weeks	75.8	75.4	-0.4
18 weeks	69.5	69.5	0
26 weeks	56.0	57.9	1.9
39 weeks	42.2	44.6	2.4
52 weeks	26.0	30.1	4.1**
N	2419	3303	

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

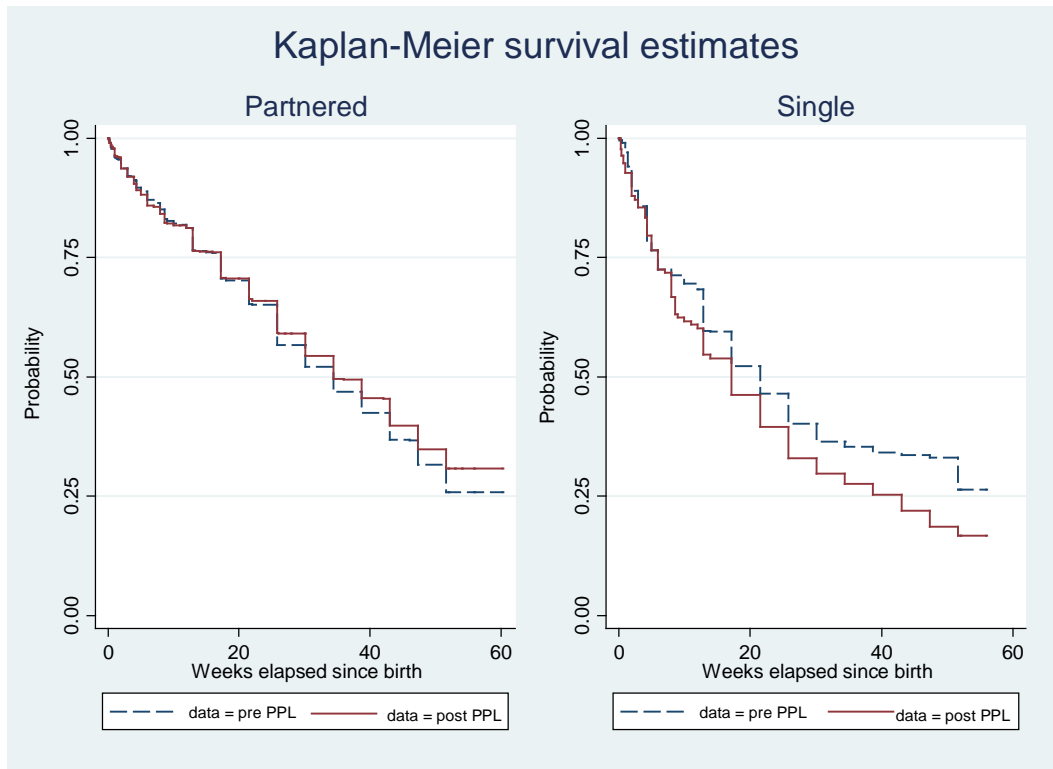
* significant at the 5%-level; ** significant at the 1%-level

[†]ppt = percentage points.

3.2.4 Breastfeeding patterns in groups of special policy interest

In this section differences between post-PPL and pre-PPL mothers are examined for mothers in different relationship states and employment contracts. The graphs presented in Figure 3.2 show the survival functions of breastfeeding duration and cessation by relationship status. The patterns are quite different. Partnered mothers had patterns of breastfeeding that are similar to the overall trends shown above, where differences in breastfeeding cessation between pre- and post-PPL mothers became apparent after about 20 weeks, with a higher proportion of partnered mothers breastfeeding at longer durations after the introduction of PPL compared to before PPL. In contrast, for single mothers a lower proportion of post-PPL mothers were breastfeeding from about eight weeks after their baby was born compared to pre-PPL mothers. This is most likely because PPL had more effect in increasing return to work amongst single mothers than it did amongst other mothers (See Section 2.2), and single mothers would be likely to find most difficulty in continuing to breastfeed following a return to work.

Figure 3.2 Breastfeeding survival before and after introduction of PPL, by relationship status (after matching)



Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

Description: Figure 3.2 is a survivor function titled "Breastfeeding survival before and after introduction of PPL, by relationship status". The figure contains two graphs. On each the horizontal axis represents 'Weeks elapsed since birth' on a scale from 0 weeks to 60 weeks, in 20 week increments. The vertical axis represents predicted probability between 0 and 1 in increments of 0.25 that a mother will still be breastfeeding at a given time after the birth. There are two lines plotted on each graph. One line represents pre-PPL (after matching) and the other represents post-PPL.

The first graph relates to partnered women. Both lines on this graph begin with a predicted probability of one on week zero and end at about 0.25 on week 60. Both lines decline at the same rate until just after week 20, at which point the pre- PPL line appears slightly below the post- PPL line.

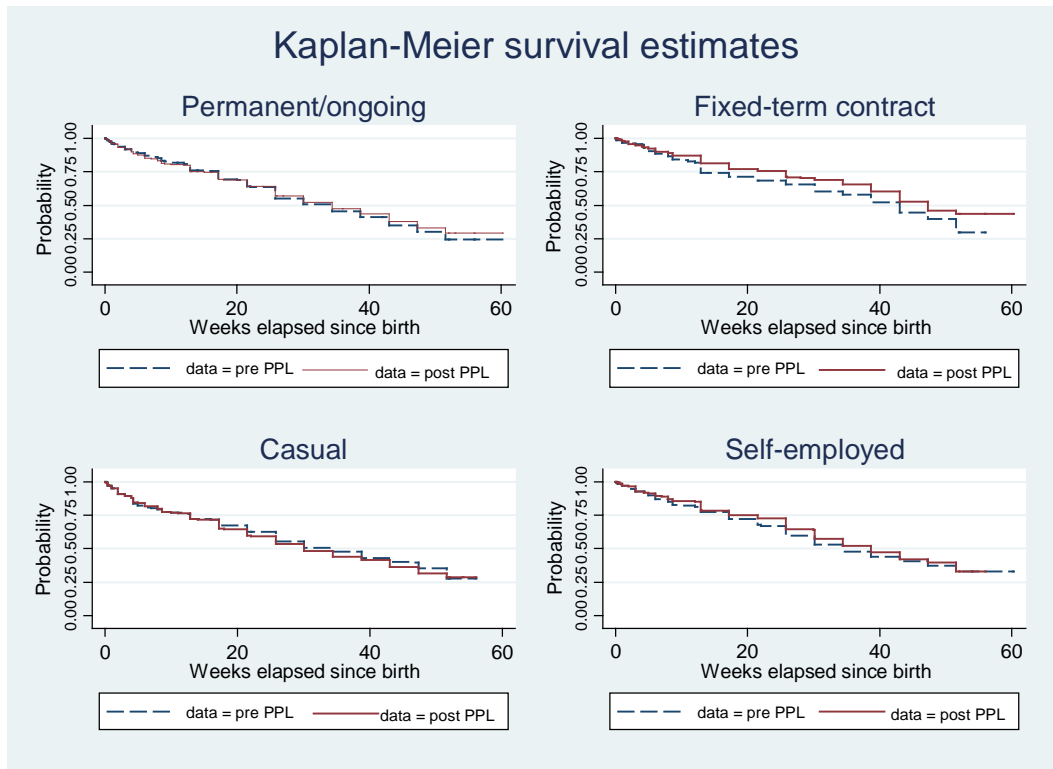
Comparing the two lines shows that for partnered women, the predicted probability of continuing to breastfeed past approximately 20 weeks following the birth is slightly higher post- PPL than pre-PPL.

The second graph relates to single women. Both lines on the graph begin with a predicted probability of one on week zero and end at about 0.25 for pre-PPL and at about 0.20 for post-PPL on week 60. Both lines decline at the same rate until about week eight, at which point the post-PPL line appears below the pre- PPL line.

Comparing the two lines shows that for single women, the predicted probability of continuing to breastfeed past approximately eight weeks following birth is slightly lower post-PPL than pre-PPL.

The graphs presented in Figure 3.3 show the survival functions for breastfeeding duration for post-PPL and pre-PPL mothers by their employment contract. These results suggest that PPL's effect of delaying the cessation of breastfeeding, found for all mothers, may be concentrated amongst mothers who were on fixed term contracts and, possibly, those who were self-employed before the birth. However, the overall effect of PPL on breastfeeding duration is small, and the differences between mothers depending on their employment contract before the birth (shown in Fig. 3.3) are small. Overall, it seems that mothers' employment contract before the birth has little impact on how PPL affects their patterns of breastfeeding.

Figure 3.3 Breastfeeding survival before and after introduction of PPL, by employment contract (after matching)



Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

Description: Figure 3.3 is a survivor function titled “Breastfeeding survival before and after introduction of PPL, by employment contract”. The figure contains four graphs. In each, the horizontal axis represents ‘Weeks elapsed since birth’ on a scale from 0 weeks to 60 weeks, in 20 week increments. The vertical axis represents predicted probability between 0 and 1 in increments of 0.25 that a mother will still be breastfeeding at a given time after the birth. There are two lines plotted on each graph. One line represents pre-PPL (after matching) and the other represents post-PPL.

The first graph relates to women who were in permanent/ongoing employment before the birth. Both lines on the graph appear to decline at the same rate until just after week 25 at which point the pre-PPL line appears slightly below the post-PPL line.

Comparing the two lines shows that for women in permanent/ongoing employment, the predicted probability of continuing to breastfeed past approximately 20 weeks following the birth is slightly higher post- PPL than pre- PPL.

The second graph relates to women who were employed on a fixed-term contract before the birth. Both lines on the graph begin with a predicted probability of one on week zero and end at about 0.25 on week 60 for pre-PPL and about 0.50 for post-PPL. Both lines appear evenly on the graph until just past week 10 at which point the pre-PPL line appears below the post-PPL line.

Comparing the two lines shows that for women employed on a fixed term contract, the predicted probability of continuing to breastfeed past approximately 10 weeks following birth is higher post- PPL than pre-PPL.

The third graph relates to women who were in casual employment before the birth. Both lines on the graph begin with a predicted probability of one on week zero and end at about 0.25 on week 60. Both lines appear evenly on the graph except between about week 20 to 40 in which the pre-PPL line appears slightly above the post-PPL line.

Comparing the two lines shows that for women in casual employment, the predicted probability of continuing to breastfeed following the birth is equal pre-PPL and post- PPL except between week 20 to 40 where the predicted probability is slightly higher pre-PPL.

The fourth graph relates to women who were self-employed before the birth. Both lines on the graph begin with a predicted probability of one on week zero and end at about 0.25 on week 60. Both lines appear evenly on the graph until just past week five at which point the pre-PPL line appears below the post-PPL line.

Comparing the two lines shows that for self-employed women, the predicted probability of continuing to breastfeed past approximately five weeks following birth is higher post- PPL than pre-PPL.

3.3 The impact of PPL on infant health

The impact of PPL on selected infant health outcomes, including child immunisation, illness lasting a week or more and mothers' reports of overall infant health were examined. Health outcomes for infants are difficult to demonstrate, as many effects of maternity leave on children are not detectable immediately. There are no direct measures of infant mental health, and diagnoses of most emotional and behavioural problems in childhood are rarely given until at least three years old. There is some international evidence that maternity leave is associated with higher immunisation rates, lowered infant mortality and reduced incidence of low birth weight (Berger, Hill and Waldfogel, 2005; Rossin, 2011; Tanaka, 2005). Not all studies, however, find an association between maternity leave and child health (Baker and Milligan, 2008).

3.3.1 Impact of PPL on selected infant health indicators – immunization, infant illnesses, overall infant health

Immunisation levels are a potentially important factor in infant and child health, since appropriate immunisation can prevent serious illness. Immunisation rates in Australia were already high before PPL was introduced. The Australian Childhood Immunisation Register (ACIR) showed that 92 per cent of one year olds were fully immunised in 2011, slightly lower than the OECD average of 94.6 per cent in 2010.²² However, it was possible that the introduction of PPL would further increase levels of

²² See AIHW website: www.aihw.gov.au/child-health/system-performance/.

immunisation by providing parents with more time flexibility to ensure their babies were immunised appropriately. US research has shown that babies of mothers who return to work within 12 weeks of the birth are less likely to be immunised than those who return later (Berger et al 2005). However, on the basis of mothers' reports of their babies' immunisation status, PPL has had no effect on the immunisation status of infants at 12 months (Table 3.7). Some 87 per cent²³ of infants had up to date immunisations in both the post-PPL and (matched) pre-PPL analytic samples. There were no indications that PPL had any effect on immunisation patterns within any sub-groups of special policy interest (e.g., single mothers, self-employed mothers or mothers who had been casually employed).

Mothers' reports of their babies' health were also analysed. Mothers were asked whether their baby had an illness of one week or more in the first year of life. This is a widely used indicator of general infant health status. The introduction of PPL has produced a small, but statistically significant, reduction in the proportion of mothers who report that their baby experienced an illness of one week or more. In the post-PPL analytic sample, 41 per cent of mothers reported that their babies had experienced such illnesses, 4 percentage points less than the 45 per cent of mothers in the (matched) pre-PPL sample.

In contrast, the introduction of PPL was actually associated with a decline in the proportion of mothers reporting that their babies were in 'excellent' health (from 69 per cent in the pre-PPL sample to 61 per cent in the post-PPL sample). However, virtually all of this change appeared to occur because more mothers assessed their babies' health as being 'very good' (rather than 'excellent'). PPL was not associated with any change in the proportion of mothers who described their babies' health as 'poor' or 'fair' (or even as 'good'). Since there are unlikely to be any clinical differences between babies whose health is assessed by mothers as 'excellent' vs. 'very good', these results indicate no real evidence of change in mother-assessed infant health associated with the introduction of PPL.

Together, the decline in mothers reporting an illness of one week or more and the shift in mothers' reporting of babies' overall health, suggest that any impact of PPL on infant health was small. There was a small reduction in illnesses lasting one week or more amongst babies. As with the apparent improvement in maternal health, this could be a result of mothers delaying placing their children into formal childcare because they delay returning to work. The reduction in mothers reporting that their baby's health was excellent could simply reflect some mothers being more aware of even minor health problems as a result of the additional time PPL allows them with their infants.

²³ The small difference between this figure and that quoted above from the ACIR may be due to a variety of factors. The most obvious is that the ACIR defines infants as fully immunised at 12 months of age if they have completed all immunizations scheduled up to 6 months of age. The BaMS and FaWCS surveys simply asked mothers whether the child was 'up to date' with his/her immunisations at the time of interview. Since additional immunisations are due at 12 months, some mothers may have reported that their child was not fully up to date with immunisations if these 12 month immunisations had not been completed, even though the child had all immunisations due up to 6 months of age and would therefore have been regarded as fully immunised on the ACIR definition. These differences have no effect on the evaluation of the impact of PPL on immunisation since the same measure of immunisation is used in BaMS and FaWCS.

Table 3.7 Infant Health, selected indicators – Pre-PPL vs. Post-PPL (after matching)

Indicator	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Is child up to date with immunization?		
Yes, completely up to date	87.1	86.7
No, but has had most	11.1	11.7
No, but has had some	0.2	0.4
No, and hasn't had any	1.6	1.2
N	2585	3309
Child has had an illness lasting for one week or more in last 12 months	45.2	41.4*
N	2583	3306
Child's current health status		
Excellent	68.7	60.8**
Very good	20.4	26.6**
Good	9.1	10.8
Fair	1.6	1.4
Poor	0.2	0.3
N	2585	3310

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

There were no consistent indications that the impact of PPL on immunisation patterns or mothers' reports of babies' health and illness were significantly different in sub-groups of special policy interest than in the general population of PPL-eligible mothers.

3.4 Conclusion

This chapter has assessed the impact of PPL on mothers' and babies' health. It has found that the introduction of PPL has produced small, but significant, improvements in mothers' physical and mental health. It has also found that PPL probably produced small improvements in babies' health, in part through its impact in extending breastfeeding and probably also through delaying children entering formal childcare. Overall, although these changes in health outcomes are small, they present a consistent picture.

The improvements in mothers' physical and mental health are consistent with the delay in mothers' return to work following the commencement of PPL (Chapter 2). PPL's positive effect on mothers' physical health may be due to an associated delay in placing children in formal childcare, since entry into formal childcare increases children's risk of infection which they may pass on to parents. An improvement in mothers' mental health may be because PPL provides mothers with time and added financial security following the birth of their baby, thus reducing time pressure and stress. Clear indications of this effect are demonstrated in Chapters 4 and 5. The average changes in mothers' health, as measured through the self-administered SF-12 instrument, are quite small. However, the

population health impact of these improvements is likely to represent a considerable preventative health gain.

The impact of PPL in extending breastfeeding is consistent with its effects in improving mothers' health. This change is quite small, though statistically significant, increasing the proportion of mothers still breastfeeding at six months by about two percentage points and the proportion at 12 months by four percentage points. The association between breastfeeding and babies' health is well established, and these changes can be expected to have some impact on infant health. The effect almost certainly arises because PPL has delayed mothers' return to work, since breastfeeding cessation is closely associated with return to work for many mothers.

The evaluation had no direct measures of babies' health, relying on mothers' reports of their babies' health instead. Nevertheless, there was an indication that the introduction of PPL resulted in a small improvement in infant health. Thus, mothers were significantly less likely to report that their baby had suffered an illness of one week or more during the first year after PPL became available than before its availability. Mothers' assessment of their baby's overall health produced more mixed results, showing no indications of improved infant health. A small improvement in infant health arising from the introduction of PPL would certainly be consistent with extended breastfeeding and the delay in mothers' return to work. Overall, although the evidence is suggestive of such an effect, it cannot be considered conclusive.

Some of the effects of PPL on mothers' and babies' health did vary between sub-groups of mothers of special policy interest. Single mothers appear not to have benefited through an improvement in either physical or mental health from PPL, and the introduction of PPL actually brought forward their cessation of breastfeeding. These patterns may arise partly because PPL had a larger effect in prompting return to work amongst single mothers beginning around four-five months after the birth, and continuing to breastfeed after return to work may be particularly difficult for single mothers. Earlier return to work, along with the high proportion of single mothers who chose BB, may also have reduced the average impact of PPL on single mothers' health. These are clearly issues that require monitoring and, possibly, further research.

There were also indications that mothers employed on casual contracts before the birth experienced improvements in mental health, but not the physical health improvements displayed by other mothers. In contrast, self-employed mothers experienced improvements in their physical health, but not their mental health. The difference in impact on physical health could be partly due to patterns of childcare use that differ between mothers employed on different contracts – mothers employed casually may have been less likely to use childcare than other mothers and hence less likely to benefit if childcare use was delayed. Indeed, this is consistent with the fact that the introduction of PPL appears to have had no effect in delaying breastfeeding cessation amongst casual mothers. PPL had a large effect in delaying return to work amongst self-employed mothers (see Chapter 2), so that a significant

improvement in mothers' physical health arising from delayed entry of infants into childcare could occur in this group. It is less clear why they did not experience an improvement in mental health.

4 Ultimate outcomes – Gender equity and work –life balance

Improving gender equity and enhancing work-life balance were identified as key policy aims when the Paid Parental Leave scheme was introduced, and these are important ultimate outcomes of the PPL scheme. This chapter assesses whether the introduction of PPL is associated with changes in gender equity in households and employment experiences and in work-life balance.

A focus on gender equity in evaluating the impact of PPL is particularly salient, given the complexity of trends in workplace and household gender equity. In spite of the previously noted trends in women's labour force participation rates and educational achievements over recent decades (Chapter 2), changes in the gendered division of domestic labour and responsibility for unpaid care work in households have been much less evident. Australian and international research shows that men are spending more time on some tasks than in the past, but change is slow and in most households women undertake about 70 per cent of unpaid work (Bianchi et al., 2006; Baxter et al., 2008).

As these observations indicate, one central aspect of gender equity is the amount of household work men and women do in childcare and other housework, and how this work is shared. A large body of research documents the strong tendency for women, particularly mothers, to undertake much more of this work than men (Chesters et al., 2009; Craig, 2007). Most analysts see this pattern as arising from expectations about men's and women's roles in the household. Important research suggests that longer parental leave that is predominantly taken by mothers may reinforce the tendency for household work to be primarily done by women, decreasing the time fathers spend on housework and childcare (Hook 2006, 2010). However, other research has found that countries with longer parental leave policies have more equal gender divisions of housework (Fuwa and Cohen, 2007). Assessing the impact of PPL on these issues is therefore central to any evaluation of its impact on gender equity. This chapter considers whether there is any evidence of change following the introduction of PPL in the hours of childcare, other housework and total household labour undertaken by mothers and their partners. It also assesses whether there has been any change in the share of this work that mothers do. Any possible impact of PPL on mothers' relationship satisfaction is also examined, since relationship satisfaction is known to be directly impacted by the division of household work between partners (Amato, 2007).

A second closely related aspect of gender equity is gender disparities in the workplace and the labour market. This may relate to women's and men's treatment and experiences at work, or to gender differences in long term outcomes (such as careers and earnings). This chapter examines women's reports of their treatment at work during pregnancy, their use of various workplace flexibility options on return to work, and their perceptions of their career opportunities on return to work. Experiences at work during pregnancy and use of flexibility arrangements are important because women's childbearing and family responsibilities may be the sources of significant gender inequity at work and in careers (Budig and England, 2001, Livermore et al., 2011). Hence, any impact PPL has on these

issues may affect gender equity in employment. This chapter also assesses the impact of PPL on mothers' perceptions of their career opportunities on return to work, a more direct measure of their employment outcomes.

Another important issue for mothers is how they balance working life with bearing and raising children. The chapter examines the impact of PPL on one summary measure of work-life balance – how often mothers feel rushed. This measure provides a useful overall assessment of work-life balance (Craig and Powell, 2013; Craig and Baxter, 2013; Strazdins 2011). Any improvement in its level following the introduction of PPL represents an important indication of enhanced work-life balance.

Like other chapters, this chapter relies primarily on comparison of a pre-PPL sample of mothers with a post-PPL sample. This comparison enables an assessment of the impact of PPL by comparing outcomes for mothers who had access to PPL with those who did not have access. The survey data used in these comparisons is from surveys of PPL eligible mothers before and after the introduction of PPL. The profile of the pre-PPL sample (BaMS) is somewhat different from that of the post-PPL sample (FaWCS). The analyses reported in the chapter again use 'propensity score matching' to adjust for these differences, ensuring that any identified differences between the samples are likely to be due to the introduction of PPL rather than differences in the sample profiles. This technique is very effective for the analyses reported here.

The chapter begins by focusing on possible effects of PPL on the household division of labour. It then moves on to consider changes in mothers' gender equity related experiences and outcomes at work, and ends with a consideration of changes in the summary measure of work-life balance.

4.1 The impact of PPL on household division of labour

To assess whether PPL has impacted on the household division of labour, changes following the introduction of PPL in mothers' and fathers' hours and share of household labour were assessed. Within families and households, the division of household work changes over time, and PPL could have a different impact at different points. Any delay that PPL causes in mothers' return to work could increase the average share of unpaid work done by mothers if mothers tend to do a greater share of this work when they are not in paid work (Chesters et al., 2009). As a result, the amount and share of household work done by mothers will change as they return to work (Baxter and Hewitt, 2013). Nevertheless, it is possible that PPL may increase gender inequity in household work in the longer term if it increases the share of household work done by mothers when they do return to work (Moss and Deven, 1999). PPL may also change people's perceptions of the place of mothers' paid work within families, possibly increasing the tendency for partners to believe that an equal division of housework is appropriate. Assessment of the impact of PPL on the division of household labour between mothers and their partners is therefore likely to depend on the time point at which it is measured. The policy outcome that is of primary concern is longer term changes in gender equity, but the household work patterns assessed in this chapter are those 12 months after the reference child's

birth. This provides the best available indicator of the longer-term division of household work between mothers and their partners.

The analysis focuses on the situation at the time mothers in the pre- and post- PPL samples were surveyed, when their babies were around 12 months old.²⁴ It compares mothers who had partners at the time of the interviews, and asks:

- Did the numbers of hours that mothers and their partners spend on childcare, housework and total household labour change following the introduction of PPL?
- Did the share of childcare, housework and total household labour between mothers and their partners change following the introduction of PPL?

The analysis also considers whether there were any effects of PPL on mothers' satisfaction with their relationships, since changes may be associated with shifts in the division of labour. The analysis asks:

- Did mothers' relationship satisfaction change following the introduction of PPL?

To answer these questions, this chapter makes simple comparisons between the pre- and post-PPL samples of mothers, comparing either means on key variables or simple distributions. To ensure that the samples are directly comparable, and any differences are not due to differences in sample profiles, results from the pre-PPL data (from the BaMS survey) are adjusted using weights derived from propensity score matching (see Appendix 3).

4.1.1 Childcare hours, housework hours and shares of each

The hours that mothers and their partners report spending on household work are widely used for assessing the equity of the division of household work. The analysis here uses mothers' reports of their own hours of household work, and their reports of their partners' hours of work (since partners were not surveyed). The share of household work done by mothers is calculated here as mothers' proportion of the total hours of household work (or childcare or housework) they report.

The introduction of PPL was not associated with any significant change in childcare hours for either mothers or their partners (Table 4.1). On average, mothers in the pre-PPL analytic sample used in this analysis²⁵ said they were responsible for 55 hours of childcare per week, compared to 56 hours in the

²⁴ As outlined in the previous paragraph, one mechanism by which PPL could impact the household division of labour would be through its effect on the timing of mothers' return to work. The analysis below does not control for timing of return to work, since the object is to assess PPL's overall impact, part of which may be through timing of return to work. As shown below, PPL has no statistically significant impact on the household division of labour, so that the mechanism of any effect is moot.

²⁵ There was an anomaly in the survey procedures in the pre-PLP (BaMS) survey that resulted in about 9 per cent of the sample being recorded as spending all their time (168 hours per week) in childcare. This measurement problem was partially overcome in the post-PLP (FaWCS) survey where a much smaller proportion gave this response. To overcome this problem, all cases where mothers said they spent 100 hours or more per week on childcare (in either sample) have been removed from the analysis. This resulted in a total of 1,168 cases being removed from analysis (19.7 per cent of the total), 633 from the pre-PPL and 535 from the post-PPL sample. A number of other approaches to dealing with this problem were considered, focusing on their

(matched) post-PPL sample, with the difference not being statistically significant. Mothers reported that their partners did less than half these hours of childcare – an average of 24 hours per week. Consequently, mothers contributed 71 per cent of childcare hours both before and after the introduction of PPL.

Mothers in the post-PPL analytic sample reported that both they and their partners spent more time on housework than those in the pre-PPL sample. In both cases, the change was clearly statistically significant, with an increase of two hours per week for mothers (from 22 to 24 hours) and one hour for partners (from eight to nine hours). However, the share of housework hours done by mothers was unchanged at 73 per cent.

Overall, these results clearly show that PPL had no impact on the division of childcare or housework tasks between mothers and their partners.

Table 4.1 Mothers' and partners' hours and mothers' share of childcare and housework before and after PPL, partnered mothers, with matching[#]

	Pre-PPL (matched)	Post-PPL
Mothers childcare hours (mean weekly hours)	55.1	55.9
Fathers childcare hours (mean weekly hours)	24.4	24.1
Mothers share of childcare hours (per cent)	70.5	70.9
Mothers hours of housework (mean weekly hours)	21.9	23.9**
Fathers hours of housework (mean weekly hours)	8.1	9.1**
Mothers share of housework (per cent)	73.4	73.2
N	1736 ^{##}	2624 ^{##}

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. Mothers who had partners at the time of interview (12 months after the birth).

* significant at the 5%-level; ** significant at the 1%-level

[#] Note: mothers who reported more than 100 hours in child care were excluded from this analysis.

^{##} Note: N may vary due to missing data at each question.

To provide a final check on whether the share of household work done by mothers changed following the introduction of PPL, changes in the total hours of household work were examined (Table 4.2). The results confirm the earlier pattern. Although the total hours of household work mothers reported did increase following the introduction of PPL (by about three hours per week), the share of household work they undertook did not change.

These patterns of no real change in the sharing of household work following the introduction of PPL were echoed in the in-depth interviews. These interviews showed that mothers often acknowledged that they did more housework and childcare than their partners, but also that they usually regarded this as equitable. Nevertheless, some mothers did express concerns that the longer leave they took as a result of the availability of PPL would make it more difficult to maintain an equitable sharing of

impact on the distribution of childcare hours and the sensitivity of results to these other approaches. These analyses support the conclusion that the approach used here is optimal, under the circumstances.

household work with their partners when they returned to work (see Section 5.6). The results reported above suggest that, in general, this did not happen.

Table 4.2 Mothers' and fathers' average hours and mothers' share of all household work before and after PPL, partnered mothers, with matching

	Pre-PPL (matched)	Post-PPL
Mothers' hours all household work	76.8	79.7**
Fathers' hours all household work	32.2	32.8
Mothers' share of total hours household work (per cent)	71.2	71.5
N	1754 [#]	2669 [#]

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. Mothers who had partners at the time of interview (12 months after the birth).

* significant at the 5%-level; ** significant at the 1%-level

[#] Note: N may vary due to missing data at each question.

The data were further analysed for two sub-groups of mothers – those who had been employed casually before the birth and those who were self-employed – to assess whether they experienced similar trends as for mothers overall. In line with results for the overall sample, these sub-group analyses showed no evidence of any change in mothers' share of childcare, housework or total household work following the introduction of PPL.

4.1.2 Relationship satisfaction

As a further check on whether the introduction of PPL might have had an impact on gender equity within households, its impact on mothers' relationship satisfaction was examined (Table 4.3). The results again show no indication of change following the introduction of PPL, with the vast majority (more than 95 per cent) of mothers reporting that they were either 'satisfied' or 'very satisfied' with their relationship before and after PPL. There was a small change in the proportion of mothers who said they were 'very satisfied' with their relationships between the pre- and post-PPL samples (64 per cent compared to 66 per cent, respectively), but the difference was not statistically significant. Overall, PPL appears to have produced no change in relationship satisfaction for mothers.

Table 4.3 Mothers' relationship satisfaction, before and after PPL, partnered mothers, with matching

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
How satisfied with relationship		
Very dissatisfied	0.5	1.2*
Dissatisfied	1.9	1.3
Neither	1.9	1.3
Satisfied	31.7	30.2
Very Satisfied	64.0	66.0
N	1741	2638

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. Mothers who had partners at the time of interview (12 months after the birth).

* significant at the 5%-level; ** significant at the 1%-level

Are there any changes in relationship satisfaction within groups of special policy interest, despite the overall lack of change? Assessment of this issue focused on mothers who had been employed on casual contracts or were self-employed before their baby was born. These mothers had less access to employment benefits such as maternity leave prior to the introduction of PPL, compared to other mothers. This may have been associated with increased relationship stress after birth, as women are either forced to give up their jobs or return to employment sooner than they wished. The availability of PPL thus may be associated with increased relationship satisfaction for these groups if it reduces time pressure or financial stress (or both). Results (Table 4.4) show that there was a significant increase in relationship satisfaction for mothers who had been casually employed before the birth, with a rise in the proportion who were very satisfied with their relationship from 58 per cent to 70 per cent across analytic samples. In effect, PPL seems to have brought casually employed mothers' relationship satisfaction into line with that of mothers on other types of contracts. It is unlikely that this change is due to changes in the household division of labour in households where the mother was employed casually before the birth, since none of the results for mothers' share of household work show any indication of change. However, other results later in this chapter suggest that this change amongst mothers who had been casually employed before their babies were born could be due to the increased time that PPL affords them to spend with their families.

Table 4.4 Proportion of mothers very satisfied with their relationship, by contract type, partnered mothers, pre-PPL vs. post-PPL

Contract type before birth	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Permanent/ongoing – per cent very satisfied	64.4	66.1
Fixed term - per cent very satisfied	63.5	64.7
Casual- per cent very satisfied	58.1	69.7*
Self-employed - per cent very satisfied	66.8	63.0
N	1360	2051

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. Mothers who had partners at the time of interview (12 months after the birth).

* significant at the 5%-level; ** significant at the 1%-level

4.2 The impact of PPL on workplace gender equity

A substantial body of research indicates that the different impact on men's and women's careers of having and raising children is a key contributor to women's earning and career disadvantage compared to men (Budig and England, 2001; Livermore et al., 2011). Almost universally, women take career breaks when children are born, while men do not, and Australian mothers are very likely to return to work part-time and continue to take a greater share of childcare responsibility than men. International research indicates that the parental leave provisions available to mothers and their partners can ameliorate these effects (Gornick and Meyers, 2009). Nevertheless, there is strong evidence that women continue to experience discrimination associated with pregnancy, parental leave and return to work. Recently published research by the Australian Human Rights Commission (2014) showed that just under half (49 per cent) of surveyed mothers who worked before a birth reported

some form of discrimination during pregnancy, while on parental leave or on return to work. Whether PPL has any effect on gender equity in work, careers and the labour market is therefore an important question. Many important issues in workplace gender equity cannot be answered by this evaluation, as they unfold for individual women over many years following a birth, and any impact PPL has on workplace practices and norms may happen over years and decades. However, the evaluation did examine several early indicators related to these issues.

First, mothers were asked about their treatment at work while they were pregnant. They were asked whether they experienced any problems at work related to their pregnancy, and whether they received any assistance during their pregnancy. These issues are important because they may directly affect mothers' experiences at work, either positively or negatively, thus directly impacting their careers. They may also indicate employers' and managers' awareness of mothers' workplace needs and challenges. Any change in the levels of problems or assistance at work as a result of the introduction of PPL may indicate change in workplace culture that arises from the availability of PPL. The analysis below asks:

- Was there any change in the frequency with which mothers reported experiencing problems at work during their pregnancy following the introduction of PPL?
- Was there any change in the frequency with which mothers reported being given assistance at working during their pregnancy following the introduction of PPL?

Second, mothers were asked about their use of various flexibility provisions. These may assist them in ameliorating the conflicts between their caring and work responsibilities and commitments, and thus improve their ability to develop successful careers. Again, change associated with the introduction of PPL may indicate an effect on workplace cultures through changes in the availability of employment flexibility, or a change in the acceptability of using flexibility provisions. The analysis asks:

- Did mothers returning to work use flexibility arrangements of any kind more or less frequently following the introduction of PPL?
- Did mothers returning to work use particular types of flexibility arrangements more or less frequently following the introduction of PPL?

Third, mothers who had returned to work were asked how they thought their career prospects on return to work compared with their prospects before they gave birth. Mothers' answer to this question indicated their perception of the impact of taking parental leave on their career prospects. The analysis asks:

- After the introduction of PPL, were mothers more or less likely to think their career prospects had deteriorated or improved when they returned to work?

4.2.1 Before the birth – treatment at work during pregnancy

Some 14 per cent of mothers in the analytic samples said that they had experienced problems at work²⁶ during their pregnancy. There is no indication that the introduction of PPL has produced any change in the proportion of mothers who had experienced these problems (Table 4.5). Mothers were much more likely to say that they had received assistance at work during their pregnancy than that they had experienced problems. Some 56 per cent of mothers in the post-PPL analytic sample and 60 per cent of those in the matched pre-PPL sample said they had experienced support. This small decline in the frequency of being given assistance is not statistically significant, and cannot be taken as indicating any real change in support.²⁷

Table 4.5 Mothers' experience of problems at work and given assistance at work during pregnancy, before and after PPL, with matching

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Experienced problems at work during pregnancy	14.5	14.1
Given assistance at work during pregnancy	59.6	56.3
N	2577 [#]	3307 [#]

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2; differences between pre- and post-PPL were not statistically significant.

[#] Note: N may vary due to missing data at each question.

4.2.2 On return to work – use of flexibility arrangements

The use of workplace flexibility arrangements is central to how many mothers balance their work and family commitments (Pocock et al., 2012). The use and presence of these arrangements is an indicator both of the willingness of employers to support new mothers in their return to work, and of the employment opportunities available to new mothers (Davis and Kalleberg, 2006).

Overall, there is little evidence of change in the use of flexibility arrangements following the introduction of PPL. Surveyed mothers who had returned to work by the time of interview (approximately 12 months following the birth), and had changed some aspect of their employment on returning to work (around 72 per cent of mothers who had returned to work), were asked whether they had used any flexibility provisions since returning to work. Some 90 per cent of these mothers in the post-PPL analytic sample said they had used at least one flexibility provision, a non-significant change from the 88 per cent in the pre-PPL sample (following matching) who gave the same answer (Table 4.6). Mothers were also asked about their use of a range of flexibility provisions: permanent part-time arrangements, shorter hours for an agreed period, flexible hours, job sharing, working from home,

²⁶ Mothers were initially asked to respond 'yes' or 'no' to a question about whether they experienced any problems in their workplace while they were pregnant. Those who asked for clarification were told that problems might include "being treated with less respect, difficulty negotiating flexible work hours or getting information on maternity leave, being dismissed or made redundant, or other problems".

²⁷ Further analysis did indicate a statistically significant decline in the provision of assistance to mothers who had been self-employed before the birth (with no significant decline for any other group of mothers). There is no obvious reason that PPL should have produced a change for self-employed mothers only. The result may be a statistical anomaly.

employer provided or assisted childcare, and bringing a child to work occasionally. Permanent part-time arrangements and flexible hours were the most commonly used provisions, with nearly 60 per cent of the mothers with changed employment arrangements using flexible hours and almost the same proportion taking permanent part-time hours (Table 4.6). There was no indication that the proportion of mothers using these provisions changed after the introduction of PPL. However, there did appear to be some small changes in the use of shorter hours for an agreed period and working from home. The proportion of mothers using each of these provisions declined a little in the post-PPL sample compared to the pre-PPL sample; both declines were statistically significant.

Table 4.6 Mothers' use of flexibility provisions before and after PPL, with matching

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Mother's job conditions changed on return to work (including return to different job) [†]	71.9	71.7
N ^{††}	(1809)	(2444)
Use of flexibility provisions amongst mothers whose job conditions had changed		
Mother had used at least one flexibility provision	88.2	90.2
Used permanent part-time arrangement	56.3	57.5
Used shorter hours for an agreed period	42.0	37.2*
Used flexible hours	58.6	61.5
Used job sharing	18.2	17.1
Used work from home	36.7	32.0*
Used employer provided /assisted childcare	3.3	4.0
Brought child in to work occasionally	22.9	19.7
N	1242 [#]	1591 [#]

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2. Mothers who had returned to work at time of interview (approximately 12 months after the birth)

* significant at the 5%-level; ** significant at the 1%-level.

[†]These proportions vary slightly from those shown in Table 2.7 because the weights used in matching differ (as explained in Appendices) and because missing cases are different.

^{††}Number of mothers who answered the question about whether job conditions had changed on return to work.

[#]Number of mothers whose jobs conditions had changed, number may vary slightly across each provision due to missing cases.

4.2.3 The impact of PPL on perceived career prospects

Around 70 per cent of mothers who had returned to work by the time their babies were about one year old went back under different job conditions than the ones they experienced before a birth (Table 2.7; Table 4.6). These conditions may affect their career opportunities. Indeed, the long-term disadvantages many women face in their employment and careers are substantially influenced by the changes in opportunities that arise when they return to work after a birth (e.g., Livermore et al., 2011). Mothers' views about their career prospects are one important indicator of these effects. Mothers in the pre- and post-PPL surveys who had returned to work by the time they were surveyed (about 2 months after the birth) were asked whether they considered their career prospects to be better, about

the same or worse on return to work compared to before the birth. In the post-PPL analytic sample, 32 per cent of mothers who had returned to work said that their prospects were worse when they returned to work than they had been before the birth of their baby (Table 4.7). This was a significant decline from the 38 per cent who held the same view in the (matched) pre-PPL sample. The fact that around one third of mothers feel that their career prospects worsen following a birth is a striking result in itself, indicating that many mothers anticipate the well-documented negative impacts of child-bearing on their careers. Nevertheless, the introduction of PPL was clearly associated with an improvement in mothers' views about their post-birth career prospects compared to those before the birth. There is no firm evidence from the evaluation about the reasons for this change. It could be associated with the fact that more mothers return to their pre-birth employer where they may be more confident of their career prospects than if they had changed employers. Alternatively, it could arise because employers have become more accepting of mothers taking parental leave and returning to work following a birth.

Table 4.7 Perceived career opportunity on return to work compared to before birth

	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
Better	9.0	11.1
Same	53.2	57.1
Worse	37.8	31.7*
N	1801	2435

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

4.3 The impact of PPL on feeling rushed

An important possible effect of PPL is to reduce the time-squeeze experienced by many families when they have infants in the household (Pocock et al., 2012), thus improving family well-being. A simple, well-established measure of well-being associated with time pressure, is based on how often people feel rushed or pressed for time (ABS, 2009). One year after their babies were born, 53 per cent of mothers in the post-PPL analytic sample said they felt rushed or pressed for time “almost always” or “often” (Table 4.8). This was a significant reduction on the 57 per cent (following matching) of mothers who felt the same way before the introduction of PPL. Thus, PPL appears to have quite a sustained impact on this aspect of work-life balance, since the improvement is at a point where about three quarters of mothers in both samples had returned to work, and post-PPL mothers were working the same hours as mothers before PPL.

Although the reduction in mothers feeling rushed was found amongst many groups, it was particularly large for mothers who had been employed on casual contracts before the birth of their babies (Table 4.8). Some 41 per cent of post-PPL mothers who had been casually employed before their baby was born said they almost always or often felt rushed, compared to 53 per cent in the (matched) sample of mothers before the introduction of PPL.

Table 4.8 Almost always/often feel rushed or pressed for time, all mothers and pre-birth employment contract

Group	Pre-PPL (per cent) (matched)	Post-PPL (per cent)
All mothers	57.4	53.1**
<i>N</i>	2585	3308
Mother's employment contract before birth		
Permanent / ongoing	56.6	53.0
<i>N</i>	1931	2527
Fixed-term	62.3	59.2
<i>N</i>	138	211
Casual	52.7	41.4*
<i>N</i>	301	350
Self-employed	69.0	67.8
<i>N</i>	196	199

Source: Baseline Mothers Survey (BaMS) and Family and Work Cohort Study (FaWCS) wave 1 and wave 2.

* significant at the 5%-level; ** significant at the 1%-level

4.4 Conclusion

The introduction of PPL has had some effect on the gender equity and work-life balance measures examined in this chapter, though the effects are generally quite small and there has been no impact in some important areas.

First, PPL seems to have had no discernible impact on the household division of labour. All the key measures of the share of household work done by mothers in couple households remained unchanged following the introduction of the scheme. Moreover, PPL had no general impact on mothers' relationship satisfaction (noting that 95 per cent of mothers reported feeling satisfied with their relationship).

Second, PPL appears to have had no effect on most measures of workplace gender equality examined here. Overall it did not change mothers' experience of problems or special assistance at work during their pregnancies. Nor did it produce consistent change in their use of most flexibility provisions on return to work. To the extent that these can be seen as indicators of workplace culture in relation to pregnancy and career support for working mothers, these results may be interpreted as indicating that there was little cultural change in workplaces following the introduction of PPL. However, mothers were somewhat more optimistic about the effect of the birth on their career prospects following the introduction of PPL. While it is not possible definitively to attribute this change to PPL, it could be associated with the greater likelihood of mothers returning to the same job they held before the birth following the introduction of PPL (see Chapter 2). Thus, it may be that PPL has improved mothers' attachment to their pre-birth employer, and therefore made them more confident about their career prospects in the known environment of their pre-birth organisation.

Third, PPL seems to have produced a small improvement in work-life balance for mothers, by decreasing their sense of time pressure. This effect is highly consistent with one central effect of PPL identified in Chapter 2 – the delay in return to work during the first six months following the birth.

Finally, PPL may have had a particularly significant effect on work-life balance for mothers who were employed on casual contracts before the birth. Although PPL had no general impact on relationship satisfaction, it does seem to have substantially improved satisfaction for mothers who were employed on casual contracts before the birth. While it is not possible to explain this change definitively, it is plausible that it is due to the combination of greater time out of the workforce and higher income that many casually employed mothers experienced following the introduction of PPL. The PLP amount for many casually employed mothers was greater than their normal earnings, so that the financial impact for them was much more substantial than for many other mothers. Moreover, PPL's effect in reducing mothers' sense of being rushed was particularly strong amongst casually employed mothers. The improved relationship satisfaction observed amongst casual mothers could be a reflection of a general improvement in time and financial pressure that is particularly pertinent in this group.

Overall, these patterns present a consistent picture. By delaying return to work, PPL has increased the time available to mothers, and this has had a positive effect on outcomes directly affected by time availability (particularly aspects of work-life balance related to feeling rushed). Thus, where outcomes are directly impacted by the availability of time (and money), there is evidence of change following the introduction of PPL. On the other hand, PPL has had virtually no effect on outcomes that tend to be strongly mediated by culture, whether in the home or at work. Thus, the gender division of labour, which is strongly affected by the cultural attitudes of men and women about gender roles, does not appear to have changed. And there is no indication of change in women's treatment at work during pregnancy or their use of flexibility provisions. Again, both of these are likely to be substantially mediated by workplace cultures that set the climate for support of working mothers. Of course, the data analysed here refer to the experiences of mothers fairly early in the operation of the PPL scheme. Any cultural change the scheme produces may take longer to emerge.

5 How PPL affects mothers' experiences and actions – qualitative findings

5.1 Introduction

Earlier chapters have reported the extent to which progress has been achieved toward the ultimate outcomes of the PPL scheme, based on analysis of large-scale survey data. The nature of the survey data is such that, while they provide robust evidence about the extent of changes, they leave the exact mechanisms responsible for change to be inferred. This chapter draws on in-depth interviews with mothers to further illuminate the findings in earlier chapters, particularly focusing on how PPL has had its impact. Data from in-depth interviews with mothers are used to elaborate the mechanisms through which PPL may affect ultimate outcomes, and assess its impact on ultimate outcomes from mothers' perspective, especially for mothers of special policy interest. The analyses illustrate how, and under what circumstances, the PPL scheme, and the experience of receiving PLP, may produce the effects described in the previous chapters.

The data used in this chapter come from in-depth interviews with 109 mothers who gave birth prior to the implementation of the scheme (pre-PPL), and with 100 mothers who gave birth following the scheme's implementation (post-PPL). The samples focused on mothers from groups of special policy interest: mothers who were self-employed or on casual contracts before the birth, Aboriginal and Torres Strait Islander mothers, mothers from culturally or linguistically diverse backgrounds, and mothers who had been single at the time of their baby's birth. The socio-demographic attributes of mothers in the two samples are tabulated in Appendix 6.

5.2 Impact of PPL on mothers' labour force participation

Chapter 2 shows that PPL had a clear effect of extending the amount of time away from work mothers take after the birth of a child up until the child is about six months old, and then slightly increasing their probability of returning to work by the baby's first birthday. The survey findings also show that the impact of delaying return to work was most pronounced amongst mothers on lower incomes, with lower formal education, and particularly for those on casual contracts or who were self-employed before the baby's birth.

Table 5.1 provides a summary of the return to work situation for the pre- and post-PPL in-depth interview samples.

Table 5.1 Timing of return to work, description of the pre-PPL and post-PPL in-depth interview samples

Timing of return to work	Pre-PPL (Number)	Post-PPL (Number)
Before three months	18	8
Between three and five months	7	21
Between five and 11 months	32	39
More than 11 months	13	13
Had not returned to work and/or classified themselves as a 'stay at home mother'	38	18
Missing	1	1
Total N	109	100

Source: Pre-PPL and post-PPL in-depth interview samples

Note: these are not statistically representative samples).

The in-depth interviews provide considerable evidence that the period of predictable income provided by PLP allows mothers to remain at home with their babies longer than they otherwise would have. Of the mothers in the post-PPL sample who took PLP, most reported that the provision of PLP had extended the amount of leave they had taken. The impact of PPL was particularly strong amongst the 12 self-employed mothers in the sample who took PLP, of whom 11 indicated that PLP had made a difference to the amount of leave they took, as well as for the six single mothers who took PLP, five of whom indicated that PLP had made a difference to the amount of leave they took. The financial support provided through PLP clearly enabled many mothers from the groups of special policy interest, and those in precarious or strained financial situations, to take more leave.

One of the single mothers, for example, explained:

...in terms of how much leave I could take. That was fantastic. It gave me an extra couple of months, pretty much, which was fantastic....I think it's just fantastic that the government are supporting people in being able to take some leave to be at home with the baby and to not be financially disadvantaged by that [Single; permanent employee; NCI]²⁸

For almost all the self-employed mothers, PLP clearly had a major impact in extending the amount of leave mothers took, as exemplified by the following:

I couldn't afford to take anything more than the paid parental leave. [Partnered; self-employed; NCI]

So I had the paid parental leave time off, because I was getting paid anyway, so we weren't forced, for money-wise, to go back to work. Then, yeah, once that stopped, I started up again [Partnered; self-employed; NCI]

One of the self-employed mothers compared her experience with her second child, when she was able to take PPL, with her experience following the birth of her first child:

²⁸ Where quotes are used, the mothers' partnership status, employment contract before the birth, Indigenous and CALD status, and interview identification number are indicated. "NCI" indicates that a mother was not Indigenous and not from a culturally or linguistically diverse background.

Facilitator: So how much difference did it make having the scheme this time around for [baby]'s birth?

Interviewee: It meant that I could actually, didn't sort of have to rush back to work and be stressed about it and all that sort of thing again. [With first child].. Yes, I went straight back to work, at three weeks, she was only three weeks old. I took three weeks off because I couldn't afford to take any longer off. So I just had to go straight back to work and plus I was a bit worried, you know, like whether my business was going to crumble. There was such a lot of pressure for me to get back to work. [whereas with second child].. knowing that I had extra money because I don't have savings, like we live week to week, you know? Because if I'm not working I don't earn any income, I get no holiday pay, no nothing. So it certainly helped to have that money come through, I mean obviously it wasn't enough [laughs] you could double it. But at least it basically paid for the bulk of the bills so we managed so actually it feels fine. So I took 10 weeks off, took long enough. [Partnered; self-employed; NCI]

Another of the self-employed mothers elaborated the precision with which PLP determined the timing of her return to work:

Facilitator: So what's your experience been like? Was the money actually important to your decisions around going back to work...?

Interviewee: Look, it was important to me because we hadn't planned this one and by number four it's getting expensive. It means I could take that time off work without having to worry about it, because it worked out at a pretty reasonable payment. It gave me the fine line of when to go back as well, because I knew that if I went back earlier, you have to stop your payment. So for me, it meant that why would I go back to work and work 20 hours a week and earn not that much more, when I can actually just focus being at home and actually get paid the money. You know, a little bit less, but some money to cover the costs and things. So it was definitely a good system for me. [Partnered; self-employed; NCI]

Similarly another self-employed woman described her return to work as:

just a bit after the paid parental leave had finished. Only for financial reasons, I had to go back to work... I do think the paid parental leave has helped us. So I could spend that little bit of time with [baby] at the beginning rather than rushing off to work the week he was born, or like a couple of weeks later. [Partnered; self-employed; CALD]

Many other mothers in a variety of situations referred to the impact of PPL on alleviating financial stress and allowing them to take time out of the workforce. In response to questioning about whether PPL had made a difference to their leave taking, typical responses included:

...this support enabled me to stay at home (with less financial concern) looking after my baby. [Partnered; permanent; CALD]

Well and truly, otherwise I would have had to go back early, five weeks. [Partnered; fixed term contract; NCI]

Absolutely.. massively. I think what it did is it just alleviated the pressure of - because I had to quit my job, so there was no guarantee that I was ever actually going to get a job as soon as did and we didn't know how long it would take, so I think it just alleviated the pressure of the mortgage... [Partnered, fixed term contract; NCI]

...it's a real bonus for me because it meant that I could stay at home for longer because without it I wouldn't have taken the extra time off. [Otherwise] I would have gone back after 12 weeks [Partnered; permanent; NCI]

I would have returned to work maybe at two months if there were no PPL support. Five months are different to two months in nature – one can have much better rest. [Partnered; permanent; CALD]

A mother of three on a low income whose husband became redundant soon after the birth of their third child described the impact of PPL for her family, highlighting that she was able to take 18 weeks leave with her youngest child, compared with only six weeks leave for each of her older children:

I think with the Paid Parental Leave overall, it's really good. It really helps me a lot, especially during that - I don't have to think for four months that - how we should eat, how we should pay these things? So it was really - really helped me a lot with that... Well if the paid parental leave hadn't come in it [leave]... probably would have only been a week or two and then I would have been back at work as with the other kids. With PPL I just took advantage of that ...I was actually earning more on the PPL than I was working. [Partnered; fixed term contract; NCI]

Of the small minority of mothers for whom PPL did not make a difference to the amount of leave taken, all were partnered, none were from culturally or linguistically diverse backgrounds, and all were in a relatively comfortable financial situation where their earnings were not crucial to the family's financial survival. Their situations are typified by the following interview extracts:

Not really because it's not my wage that really impacts the family. [Partnered; fixed term; NCI]

No. I don't think it did, just because... with my husband and his financial position. I've been fortunate that that wasn't really, didn't really enter into it. Although it is nice for me to have my own money without having to ask him for cash. But in terms of contributing to my decision whether to work or not, it really didn't play much of a role. [Partnered; casual; NCI]

I think for many people it would make a huge difference, that this money would allow them to stay home with the baby and so on, but in our situation we didn't really need it. We could have coped without it. We are both in our 40s and we have both worked and we are in a different situation than a 20 year old starting out. [Partnered; fixed term; NCI]

Two other mothers for whom PPL did not make a difference to the amount of leave they took were single mothers who moved from PPL to sole parent payments.

In sum, the patterns of labour force participation amongst the pre-PPL and post-PPL semi-structured samples closely resemble those in the survey data. A smaller proportion of mothers in the post-PPL group returned to work very early, but a greater proportion had returned to work by the time of interview. For the majority of mothers interviewed in the post-PPL phase, the scheme was consequential for their decisions about how much leave to take. The perception of most mothers in the in-depth interview sample who took PPL is that it helped extend the amount of time they were able to take out of the workforce. These interviews suggested that the impact of PPL was particularly important for self-employed mothers and single mothers, almost all of whom reported that the scheme had increased the amount of time they were able to take out of the workforce. Interviews with these women, and others experiencing financial pressure, reveal a strong, positive impact of PPL through the provision of income security. This gave most women more time at home with their new babies. Mothers often explicitly linked their time on paid leave with reduced financial stress and with feeling

less rushed and pressured. The implications of these findings are discussed in the following sections of this chapter.

5.3 Impact of PPL on maternal health and wellbeing

Chapter 3 shows that PPL has produced small, but statistically significant, improvements in mothers' physical and mental health. Improvements in mothers' mental health were speculated to arise directly from the reduced stress resulting from the secure, predictable income provided to mothers who take PLP, while improvements in physical health may in part be accounted for by delaying the use of formal day care associated with longer leave.

The in-depth interviews provide strong indications that PPL directly reduces mothers' stress and enhances their mental health. Many mothers in the post-PPL sample explicitly articulated this link, demonstrating the importance to them of a secure income for their own mental health and for their relationships with their partners:

...it [PPL] makes, it's just one less stress. You know that certain bills were covered for a certain period of time. So it's something that just reduces the anxiety and the pressures of such a dramatic change in the family dynamics. [Partnered; permanent; CALD]

For a single mother who took PPL and returned to work two days per week out of financial necessity,

I felt better about being home with [baby] for that time. It wasn't stressful...[without PPL,] I may still have had the same amount of time but it would have been quite stressful at the time financially. So, yes, it [PPL] was good, it worked well. If I didn't financially have to work I just wouldn't, those two days are really stressful for me and emotionally I hate it. [Single; permanent; NCI]

In contrast, a mother of two who is employed as a casual employee describes the health costs she experienced with her first child after having to return to work at 12 weeks:

When my first son was born, I had to go back to work within twelve weeks because we had to have the income, we simply couldn't be without the income. It was very, very hard. It actually made me incredibly stressed... I think he was well over a year before I actually felt like I had any control over my life at all... for me, having my first child, that [PPL] would have made an enormous amount of difference just to have some kind of income for a period of time. I was off looking for childcare for my twelve week old baby and the only place I could find was somewhere I wasn't happy leaving him but otherwise you're going to have to sell the house and it's incredibly stressful... and I don't think people should be making decisions on returning to work purely on the basis of financial need. You should be able to weigh up other things, like whether you're well enough and whether you're ready. So, whilst it didn't make a huge difference to me this time, I think it's very, very important because people need to have options. [Partnered; casual; NCI]

For some mothers PPL made a direct contribution to their sense of psychological wellbeing. For example, one of the single mothers in the post-PPL group had not returned to work and experienced depression and mental health problems after the baby's birth and separation from the child's father. She spoke of the important psychological benefit of PPL:

I've worked since I was 17 so it kind of felt like I was still getting a wage even though I was at home. It kind of mentally helped me to think that I'm the one getting paid for doing a job. [Single; permanent but currently on pension; NCI]

Several mothers articulated a clear connection between PPL and reduction in relationship stress. To the extent that PPL delays return to paid work, it reduces relationship stress particularly where couples experience substantial financial pressure. For example, one of the casual employees said the following about the scheme:

Oh, it's been the best thing for us. If we didn't have that it would have been such a stress and struggle to have a baby and for me to be able to stay at home with [baby] for any length of time would have been really hard. Just to have that help just made things that little bit easier for us to adjust to a new baby and just - I think with also your relationship as well, to be under financial pressure and lack of sleep is a huge issue anyway but to have had that help probably helped us through quite a hard period of time adjusting with the baby. [Partnered; casual; NCI]

In the case of a severely financially strained couple where the husband's earnings are unpredictable, the mother described the difference in the family's experience while receiving PLP and the subsequent period of five months of unpaid maternity leave:

Facilitator: Then, your experience of getting the paid parental leave, what's that been like? Has that been really important?
Interviewee: Yes, it is. My husband is on a commission pay, so we never know how much has come in. It did ... cause a bit of strain on the family. You start arguing about little household things and why we have bread and why we don't have - so it kind of helped. It made it easier, much easier, for at least the time it [PLP] was paid. Because I know once it's finished and I'm still out of [paid leave], that - five months that was left, it was a bit of a struggle financially... we struggled badly. I think I went to my parents in the end and I nearly divorced him, it was just so hard. The impact was massive. I didn't want to come back because of the stress. Just constantly, you can't pay the bills, can't feed the kids. [Partnered; permanent; NCI]

The connection between paid leave, the reduction of financial stress, and concomitantly, time to transition into the role of new parent, was pointed out by a number of mothers. It is illustrated in the following excerpt from a woman who combined generous leave provisions from her employer with PPL:

Facilitator: Did having the leave make a difference to the amount of time you've had off?
Interviewee: Yes. Yeah, definitely. I took a year - whereas with [older child] I took six months. In terms of quality of life, I guess, because you don't stress because you don't have enough money ... you're feeling more relaxed, so you can spend more time with the children... it's really good, I think. [Partnered; permanent; CALD]

Additional time to stay at home after the birth of a baby has many other positive impacts for mothers' health. In fact, the majority of health issues described by mothers in interviews are linked to the availability or lack of availability of time. Physical tiredness, lack of sleep, fatigue, and exhaustion were commonly named by mothers as contributors to their state of health. Many mothers explicitly accounted for their health state in terms of lack of time – whether this be lack of time to exercise, eat or sleep well. It is important to note that in both the pre-PPL and post-PPL in-depth interview samples, half of mothers rated their health at the time of interview as worse than it was before their pregnancy,

although slightly more mothers in the post-PPL sample rated their health now as better. Increased time on paid leave delays mothers' return to work and gives mothers more time to physically recover from the birth, and to adjust to a new baby. This additional time is likely to contribute to improved physical health for mothers, particularly for the period of time they are on leave.

Once mothers have returned to work, time pressures are a major contributor to mothers' concerns about their own health. Comments from mothers who had returned to work at the time of interview drew an explicit link between lack of time and its negative impact on various aspects of their health and wellbeing, and most of these mothers now rated their health as worse than before pregnancy:

I used to be a really healthy person before but I get sick really fast now. I don't know if it's the immune system or because I'm lacking of a proper rest time, probably because I never get time to recover myself. [Partnered; permanent; CALD]

I don't eat very well anymore.... at the end of the day after I've fed him, bathed him, bottled him, put him to bed, the last thing I want to do is start cooking, so I just end up eating crap food. [Single; permanent; NCI]

My fitness is probably not great. I don't have time to exercise. [Laughs] Excuses. But it is tight, because (husband) leaves at six, and he gets home at, I don't know, 6:30. Then when he gets home I might need to do some phone work for clients, then - because I do the intake for the clinic. Then yeah, so there's really [little] time to just go to the gym. [Partnered; self-employed; NCI]

...before [baby] was conceived I was quite active and going to gym and getting back to shape and getting very fit. So since [baby], there's just no time for me to go the gym anymore. The gyms around here don't have crèche in the afternoon, after I finish work. So I just - yeah, a shame. [Partnered; permanent; CALD]

But it's yeah, trying to juggle everything, and finding the time to do that walk, or do that bit of exercise. [Partnered; self-employed; CALD]

I probably would have liked to have been able to do more exercise but I've not been able to do - my exercise has been minimal, because it's just been too hard, because I've - my husband has an early starting job, so it's not that I could do it in the morning. By the time we get home and get dinner and stuff it's seven, eight o'clock and by that time you're just exhausted. [Partnered; permanent; NCI]

Possibly time to exercise a bit more. [Partnered; fixed term contract; NCI]

These accounts underline the pressures associated with combining family and work responsibilities and their potential health impacts. To the extent that PPL delays return to work for mothers it has the potential to impact positively on both mental and physical health. The secure, predictable income not only reduces financial but also relationship stress in some families. The associated leave delays return to work, gives mothers more time to recover, and delays the time pressures that negatively impact on mental and physical health. The longer period of leave also delays placing infants in childcare, and as discussed in the next section, this has impacts for the health of the family, not just the infant.

5.4 Impact of PPL on infant health and implications for family health

Chapter 3 has shown that PPL had a small, but significant, impact in reducing the likelihood that mothers would report that their baby had experienced an illness of one week or more during the first year of life. It was speculated that this finding is most likely associated with a reduction in infectious illnesses when mothers' delay in returning to work also delayed their infants' entry into formal childcare. This explanation is supported by the in-depth interviews with mothers.

At the time of interview, most infants (generally aged between 12 and 14 months) were reasonably settled and healthy. However, of the infants who seemed to be suffering from frequent, and sometimes protracted illnesses, mothers' accounts often linked the child's illness with use of institutional or formal childcare following the mother's return to work. Typically, mothers' accounts included comments such as:

She's been a bit sick the past few weeks because she started at childcare. [Partnered; casual; CALD]

Yes, he was all right until he started childcare. That was a rough couple of months...yes, the combination of not eating solids well and sicknesses from childcare got him really, really skinny. He was gaunt, my poor baby. Around seven or eight months old he had gastro, he'd had bronchiolitis, lost tonnes of weight, wasn't eating very well. [Partnered; permanent; CALD]

Well, [baby] the normal virus from childcare, gastro, we are just finishing hand, foot and mouth disease...unfortunately we are in the sixth ear infection...we are candidates for the grommets and he's having surgery next week. [Single; fixed term contract; CALD]

These patterns were not evident amongst infants who were looked after in non-institutional settings.

To further explore this issue, mothers' descriptions of their child's health were categorised²⁹ and tabulated against their childcare use³⁰ in the post-PPL sample (Table 5.2). Among the mothers who were interviewed in this study, those who said their infants 'get sick a lot' also used childcare of some kind. Almost all of the children who were looked after at home by family (parents or grandparents) or nannies were described as being 'healthy'. Those children, who were cared for in a combination of formal, institutional settings and within the home, were most likely to be described as in 'average' health.

²⁹ Mothers' descriptions of the health of their babies at the time of interview were classified as follows: (1) Good: mothers used terms such as 'good', 'robust'; 'sturdy'; 'spritely', and 'healthy' to describe these infants. Most infants, fell into this category. (2) Average: babies who had a few minor ailments, the occasional cold and the like. Almost one-fifth of babies fell into this category. (3) 'Sick a lot': mothers describe them as children who 'get sick a lot'. About one in ten babies were described in these terms. Note these proportions are not statistically representative, but rather give an indication of the experiences of the in-depth interviewees.

³⁰ Mothers' descriptions of the forms of care used were classified as home (care within the home by extended family or a nanny), formal (formal childcare in an institution) or a mixture (both formal and home based care).

Table 5.2 Childcare arrangements and mothers' description of baby's health

Child health	Childcare arrangement		
	Home (number)	Formal (number)	Mixture (number)
Good	59	7	6
Average	4	5	10
Gets sick a lot	0	5	3
Total	63	17	19

Source: Post-PPL in-depth interview sample. (Note this is not a statistically representative sample).

Many mothers who had children in formal childcare also related the implications of a recurrently ill child for themselves and other members of the family.

So she did her first day of day-care in - I think it was August - so she would have been nine months and that was only as I said only one day a week at that point. Actually it was quite good because she was taking about a week to get rid of the bugs and things that she was picking up there. So we go have that day, she'd come home bring some bugs with her, we'd get sick and then everyone would get better in time for the next Friday when we would go and do it again. But I'd been warned about it by a lot of people and told that it would just take time. It's just being exposed to so many children. Yes we got there, the weather improved and now she's sort of - we don't notice it as much anymore. [Partnered; permanent; NCI]

Some mothers who reported substantial declines in their own health³¹ attributed the decline to illness 'brought home' by infants in formal daycare. For example, one mother rated her health now as 'probably seven' (on a ten point scale), but said

...if you'd asked me probably three months ago, I would say four [laughs]. ...one thing that no-one ever told me was when [baby] goes to childcare, that you get all the germs, and all the sickness brought back home. So my husband and I have had that probably – the snuffly nose and coughing for six months last year. Yeah, we've never been as sick as we have. [Partnered; permanent; CALD]

Another mother rated her own health now as 5.5 on a ten point scale (compared with 8.5 before her pregnancy). She explained:

We've been through quite a big period, about three months, of being very unwell due to [baby]. Yeah, he's picked up everything from the day-care. Then also when he's sick you get run down because you're not sleeping and then it gets stressful. My husband's had the same problems as well. He's exhausted. [Partnered; casual; NCI]

One of the single mothers said:

Oh it has been like – I've never been so sick in my life with flu's and everything. Because everything, catching everything. You feel tired and you get your immune system decrease also. You get colds easy. You are going to a childcare every day, you get whatever they get. It's normal. It is what is happen when you are dealing with childcares. It's part of the package. [Single; fixed term contract; CALD]

³¹ Mothers were asked to rate their health now and prior to their pregnancy on a scale of 1 to 10, where 10 is the best possible health and 1 is the worst possible health. This self-assessment related to all aspects of health.

The interview data elaborates the complexity of the mechanisms influencing infant and maternal health and wellbeing. PPL provides resources of money and time which, for many mothers, reduce financial and other forms of stress while increasing their time to regain their physical health. It also delays the entry of infants into childcare situations which result in frequent, often protracted infections for some infants and their mothers.

5.5 Breastfeeding

As shown in Chapter 3, PPL appears to have had no impact on the already high rates of breastfeeding initiation amongst Australian mothers. However, the introduction of PPL was associated with a small, but significant, increase in the proportion of mothers who continued breastfeeding after about three months following the birth, in line with the delay in mothers' return to work associated with the introduction of PPL. This section draws on the in-depth interview data to illustrate the mechanism behind the relationship between duration of leave and breastfeeding duration. Indigenous mothers had quite different breastfeeding patterns compared to non-Indigenous mothers³².

For non-Indigenous mothers in both the pre-PPL and post-PPL samples, a strong and consistent link between the timing of return to work and the duration of breastfeeding was evident. Post-PPL mothers were much less likely to return to work within the first three months following birth (Table 5.1). As a consequence fewer mothers in the post-PPL sample ceased breastfeeding very early (i.e., within three months). In both samples, mothers who had not returned to work were most likely to be still breastfeeding.

Mothers reported that once breastfeeding has been established, return to work is one of the most important reasons for the cessation of breastfeeding. Mothers' narratives regarding infant feeding patterns and rationale were very similar in pre-PPL and post-PPL interviews. The important difference between them relates to the timing of return to work; as this is later in the post-PPL sample, it extends the duration of breastfeeding with all the positive health consequences this entails for mothers and babies.

Typically, mothers prepare for return to work by introducing bottle or solids, or weaning their babies. Most mothers find it difficult to continue breastfeeding to any significant extent once they return to work, and many mothers experience diminished or low supply of milk once they try to combine work with breastfeeding, as typified by the following comments from mothers in the post-PPL sample:

³² In both the pre-PPL and post-PPL in-depth interview samples, Indigenous mothers were much less likely than non-Indigenous mothers to initiate or continue breastfeeding. The pre-PPL Indigenous mothers were recruited through their participation in the Longitudinal Survey of Indigenous Children (LSIC); these mothers tended to have infants who were somewhat older than the children of mothers recruited through BaMS, and they were considerably less likely than the non-Indigenous mothers in the pre-PPL sample to breastfeed for longer than six months. In the post-PPL sample, the ten Indigenous mothers interviewed were also considerably less likely than non-Indigenous mothers to initiate or continue breastfeeding; five of the 10 Indigenous mothers either did not initiate, or had stopped breastfeeding before their babies were six weeks of age, and only one was still breastfeeding at the time of interview.

I took him off day feeds at six months, because I was going back to work when he was seven months. I continued to do morning and night feeds up until he was about eight and a half months. I dropped the morning feed and kept the night, and then by nine months...I don't think I was making enough, and he was getting distressed trying to feed. He just didn't want to do it. So by nine months he was off breast completely. [Partnered; permanent; NCI]

I breastfed up until going back to work and we pretty much had to go cold turkey from then on in because it was just too hard. I'd already sort of weaned down to two feeds a day in the couple of weeks leading up [to return to work]...I just expressed... the first day and... I just felt too stressed to do it because I mean you're just on your feet. Even though my boss was supportive ...there's that whole like you don't want to leave your colleagues and you're busy. So it just didn't really work for me... it was just too hard. [Partnered; fixed term; NCI, rtw at 6 months]

I was going back to work...so it was, I guess a good time [to stop breastfeeding]. I wouldn't have minded if I had been able to breastfeed a bit longer. [Partnered; permanent; CALD]

A number of mothers drew an explicit link regarding PPL, its duration and its impact on breastfeeding.

I just think that paid parental leave system could be a few more months. It would just make a lot of difference for the breast feeders out there especially, that can't just pass the baby onto someone with a bottle. If that is their choice. [Partnered; self-employed; NCI]

[The scheme] should be longer I think, for mothers. Especially if you're aiming to go back to work. I think six months would be nice just to - especially if you're breastfeeding too, you can breastfeed that much longer. Even though it wasn't a hassle for me to express but it did make me lose a lot of milk too. Because I wouldn't express as much as what - if I had him there, it's just on demand. If he gets upset I just give him a feed. But I think that bond would be better if you were at home a bit more. [Partnered; permanent; CALD]

I'd like it [PPL] to be longer. Six months would be ideal because I really - that first month and a half [after returning to work when baby was 18 weeks old] I found really difficult because he wouldn't take a bottle... it was time for me to go back to work. It was really difficult. It was a difficult time because my husband was away for work a lot. So I would say... six months of Paid Parental Leave would be excellent. [Partnered; self-employed; NCI]

Mothers who were able to combine paid work with breastfeeding young infants generally experienced employment conditions characterised by one or more of the following:

- A high level of workplace autonomy and flexibility in terms of where, when, and how work was done – this was most common amongst self-employed mothers, or those working in family businesses;
- Having the baby at or near the workplace and having time to take breaks to feed the baby; or
- Being able to choose the number of hours worked, and their timing – this was most common amongst casual employees.

For example, one of the self-employed mothers started working again after PPL when her baby was 18 weeks old. She worked from home, where she had a play area for the baby, and childcare help from her mother. She described how she scheduled her clients in around her baby's sleep time:

So I'd, yeah, just feed around them [my clients] and know not to book people in in the time that he would need a feed. Because I don't have to be somewhere 9 to 5, I can work around what he needed, yeah. [Partnered; self-employed; NCI]

Several mothers in the post-PPL sample explained that they were able to maintain breastfeeding and their supply because their babies were in care either at the workplace or near it, and because they were entitled to breaks from work for breastfeeding. For example,

Because at work you have one hour that they allow you to go and feed ...there is a nursery there. You can actually go because they have a cot there, they have - yeah, it's very - you just have to go and book it on time and you have your one hour a day. So that's what I did...for four months. [32yrs, public sector, CALD]

These mothers' experiences suggest that policies which aim to support breastfeeding mothers in the workplace should consider incorporating:

- Flexibility in mothers' work hours;
- Including breastfeeding breaks in employment conditions; and
- Spatial arrangements which enable mothers to breastfeed while at or near work, where possible.

Overall, the in-depth interviews showed similar patterns of association between the timing of return to work and the duration of breastfeeding found through the large-scale survey analysis. In addition, the interviews revealed the reasons why the association exists, and the conditions under which mothers are able combine breastfeeding with return to work.

5.6 Gender equity

As shown in Chapter 4, PPL appeared to produce a small direct improvement in work-life balance by reducing the likelihood that mothers felt rushed or pressed for time. However, there was no evidence that PPL influenced the share of childcare, housework or total household work done by mothers and their partners about 12 months after the birth.

In both the pre-PPL and post-PPL in-depth interviews, a clear pattern of a 'traditional' gender division of labour was typical for a substantial proportion of couples. Overall, in both samples, mothers reported that they took most responsibility for household tasks and childcare, while their male partners were more likely to be responsible for the 'outdoor' tasks of gardening and home maintenance. In addition, after the baby's birth, the partner generally became the primary breadwinner. Most mothers also reported that this division of labour became more pronounced while they were on maternity leave.

Mothers in both pre-PPL and post-PPL samples reported that even though they took on a greater share of responsibility for household and childcare tasks while they were on leave, they generally perceived this as fair and equitable, at least for the period they were on leave. If they worked or studied part-time, perpetuation of the ongoing gender division was often rationalized in terms of being at home more:

Facilitator: So when it comes to say the division of household labour did anything change once [baby] came home?

Interviewee: Yeah, I probably do a little bit more now... because I'm only finishing uni off part time now that I've got [baby], I do the cleaning like once a week, floors and vacuum and all that kind of thing. So [father] won't do any of that really, unless I haven't done it for whatever reason... He will do the washing up every night, like pretty much I cook most of the time. We always used to share the cooking quite a lot. It's just easier for me to cook during the days and things like that when I'm home. So he will cook maybe at weekends or when he can, he likes to. But that's the rule, whoever cooks the other person does the washing up. So that's every day. He'll do washing, clothes washing, hang it out or bring them in, put them away, that kind of thing. That would be about it. [Partnered; casual; NCI]

Similarly, one of the Indigenous mothers:

Facilitator: [H]ow about your partner? Before you had [baby], how would you describe the split in who does what around the house?
Interviewee: I would have said it was probably more like before [baby] 60/40 and then after [baby] I'd say it was 80/20 now because I'm at home more. [Partnered; permanent; Indigenous]

Although there is little or no evidence in the interviews that PPL makes a difference to these patterns directly, PPL does increase the amount of leave taken by mothers, and therefore may extend and possibly further entrench the division of labour in which mothers remain responsible for the domestic sphere even after their return to paid employment. Some of the mothers interviewed in the post-PPL sample expressed concerns about these patterns developing in their own relationships, as shown in the following quotes from mothers who had returned to work:

My husband is getting better at helping. Especially because he's got that one day a week off. He will do the laundry and tidy up and clean up, so that helps. But the weekend that he's at work I'm pretty much stuck doing it all plus looking after the kids. [Now], because I'm back at work [full time], yeah, it's become like that [but] I have to tell him... Don't forget to do this, don't forget to do that. [Partnered; permanent; CALD]

He does more than he used to, because I have less time than I used to. So because I work primarily from home, I also get settled with most of the household duties simply because he's a lawyer and he works 12-hour days. So he only has two or three hours at home per day where he's not asleep. I was very happy to - because I had more time than him, I would pitch in more. But now, because I'm half mummying, half working, I have just as little time as he does. So he just has more - he takes on more of the domestic duties. Actually, since I've gone back to work, we've had to readjust again and re-juggle. [Partnered; self-employed; NCI]

When we first came home he was quite proactive in helping out. I think mainly because of how I was, I was a bit weak. So he was very helpful with preparing dinner, cleaning up, and doing bottles... Now down the track, he's a bit more lax. He doesn't, well he doesn't do as much unless I ask him to, yeah. I think I always did more, only because he has a long way to travel for work, so I was - I'm always home first. So I'm able to cook and clean a bit, and also I do the shopping and all that. So in that way, now it's just more I have to pick [baby] up as well, so it's I guess an additional dependent person. [Partnered; permanent; CALD]

What I feel at the moment is I'd like him to help more with the housework. He does vacuum a little bit, but he doesn't move anything, so there's a lot of dust in the corners and things. At least he does do that. He's always done his own washing, but what annoys me is it would be nice to have some help cleaning up in the kitchen after dinner. At the moment, I'm pretty much doing everything, so he comes home, he sits down, he watches TV and I'm still in there cleaning up until 9 o'clock. It's like, well, if we both did it together, it would be nice. It would be nice. So, that's where I feel it's changed and I do more of the housework and there's no help, particularly cleaning up. When I go to work, I don't feel like I should be still doing 100 per cent of the work. ... So, that's probably the main dynamics that's changed what I've noticed, just

that help around the house doesn't happen as much....It's probably happened gradually, but I've noticed it more after [second baby], I think. [Partnered; casual; NCI]

For a number of mothers, however, leave payments themselves signify an important move toward gender equity insofar as PLP can be seen as a wage for the work and time involved in infant care. For these mothers, PLP represents a small but important step that is more than symbolic, and may contribute to longer term cultural change. Several mothers drew out the significance of this aspect of PPL in comparison with the BB, noting in particular that BB is commonly perceived as money for things, whereas PLP is set up as a wage for care work.

Facilitator: what difference was there with having access to that, as opposed to say the Baby Bonus with [first child]?

Interviewee: I think money wise, it ended up being a bit better. But I think [you just feel] more appreciated when you're actually receiving money to look after the baby, per week. It's almost like a wage - or per fortnight, whatever it was. Compared to the Baby Bonus, where it seems like - in society, most people just assumed it was to buy a TV - not that we did. [Partnered; permanent; CALD]

A mother of three, an experienced business analyst made the following observations:

I think as a first pass, I think it's [PPL] worked very well. I found the baby bonus also very painless and pain free and quite simple process to go through. But I think it's a good thing to have it come from the employer in that there is a sense of payment for doing time. Because it's not like a holiday [laughs]. It is a fulltime job. Certainly with three. [Partnered; permanent; CALD]

This mother went on to speculate on further policy shifts that would be needed to achieve gender equity, most notably a great sharing of parenting leave by men. Her view was that in other countries where both parents have access to paid parenting leave:

...the workload doesn't all end up in terms of the parental responsibilities, don't end up just with one person, which is certainly what's happened in this household. Because it's me that takes that time off and then over time those all household responsibilities, admin, insurances, payments, bills, kids, cleaning, cooking, shopping it's all because I'm home, it's become mine. Whereas prior, when I was a fulltime employee at work it was shared - they were shared responsibilities. But yeah, that's changed. I think that if there was more flexibility to actually have shared the parental role, then I think that that would be a good thing. [Partnered; permanent; CALD]

For some mothers, PPL not only provided money, recognition and valuing of the work involved in the care of infants, but also financial independence from their partners for the duration of the payments.

For example:

Facilitator: How important was it for you to be getting that money?

Interviewee: We would have survived without it. I didn't have children to get the money. It wasn't part of it.....One of the major things I've found on my first pregnancy was going from being in fact the primary income earner, to not having any income coming in. Being paid by your spouse effectively - it's really hard to go from having your own money that you're spending and you're in control of, to having nothing. Sort of being this little kind of allowance. I think that ...where you're being paid to be a parent. Not just saying here's some cash to go and

buy a pram or a cot – I think that that aspect of it is an important thing.
[Partnered; permanent; CALD]

In sum, these in-depth interviews indicate that while mothers are at home on leave, they generally take on a greater responsibility for household tasks than they might have when in paid employment. Once they return to work, there may be some re-adjustment of the household division of labour, although the interview evidence suggests that mothers continue to do more of the household tasks and more of the childcare even after their return to work. Importantly, PPL provides payments for care work, and was appreciated as such by a number of mothers.

The in-depth interviews also demonstrate the processes by which mothers take on a greater share of household responsibilities while on parenting leave, and indicate that reverting to the pre-pregnancy division of labour when the mother returns to work is neither automatic nor easy, even when mothers are employed full time. To this extent, the interviews illustrate some of the reasons the survey data show no evidence that PPL influences the share of childcare, housework or total household work done by mothers and their partners about 12 months after the birth. The interviews do, however, raise some of the more subtle ways in which PPL may contribute to gender equity, through its wage aspects (fortnightly pay, generally through an employer) which signifies infant care as work, and the relative financial independence it offers mothers.

5.7 Conclusion

Overall the in-depth interview data aligns with the findings from the survey analyses in relation to the labour force participation of mothers, maternal and infant health and wellbeing, breastfeeding and gender equity. The in-depth interview data allows an examination of the mechanisms through which PPL may affect ultimate outcomes, and as such elaborates the processes involved, and provides particular insight into these processes for mothers of special policy interest.

The patterns of labour force participation shown in Chapter 2 are echoed in the in-depth interview samples. Mothers in the post-PPL in-depth interview sample took more leave than the mothers in the pre-PPL sample, and were also more likely to return to work by the time of interview. For the majority of mothers interviewed post-PPL, PPL had a substantial impact on extending the amount of time they were able to take on leave following the birth of a baby, and its impact was greatest for low income, self-employed, and single mothers. Mothers often explicitly linked their time on paid leave with reduced financial stress, and feeling less pressured and rushed. Some also reported a positive impact on their relationship quality.

The in-depth interviews provide strong support that PPL directly reduces mothers' stress and enhances their mental health; this arises directly from the reduced stress resulting from the secure, predictable income. The additional time at home made possible by PPL has positive impacts for the physical health and wellbeing of mothers and their babies through the following mechanisms:

- It gives mothers time to recover from childbirth, reduces their level of tiredness, and therefore appears to improve their physical wellbeing before returning to work.
- It reduces the levels of mothers' stress (financial and other), and therefore has a positive impact on their psychological wellbeing while on leave.
- It gives mothers more time to establish and maintain successful breastfeeding, and hence experience the positive health effects of breastfeeding for mothers and infants.
- It delays the entry of infants into formal childcare; formal childcare is associated with frequent episodes of illness amongst infants and, oftentimes, their parents and siblings.

The in-depth interviews demonstrate the processes by which mothers take on a greater share of household responsibilities while on parenting leave, and indicate that reverting to the pre-pregnancy division of labour when the mother returns to work is neither automatic nor easy, even when mothers are employed full time. To this extent, the interviews illustrate why the survey data show no evidence that PPL influences the share of childcare, housework or total household work done by mothers and their partners about 12 months after the birth. The interviews do, however, raise some of the more subtle ways in which PPL may contribute to gender equity, through its wage aspects (fortnightly pay, generally through an employer) which signifies infant care as work, and the relative financial independence it offers mothers.

6 Conclusion – Phase 4 PPL evaluation

This part of the report has focused on assessing the impact of the PPL scheme on three main policy aims. These are to:

1. Enhance the health and development of birth mothers and children;
2. Encourage women to continue to participate in the workforce; and
3. Promote equality between men and women, and the balance between work and family life.

PPL provides families with an income when an eligible working parent, usually the birth mother, takes time away from paid work to care for a newborn or recently adopted child. Paid at the rate of the National Minimum Wage for up to 18 weeks, PPL offers families a secure income during a crucial period. The evaluation has shown that much of the important impact of PPL occurs because of the financial security this income provides families, and the additional time it allows some mothers to remain at home with their newborns. These effects do vary depending on family circumstances. In some families, the security of income provided by PPL is especially important, while in others family income security is already assured. Overall, though, the net effect of PPL has been to increase the time mothers spend away from work following the birth of a child, increase the likelihood they return to work by the time their baby is 12 months old, and to significantly improve the wellbeing of many families in the crucial first year following the birth of a child.

6.1 Women's labour force participation

The PPL evaluation has found clear evidence that PPL has delayed working mothers' return to work up to about the time their babies reach six months of age. However, it also increased the likelihood that mothers would return to work by the time their babies were 12 months old. Thus, in a representative study sample of PPL eligible mothers, about 78 per cent of mothers remained away from paid work 18 weeks after the birth of their babies before PPL was introduced, compared to 85 per cent remaining away from paid work after the commencement of PPL. When babies were six months old, there was no difference in the proportion of mothers who had returned to work, with the majority (64 per cent) still not having returned. However, by the time babies were 12 months old most mothers had returned to work, though the proportion was higher following the introduction of PPL (73 per cent had returned after PPL was introduced in this sample, compared to 69 per cent before). These patterns are broadly consistent with international evidence, which shows that a relatively short period of statutory paid parental leave (around the duration of PPL) delays mothers' return to work, but also increases female labour supply by raising the chances that mothers will return to work over the longer term (OECD 2011: 140-141).

The impact of PPL in delaying mothers' return to work was not uniform. Instead, the effect was more substantial amongst mothers for whom PPL was a larger payment relative to their normal earnings, or a more predictable one. Thus, low income mothers showed a longer delay in return to work than high

income mothers in the first six months of their babies' lives. Similarly, mothers with no tertiary education and mothers who had been employed on casual contracts before the birth showed larger effects following the introduction of PPL. PPL had a particularly large effect in delaying the return to work of self-employed mothers, probably because the amount and security of the payment was especially salient for them.

Data from in-depth interviews strongly confirmed that whether PPL extended mothers' time away from work often depended on their financial situation. Mothers for whom PPL made an important financial contribution usually indicated that its availability affected their decisions about when to return to work. On the other hand, some mothers in families with higher incomes said that PPL did not affect their return to work decisions because the payment was not a significant financial contribution to their families.

The impact of the introduction of PPL on the employment of mothers who were single at the time of their babies' birth appears to have been somewhat larger than for other mothers. In particular, it seems likely that it produced a larger increase in the proportion of these mothers who returned to work by the time their babies were one year old. Many single mothers chose BB (which is no longer available) instead of PPL, and single mothers are, in general, less likely to return to work after a birth. For these reasons, it is difficult to be certain about the long-term effects of PPL on return to work behaviour in this group

PPL also made it significantly more likely that mothers would return to the same job and to the same job conditions that they had before their babies were born. Some 77 per cent of mothers who had returned in the post-PPL sample returned to the same job, compared to 73 percent in the pre-PPL matched sample. This effect was particularly marked amongst mothers with lower levels of formal education and, to a lesser extent, lower incomes, probably because of the greater salience of PPL for these groups. PPL's impact on returning to the same job conditions (pay, hours, etc.) was of similar magnitude, with the proportion of study sample mothers returning to the same job and same conditions rising from 28 per cent before PPL to 33 per cent after it was introduced.

6.2 Maternal and Child health and wellbeing

PPL has produced significant improvements in mothers' and babies' health and wellbeing. Though the average size of these effects is small, their impact on population health is likely to represent a considerable preventative health gain. The responses from in-depth interviews demonstrated these effects can be clearly connected to the improvement in financial security and the delay in return to work that are primary impacts of PPL.

Using a standard self-report measure of adult mental and physical health (SF-12), it was found that mothers' physical and mental health improved significantly following the introduction of PPL. The improvement was found consistently amongst majority groups, such as married and cohabiting mothers and mothers who had permanent jobs before their baby's birth. These results are very likely

due to the additional time and financial security available to some mothers following the introduction of PPL.

When mothers delay return to work, and are able to spend more time in caring for their newborns, stresses are reduced, contributing to improved mental health. Moreover, any improved financial security arising from PPL is likely to further reduce stresses. In the in-depth interviews, mothers who said they delayed their return to work because of the availability of PPL confirmed this effect. They indicated that PPL reduced the stresses on their families by providing them with more time with their babies, alleviating financial worries, and even reducing relationship tensions.

Improved physical health associated with PPL may occur for several reasons. A particularly important one is likely to arise when mothers delay placing their babies into formal childcare because PPL allows them to return to work later than they otherwise would have. Formal childcare tends to be associated with more frequent infectious illnesses amongst babies, and these illnesses are readily passed on to mothers. Hence, reduced use of childcare during the first year of a baby's life results in improved physical health for the mother. This pattern was clearly evident in the in-depth interviews, where mothers often talked of the impact of their child's entry into formal childcare on their own health. Beyond this effect, improved physical health may arise from a more general reduction in time pressure and stress associated with greater financial security and longer time at home with the baby. By reducing general time pressure on mothers, PPL may help them to be less vulnerable to illness and enhance their recovery when they do become ill. Again, in-depth interviews strongly supported this interpretation, indicating that additional time before returning to work could offer mothers a range of opportunities to enhance their own health.

There was also clear evidence that PPL led to modest improvement in indicators strongly associated with child health. While the length of breastfeeding is not a direct measure of a baby's health, it is widely accepted that breastfeeding leads to significant health benefits. Since breastfeeding cessation is strongly associated with return to work, it might be expected that PPL's effect of delaying return to work would also delay breastfeeding cessation. Rates of breastfeeding initiation were very high amongst Australian working mothers before PPL was introduced (around 94 per cent), and they remained at least at these levels following the introduction of PPL. More importantly, PPL did have a clear effect in delaying the cessation of breastfeeding. About 75 per cent of mothers were continuing to breastfeed their babies at 13 weeks after the birth, both before and after the introduction of PPL. However, after this point, the rate at which mothers ceased breastfeeding was lower following the introduction of PPL. Thus, the overall effect was to reduce the likelihood that mothers would cease breastfeeding at any time after about three months. Mothers' comments in the in-depth interviews highlighted the relationship between breastfeeding cessation and return to work, and also raised important issues about how workplaces may become more supportive of breastfeeding (thus possibly weakening the connection between return to work and breastfeeding cessation).

PPL's effect of delaying mothers' return to work, with resulting increase in breastfeeding duration and delay in first placing children in formal childcare, also appeared to translate into better health for babies, at least on the basis of mothers' reports of their baby's health. After the introduction of PPL, 41 per cent of mothers in the study sample said that their babies had experienced an illness of one week or more during their first year. This was a significant improvement on the 45 per cent reporting illness in the matched pre-PPL sample. Data from the in-depth interviews showed a strong connection between the entry of infants into formal childcare and reduced infant health, thus confirming the likelihood that any effect of PPL on infant health was at least partly related to delayed entry into formal childcare.

Overall, there was strong evidence of modest improvements in both mothers' and babies' health following the introduction of PPL. These improvements can be directly linked to the additional time to focus on caring for their new babies that PPL allows many working mothers, along with the significant enhancement to financial security it provides to some mothers.

6.3 Gender equity and work-life balance

Enhancement of gender equality was one of the expressed policy aims of the PPL scheme when it was first introduced. Full assessment of the effects of PPL on gender equity would require a substantially longer timeframe than was possible for this evaluation, since the effects of childbearing and caring responsibilities on household arrangements and mothers' careers unfold over many years.

One reason that both the household division of labour and mothers' workplace experience may take some time to be impacted by PPL is that change in both areas is highly mediated by cultural factors. Thus, it is well established that gender role attitudes are a key to any change in the sharing of housework. Similarly, the treatment of mothers at work, and the acceptability and takeup of flexible work arrangements, are heavily affected by workplace cultures which frame the perspectives of owners, managers and employees on these issues. Any effect PPL has on the share of household labour and on many employment experiences is likely to be through its impact on cultural expectations at home and in the workplace. Rapid change in these cultures is unlikely, and any effect PPL has on them is unlikely to occur immediately. It will therefore be important to monitor these issues over time.

Nevertheless, the evaluation was able to make an early assessment of these issues. It examined whether PPL had any impact on how mothers and their partners share household work, and on whether it impacted basic indicators of mother's work and career experience. Work-life balance – the ability of families to reconcile the demands of paid work and family commitments – is widely viewed as a serious challenge for Australian families, and the evaluation assessed whether PPL had resulted in change in a widely used work-life balance indicator.

There was no evidence of change in the sharing of household work 12 months after the birth of the baby. Mothers were asked about the number of hours of childcare and housework they and their partners did. Mothers did 71 per cent of childcare and 73 per cent of housework in analytic samples

before and after the introduction of PPL. Thus, the introduction of PPL did not decrease the tendency of mothers to do a significantly greater share of household work than their partners. Nor did mothers' delayed return to work have the effect of increasing their share of household work, at least in the longer term.

In-depth interviews did hint at how PPL might eventually contribute to cultural change that would translate into shifting expectations about women's and men's responsibilities in the work-life nexus. Thus, a few mothers emphasized that they saw PPL as a payment for the care they provided to their infants. These mothers saw PPL as placing a previously absent value on the care they provided, and as treating that care as valuable work.

In examining the impact of PPL on mothers' employment experience, the evaluation focused on three main issues which could be early indicators of cultural change in workplaces. First, was there any change in mothers' experience of support or problems at work during pregnancy? Second, was there any change in mothers' use of flexibility arrangements at work? Third, was there any shift in mothers' perceptions of their career prospects following the introduction of PPL? The results were mixed.

PPL had no effect on the likelihood that mothers would receive additional support during their pregnancy or that they would experience problems at work during pregnancy. Nor did PPL produce any practically significant change in mothers' use of flexibility arrangements.

However, a more direct measure of the impact of PPL on gender equity at work was provided by mothers' assessment of their career prospects on return to work. Though simple, this is an important indicator of mothers' future employment opportunities. The evaluation found that, on average, mothers viewed their career prospects more positively after PPL was introduced. In the study sample, some 32 per cent of post-PPL mothers saw their career prospects as worse on their return to work than they had been before they gave birth. Although a strikingly high proportion, this was still a significant improvement on the 38 per cent in the matched pre-PPL group who held the same view. The most likely explanation for this change lies in the tendency of PPL to increase the proportion of mothers who returned to work in the same jobs as they held before giving birth.

Finally, PPL produced a small, but significant, improvement in a leading indicator of work-life balance – the proportion of mothers who said they “often” or “almost always” felt rushed or pressed for time. Thus, the proportion of mothers in the study samples who felt this way fell from 57 per cent to 53 per cent following the introduction of PPL. This result is further confirmation that PPL reduces the time pressure on families in a crucial period, during the first year of a baby's life.

6.4 Conclusion

This report has focused on indications of progress towards the ‘ultimate’ outcomes of the introduction of PPL. PPL has provided many families with significant additional time and income security following a birth, allowing mothers' to remain at home with a new baby for longer while retaining secure,

predictable income. PPL has also resulted in some increase in labour force attachment amongst mothers. Together, these effects have produced significant progress towards the 'ultimate' outcomes that were the main expressed long-term policy aims when the PPL scheme was introduced.

To date, the main impacts of the scheme, as identified in the evaluation, have been:

Labour force participation and labour supply:

- A delay in mothers' return to work during the first six months after a birth, followed by a small increased likelihood that they will return by the baby's first birth.
- A small increase in employer retention of mothers when they return to work, as indicated by increased likelihood that mothers return to the same jobs and the same employment conditions.

Mothers' and babies' health and wellbeing

- Small improvements in mothers' average physical and mental health that can be associated with the additional time away from paid work, and reduced stress in early parenthood, that PPL allows.
- A small increase in the proportion of mothers who continue breastfeeding at all time-points after about six months after a birth, an effect that is likely to enhance infant health and wellbeing.
- A likely small improvement in infant health during the first year of life.

Gender equity and work-life balance

- A small improvement in mothers' perceptions of their career prospects on return to work, possibly due to enhanced career prospects associated with their increased likelihood of returning to the same job.
- A small improvement in work-life balance, as indicated by a small reduction in the proportion of mothers who felt rushed or pressed for time.

The effects of PPL on delaying return to work and increasing labour force attachment were clearly most pronounced amongst mothers with lower labour market capacity (lower formal education and income, or casually employed), and self-employed mothers. These mothers were most affected by the scheme because they were least likely to have had access to employer paid parental leave before PPL commenced, and because PPL provided higher replacement wages for them than other mothers. In line with this pattern, there were strong indications that the impact of PPL on mothers' and babies' health and wellbeing, and on work-life balance, were particularly likely to occur for these same groups.

The impact of PPL on these 'ultimate' outcomes will continue to unfold over many years into the future. Given the time frame of the evaluation, it was only possible to examine evidence of progress towards these outcomes during the first year after a birth. Future research will be needed to establish

whether these outcomes become more evident as time passes. In particular, two aspects of PPL's possible impact may take some time to become evident. These are:

- PPL's impact in enhancing child development – this was an important ultimate outcome of the scheme that can only be assessed as children mature.
- PPL's impact on outcomes that are heavily culturally mediated – these include the gendered division of household labour and women's treatment at work during pregnancy and when they return to work following the birth of a child.

Part C – DAPP Evaluation

Part C of this report presents the results of the DAPP evaluation. The report assesses whether DAPP has led to an increase in the time that fathers take off work following the birth of a child, and whether there is evidence that it has produced progress towards key policy goals of:

- Providing greater support for mothers following the birth of a child;
- Increasing opportunities for fathers to bond with their newborn;
- Increasing the share of caring responsibilities fathers take for their newborn.

The evaluation also examines employers' views of DAPP and their experiences with it.

7 DAPP and leave taking

Most Australian fathers take leave when their partners give birth, though not all do so. Indeed, recent estimates consistently suggest that about three quarters of fathers take leave related to a birth within the first six to 12 months of a child's life (Martin et al., 2014, see also Table 7.2 below). Those who do take leave use a variety of paid and unpaid forms of leave, including parental leave, recreation leave, long service leave and carer's leave. Dad and Partner Pay (DAPP) provides financial support to assist fathers and partners to take leave following a birth thereby increasing their opportunities to bond with their child, increase their participation in the care of their child, and enhance their ability to support their partner. This chapter begins by focusing on fathers' patterns of leave taking before the introduction of DAPP. It examines the types of leave fathers had access to, their use of the leave available to them, and factors affecting fathers' leave taking. Subsequent sections of the chapter describe the patterns of DAPP uptake, and assess the impact of the introduction of DAPP on these patterns.

7.1 Fathers' leave taking before DAPP

This section of the chapter uses data from a pre-DAPP online survey of working fathers whose partners had given birth in September 2012, along with data from in-depth interviews with some of the mothers and fathers from the same group. The sample of fathers contacted to participate in the survey came from families that had applied for BB or PPL. It is a random sample of these fathers, restricted to those who were working for pay at the time of the baby's birth and lived with the baby's mother around the time of birth; the sample excludes a small number of fathers in unusual circumstances such as multiple birth or adoptions (see Appendix 7 for details). Details of these surveys and interviews are provided in Chapter 1 (Sections 1.5.2) and in Appendix 7.³³

7.1.1 Fathers' leave eligibility

The online survey asked fathers about their leave eligibility and use. Fathers reported that they were eligible for a variety of types of leave to spend time with their newborn children; however fathers' eligibility for different types of leave varied significantly.

Data from the online survey (Table 7.1) shows that, before DAPP, almost one-third (31 per cent) of fathers reported that they were eligible for employer paid parental leave. This is consistent with findings from Phase 1 of the PPL evaluation, which showed 31 per cent of PPL-eligible mothers with working partners thought their partner had access to employer paid parental leave. Similarly, Phase 1 reported other studies showing rates of fathers' access to employer paid parental leave ranging between 25 and 45 per cent (Martin et al, 2012).

³³ All descriptive analyses of this pre-DAPP sample (i.e., those that do not involve comparison with the post-DAPP sample) use post-stratification weights designed to ensure that the proportion of fathers with partners who were BB or PPL recipients in the sample matches the proportions in the population. This weighting is necessary because response rates were higher from fathers whose partners had taken PPL (27 per cent) compared to those who had taken BB (20 per cent).

Before DAPP, about 20 per cent of fathers reported that they were eligible for unpaid parental leave. This is slightly lower than other surveys, which suggests awareness about statutory unpaid leave provisions may be variable. Phase 1 of the PPL evaluation found 29 per cent of PPL-eligible mothers thought their partners had access to statutory unpaid parental leave. Phase 1 noted that the Parental Leave in Australia Survey found 65 per cent of fathers would have access to statutory unpaid leave, as measured by those who would meet the requirement of 12 months continuous service with the same employer (Martin et al, 2012). In short, it seems likely that many fathers were not aware of their statutory unpaid parental leave entitlements.

In addition, the pre-DAPP online survey found:

- Most fathers (59 per cent) reported that they were eligible for paid annual leave;
- Only 6 per cent were eligible for long service leave;
- 19 per cent said they had access to other unpaid leave; and
- 13 per cent of fathers reported they were not eligible for any type of leave.

Eligibility for leave was closely linked to fathers' employment and contract type (Table 7.1). Permanent and fixed term employees were more often eligible for all types of leave compared with self-employed fathers and those on casual contracts, most notably in the case of paid leave, particularly paid annual leave and paid parental leave. For instance, 38 per cent of employees on permanent contracts were eligible for paid parental leave and 73 per cent were eligible for paid annual leave, compared with none and four per cent of casual workers respectively. Accordingly, the proportion of fathers not eligible for any type of leave was highest among employees on casual contracts (65 per cent), followed by the self-employed (54 per cent of those without employees and 41 per cent of the self-employed with employees). Very few employees on permanent and fixed-term contracts were ineligible for any leave (three and seven per cent respectively).

Table 7.1 Proportions of working fathers eligible for leave before DAPP

	All fathers ^a (per cent)	Employee permanent (per cent)	Employee fixed term contract (per cent)	Employee casual (per cent)	Self-employed with employees (per cent)	Self-employed without employees (per cent)
Paid parental/primary carer's leave	30.7	38.2	31.4	0.0	7.5	4.1
Unpaid parental leave	19.9	21.5	33.1	10.6	15.7	10.2
Other unpaid leave	19.1	17.1	23.4	21.8	14.2	33.5
Paid annual leave	58.5	72.8	48.1	3.7	24.2	4.1
Long service leave	6.3	7.9	2.3	0.0	2.7	1.2
Sick leave	17.9	22.3	19.3	1.4	1.3	1.2
Other paid leave	6.8	7.2	5.1	0.0	13.8	4.5
Not eligible for any leave	13.4	2.6	6.6	65.3	40.9	54.5
<i>N</i>	1115 [#]	829	57	50	59	105

^a Note: All fathers in the online survey were employed.

[#] Includes 15 respondents who did not specify their employment contract

Source: pre-DAPP online survey

7.1.2 Fathers' leave uptake

Most fathers took some leave around the birth of a child to be with the baby and/or mother (Table 7.2). Overall, three-quarters of fathers in the pre-DAPP sample took some kind of leave in the first six months after their baby was born, with around two-thirds of fathers (65 per cent) taking some form of paid leave (mainly paid annual leave). One in seven fathers (14 per cent) took some unpaid leave in the first six months after the birth of their baby. Virtually all of the fathers who took leave in the first six months after the birth of their baby took all or part of it within the first two months. One quarter of fathers did not take any leave following the birth of their baby. As Table 7.1 shows, about 13 per cent of fathers were not eligible for any paid or unpaid leave.

Table 7.2 Percentage of fathers who took leave to be with baby or mother (pre-DAPP)

	Age of baby at father's leave		
	0-2 months (per cent)	3-6 months (per cent)	0-6 months (per cent)
Took some leave	73.1	29.5	74.9
Took some paid leave	63.9	26.1	65.2
Paid parental leave	24.1	3.7	24.9
Annual leave	45.5	20.1	48.8
Sick leave	5.7	2.7	7.4
Long service leave	1.2	0.6	1.6
Other paid leave	3.9	1.1	4.4
Took some unpaid leave	12.6	4.0	13.8
Unpaid parental leave	5.9	1.1	6.4
Other unpaid leave	7.1	2.9	7.9

N=1115

Source: pre-DAPP online survey

7.1.3 Timing of fathers' leave taking

The survey data gives insights on the timing of leave taking. Sixty eight per cent of dads who took some leave started their leave on the day the baby was born/the next working day, while a further 23 per cent were already on leave when the baby was born.³⁴ Looking at leave taken in the first two months after the birth of the baby, 80 per cent of fathers took their leave in a single block, while a further 15 per cent took one longer block of leave plus a few extra days on another occasion.

7.1.4 Length of leave taken by fathers

Although most fathers took some leave in the first two months following the birth (27 per cent took no leave), they often took quite short leave (Table 7.3). Almost half of fathers (46 per cent) took two weeks or less of leave (16 per cent took up to one week, and 30 per cent took more than one week up to two weeks), while 27 per cent took more than two weeks. After the first two months, a sizeable minority of fathers took some further leave. As a result, 41 per cent of fathers took combined leave of over two weeks in the first six months after their baby was born.

Overall, before DAPP was introduced fathers took much more paid leave than unpaid leave. As Table 7.2 shows, nearly two thirds (64 per cent) of fathers took *paid* leave, while fathers rarely took *unpaid* leave (13 per cent did so). This pattern was evident at all leave lengths. For example, 36 per cent of fathers took more than two weeks of *paid* leave in the first six months after the birth of a baby, and a combined total of 54 per cent took more than one week of *paid* leave in this period. This compares

³⁴ Data from interviews indicate that some fathers began leave before the birth because they had pre-booked leave at the expected time of the birth, and were unable to change their leave timing when the birth was delayed.

with only five per cent of fathers who took over two weeks of *unpaid* leave in the first six months after the birth of a baby and a combined total of nine per cent who took more than a week of *unpaid* leave.

Comparing the two most commonly used forms of paid leave, dads tended to take longer periods of paid annual/holiday leave compared with time taken specifically as paid parental/primary carer's leave. For instance, 33 per cent of all fathers took more than a week of paid annual/holiday leave in the first two months after the birth of a baby, including 13 per cent who took more than 2 weeks of paid annual/holiday leave during this time. This compares with 13 per cent of fathers who took over a week of paid parental leave in the first two months, including three per cent who took more than two weeks. These differences largely reflect the much greater proportion of dads who were eligible for paid annual/holiday leave compared to paid parental/primary carer's leave. They may also be affected by fathers' annual leave entitlements being greater than their paid parental/primary carer's leave entitlement.

Table 7.3 Duration of leave taken by fathers after the birth of a baby (pre-DAPP)

	All leave (per cent)	All paid leave (per cent)	All unpaid leave (per cent)	Paid parental leave (per cent)	Paid Annual/ Holiday leave (per cent)
0-2 months					
None taken	27.0	36.3	87.5	75.9	54.6
Up to 1 week	15.9	14.5	4.4	11.6	12.8
> 1 week, up to 2 weeks	30.1	26.7	5.1	9.9	19.6
More than 2 weeks	27.0	22.6	3.0	2.6	13.0
3-6 Months					
None taken	70.7	74.1	96.1	96.5	80.0
Up to 1 week	10.6	10.3	1.0	1.9	7.5
> 1 week, up to 2 weeks	9.5	8.0	1.7	0.7	6.3
More than 2 weeks	9.2	7.7	1.3	0.9	6.3
Total first 6 months					
None taken	25.3	35.0	86.4	75.3	51.3
Up to 1 week	13.2	11.4	4.4	11.1	8.2
> 1 week, up to 2 weeks	20.4	18.0	4.3	9.1	15.6
More than 2 weeks	41.0	35.6	4.9	4.5	24.9

N=1115

Source: pre-DAPP online survey

7.1.5 Factors affecting fathers' leave taking – reasons for taking leave

In-depth interviews with pre- and post-DAPP samples of fathers and mothers revealed that there were two primary reasons fathers take leave following a birth. First, all families experience increased needs for care and support following a birth. These needs relate to supporting the mother's recovery from the

birth, the care needs of the new baby, and the care needs of other children (or other family members) that arise when mothers focus on their own recovery and the demands of a new baby. Fathers often said that taking leave helped them to contribute to providing extra care and support to their partner, new baby, and other children. Secondly, many fathers were keen to be as involved as possible with their baby, engaging with it and nurturing it as much as they could. These fathers sought to spend as much time as possible, usually as early as possible, with their newborn, and taking leave was often an important part of their effort. The interviews showed that both these two reasons lay behind many fathers' decisions about leave taking, though for some fathers only one of them was influential.

7.1.5.1 Supporting the mother and caring for other children

Following a birth, mothers experience a range of challenges, including recovery from the birth, adjusting to and learning how to feed and care for their newborn, lack of sleep, and emotional adjustment. The significance of these challenges is indicated by the fact that the first 12 months following the birth of a child are recognized as a time of increased risk of poor physical, psychological and social health outcomes for mothers (Eberhard-Gran et al, 2010; Letourneau et al 2012; Walsh, 2011; Brodribb et al 2013; WHO 2006). The needs of new mothers are multifaceted, and may include: physical assistance with a range of practical tasks; assistance with other family responsibilities including older children; social, emotional and practical support (Hjalmhult et al, 2012; Dennis et al, 2007; Zadoroznyj, Benoit and Berry, 2012).

The care responsibilities of families in the immediate post-natal period are increased when hospital stays following a birth are short, and when mothers give birth by caesarean section. The length of time women spend in hospital following the birth of a child in Australia has decreased substantially, from a 5 to 7 day norm in the mid 1990's to the current average of two days for a non-instrumental birth and four days following caesarean section (Brown et al, 2009; Li et al 2013). Post-birth care in hospital gives new mothers time to rest and recover from the birth, bond with their new baby, establish infant feeding routines with the support of trained staff, become informed about community support services, and learn practical parenting skills. During this time mothers are also relieved of domestic responsibilities such as cooking, cleaning, laundry and the care of other children. Following discharge from hospitals, mothers require support to enable them to rest, recover from the birth, bond with their infants and establish infant feeding, particularly if they are breastfeeding since breastfeeding is not fully established until the third or later day following the birth (Walsh, 2011; Sheehan, Schmied and Barclay, 2010). Forms of support may include practical support with domestic chores, meal preparation, shopping and laundry; social and emotional support; and assistance with older children. One third of Australian mothers now give birth by caesarean section (Li et al. 2013). Women who gave birth through a Caesarean section have additional support needs as they are often advised not to lift or drive for a period of up to six weeks following the birth, and face all the risks associated with surgical procedures.

In-depth interviews showed that mothers' needs are one of the primary reasons fathers say they take leave around the birth of a child. The amount of support a mother needs varies according to her

individual circumstances, including any pregnancy and birth complications, the number of other children in the family and their ages, the mother's own confidence in caring for the infant, and the infant's health and the occurrence of any infant feeding complications. Fathers often said that they took leave to support their partners in relation to these needs. The extent to which mothers' needs motivated fathers to take leave was also influenced by contextual factors such as the support available from extended family and the father's work situation. The impact of these contextual factors is described below (Section 7.1.6).

The impact of a caesarean birth on mothers' needs and fathers' leave taking provides a clear example of how a mother's increased needs for support affected the leave fathers took. Fathers whose partners had caesarean births talked about their partners' inability to undertake some activities, such as lifting or driving, in the early weeks following a birth. They said that they took leave to provide their partners with the additional help they needed. In some cases, this began before the mother and baby left hospital. One mother said that her partner stayed at the hospital with her because "obviously, having had a caesar, I couldn't jump out of bed" (Father: 35-39 year old, professional/managerial, self-employed; NCI). Fathers and mothers also referred to fathers doing more housework, lifting or driving after the mother had returned home because of a caesarean birth. One father who took two weeks leave from his full-time professional job said "I mainly did the household work because of the actual caesar itself" (Father, 30-34 year old, professional/managerial, permanent, medium private sector, NCI). Parents also talked about the mother avoiding lifting any older children for the first few weeks following a caesarean birth. As one mother of a toddler explained, her husband focused on caring for the older child during his leave:

...particularly because I'd had the caesar I couldn't lift him or do anything. So [partner] looked after [Child - boy - 2.5 years] mostly. Fed him, bathed him, did all those things. (35-39 year old, professional/managerial, permanent, large, private, NCI)

One father who had three children explained that the main reason he took unusually long leave (six weeks) was to support his wife following a caesarean section:

Mainly probably because of the caesar - just that recovery time. So I just wanted to be able to help out and ensure there was no ramifications. If my wife had to lift anything, for instance. (35-39 year old, professional/managerial, permanent, large private sector; NCI)

Fathers also cared for their babies while they were on leave, and most who took leave described considerable involvement in the care of their infant (for further details, see below, section 8.2). The exact activities in which fathers were involved varied, depending on a variety of factors. In the early weeks, when fathers took most leave, whether the baby was breastfed was one important source of variation in what fathers did. But they were involved in most infant care tasks. For example, the father above described his role during the time he was on leave:

Interviewee: We actually chose from about a week of breastfeeding that we would stop the breastfeeding. So I was able to help out in that regard.
Facilitator: Yeah, okay, so feeding and...

Interviewee: Preparing bottles - yeah. Bathing, so that was my - anything to do with lifting really. Sharing settling as well.

Chapter 8 provides more detail about fathers' involvement in infant care in general.

Additional support was also needed where a newborn was unwell, and was further complicated if the baby remained in hospital after the mother was discharged. For example, one father took more time off work than he had planned because his baby had serious jaundice and needed to be in hospital in another city, which was approximately two hours' drive away. He remained at home to look after his other children while his wife went to be with the baby in the hospital:

[Baby] had to go back into hospital because he had bad jaundice and that. So I was juggling the kids here at home and then going down there. (35-39 year old, professional/managerial, permanent, public sector, NCI)

Another factor shaping mothers' need for support was whether the baby was the family's first child or whether there were older siblings. The presence of other young children in the household generates more parenting work and fathers' role in their care may be very important in the first few weeks following the birth. One father who took two weeks leave explained that this time was important:

...especially when you've got two other children, so I could take them to kindergarten, I could help out much more around the house, everything, cooking and making the house nice for my wife I could help run the whole place and give my wife most of the time off. (30-34 year old, professional/managerial, permanent, private, NCI)

Where older children have high needs for care, these demands can be significantly increased. A father of three explained that he took 16 weeks leave because his second daughter had a significant disability and required constant supervision. His role was to:

Look after the kids while she attended to [baby], you know? I mean it was easier if I looked after the other two and got them to school and that kind of stuff. Yes, I would say mainly [I took leave] because of [older child 2]. You know, someone needs to keep an eye on her at all times so I mean when [mother]'s got her hands full I just needed to be there on call, just in case. (30-34 year old, self-employed contractor, NCI)

The presence of multiple children also makes life more challenging when a mother has a caesarean delivery. As another father of three children explained, his wife needed him to care for the older children following her caesarean:

...my kids were born through caesarean so I think the period to recover is quite significant. So during that time I did help quite a lot...the challenge was - for me was to look after the other two kids, so take them - take [older child 1, 6 years] to school, look after [older child 2, 2 years] and pick [older child 1, 6 years], go to the hospital to see mum and the baby, cook for the kids. (35-39 year old, professional/managerial, permanent, large private, CALD)

At the same time, many fathers explained that caring for second and subsequent babies was easier in the early months than it had been for the first birth. A father who only took one day of leave (employer paid paternity leave) following the birth of a second child explained that it was "chalk and cheese between having the two". He elaborated:

[with first baby] we sort of stressed out a little bit when every time you hear a noise with [first child] which had a knock on effect and we couldn't get her to settle and then we ended up going to a sleep clinic with [first child] because we really struggled...But then with the second child you're a little bit more relaxed and that's how we are with [baby]. We're a little bit more relaxed. (30-34 year old, professional/managerial, permanent, large private, NCI)

In summary, all families experience a significant increase in needs for care and support when a new baby is born, partly due to the care needs of the baby and partly arising from the support mothers need after a birth. Families' needs do vary, and depend on factors including parents' confidence, the presence of other children in the household, and the health of both the mother and the infant.

7.1.5.2 Involved, engaged fatherhood

In recent decades commentators have increasingly declared the arrival of a new era of the involved and nurturing father (Coltart and Henwood, 2012; Eerola and Huttunen, 2011; Finn and Henwood, 2009). However, research also shows that not all fathers see themselves in ways that fit with this new model of fathering (Eerola and Huttunen, 2011). In both the pre-DAPP and post-DAPP in-depth interviews, it was clear that many fathers wanted to be as involved as possible with their infant, engaging with it and nurturing it whenever they could, and they aimed to invest significant time in getting to know their new child. Other men preferred what has been called a 'new traditional' fathering role, having some involvement in caring for their children but remaining a 'helper' rather than an 'active co-parent' (Rehel, 2013).

Men who wanted to be engaged with their newborn and involved in caring for it in the immediate post-birth period were much more likely to take longer leave, although financial and workplace factors sometimes placed constraints on the length of leave they took. A father who worked on a contract basis and took two weeks of leave around the birth expressed it simply: "I can't see the point in having kids and not being involved. I'm probably not your stereotypical father though." (40-45 year old, non-professional/managerial, small, private, NCI).

How strongly men wished to be active, nurturing fathers often emerged in discussions about leave. When asked whether or not he would have taken DAPP if it had been available at the time, one father in the pre-DAPP sample talked about both his desire to spend time with his new daughter and to support his partner:

- Interviewee: Certainly, yep. Yeah absolutely. I'd be happy to go leave without pay for that time, because that special time in my life is not at all determined by a number of cash. I just loved it, like when [baby] was born that three weeks that I had immediately after were the best three weeks of my life. I spent great time with [older child], one on one. I spent lots of time with my new daughter and yeah, money's not an issue at that time...
- Interviewer: So what do you think was the biggest advantage of taking those early weeks?
- Interviewee: To be able to help [mother], but also emotionally it's just a great experience. I went back to work the next week and was just thinking about her and what's happening at home the whole time and wishing I was there to be amongst it. (30-34 year old professional/managerial, permanent, large private, NCI)

However, for some men staying at home is not an attractive proposition. As one father who took less than two weeks leave explained:

Yeah I don't think I could handle being at home fulltime doing it so it works out well for me and I think she - [mother] would much rather be fulltime at home than at work. I go home and play with her for a few hours and I've - it's already getting tough to constantly do that. So if I had to do it all day and keep her entertained like [mother] does I think it'd be harder than coming into work. (25-29 year old, professional/managerial, permanent, medium private; NCI)

Very similarly, a father who took one week of leave explained that he had no desire to take longer:

I'm a very busy person. I get bored very easy staying home. Even when we go away holidaying if I'm just sitting in one spot, sitting down doing something I get bored in a day or two. A week for me was enough, but I know talking to a lot of other blokes that a week would be too soon. (30-34 year old, non-professional/managerial, permanent, small, private, NCI)

Overall, in-depth interviews showed that if men placed high value on being involved in hands on caring and nurturing, they were strongly motivated to take leave around the time of a birth. These fathers wanted to be closely involved and engaged with their newborn by spending focused, uninterrupted time with the baby. They generally thought they needed leave to be able to achieve this. In contrast, some men were inclined to leave close, constant and nurturing involvement with the newborn to its mother. For these men, taking leave around the time of the birth had little effect on their capacity to become the fathers they hoped to be, and so they were not strongly motivated to take leave.

7.1.6 Factors affecting fathers' leave taking – family and work context

The needs of mothers and infants, and the value men place on being involved, nurturing fathers, may impel fathers to seek leave when a new baby is born. However, whether these factors lead to a father actually taking leave depends on his family and workplace context. Mothers' and infants' need for care may be met by people other than the father, particularly extended family members, but including paid workers. In addition, fathers' ability and willingness to take leave may be affected by aspects of their employment contracts and jobs, such as the forms and amount of leave available to them, and the workplace culture and job demands. This section shows how these factors mediate the role of the two primary motivators in fathers' decisions about whether to take leave.

7.1.6.1 Family support

Pre- and post-DAPP in-depth interviews revealed that when a new baby is born, families often use significant support from extended family to satisfy the increased needs they experience. In most cases family support comes from the mothers or sisters of the newborn's parents, though some families reported relying on the parents' fathers or other relatives. This support from extended family may reduce the need fathers feel to provide extra care and support to their partners, babies and other children. It may therefore be important in decisions about what leave fathers take, and when.

In some families, support from extended family had removed any demand on the father to provide support and care to the mother. More commonly, however, families use assistance from extended family in conjunction with the support fathers can provide when they are on leave to meet their overall care needs. This involves mobilizing care from various sources to ensure that mothers and infants receive the care they need. One father explained how he and his wife timed his leave and a visit from extended family so that his wife had support for the first 4 to 5 weeks following the birth. He explained:

- Interviewee: Then it became [after he finished his 3 weeks of leave] I'm going to work for a break now, this is good. I might just - no, we balanced it with getting [mother]'s dad up to help for a week or two there as well.
- Facilitator: Okay, so then once you went back to work her dad came up and helped out as well?
- Interviewee: Yep and we moved [older child] into day care three days a week to help out as well. (30-34 year old professional/managerial, permanent, large private, NCI)

Often, extended family provided support immediately following the birth, and fathers would delay leave taking until this support was reduced. This was particularly common when extended family came to live during the immediate post-birth period. As one dad who postponed his leave until the baby was eight weeks old explained:

- Facilitator: So you didn't take any leave until [mother] came home?
- Interviewee: Yes, that's right.... I just didn't see the sense of being home with her not being home. After we were here for the four days we had the mother-in-law here, so it was just - we all couldn't hold the baby at once [laughs].
- Facilitator: So you didn't think you were needed for support because [mother] had her mum here.
- Interviewee: No, because ... the mother-in-law, she went home - [baby] was about eight weeks old. That was when I was thinking that I would have been better off having time here when she was on her own.... I took two weeks holiday and spent with her...
- Facilitator: So you took those two weeks around the time that [mother]'s mum went home and [baby] was about eight weeks old?
- Interviewee: Yes. It worked out nice. (55-59 year old, non-professional/managerial, permanent, large private, CALD)

The availability of extended family support could also be used to modify the need for fathers to be at home when additional care needs were created by such events as a caesarean birth. Thus, a father who had multiple children, and whose partner had a caesarean section, returned to work after nine days (having taken five work days off). He explained:

- Interviewee: The one week that I took was sufficient because after that week her mother came over, so there was someone to help.
- Facilitator: She would have been scheduled to come over from the scheduled caesarean date, which is why she wasn't there for that first week.
- Interviewee: For the first week, yeah. If there was a need for me to be at home for further than that one week, I would have taken annual leave and stayed at home with the kids and the family. (30-34 year old, professional/managerial, permanent, large, private, CALD)

In summary, the extent to which fathers are motivated to take leave by the family's support needs often depends on their access to support from extended family. Many families use support from

extended family to reduce the need for fathers to take leave to provide support for the new mother and baby.

7.1.6.2 Leave taking and employment contract

International research on fathers' leave taking consistently shows that men are generally unwilling to take unpaid leave (Haas and Rostgaard 2011, Moss 2013). This is also reflected in the online survey findings above which showed the majority (86 per cent) of fathers did not take any unpaid leave in the first six months after the birth. Consistent with this, the interview data showed that, before DAPP was introduced, fathers' access to paid leave funded by employers was a very important factor in their leave taking patterns around the birth of a child. Fathers generally only took a few days leave if they had no access to paid leave, and usually only took longer leave when they were eligible for paid leave that provided their normal full pay.

The pre-DAPP in-depth interviews conformed well with the results from the online survey. In the pre-DAPP interview sample, fathers with no access to paid leave generally took either no leave or very short periods of leave (less than two weeks), though a few did take longer leave. Fathers with access to paid leave took longer leave, though a small number chose to take one week or less. This suggests that access to *paid leave* is a central factor in leave taking around the birth, though employment security is also a factor (notably employment security related to employment contract).

As the online survey results showed, fathers' eligibility for employer paid leave is strongly correlated with their employment contract (Table 7.1). Thus, self-employed fathers and those employed on casual contracts are much less likely to have access to employer paid leave than those employed on permanent or fixed-term contracts. These differences mean that, before DAPP, fathers' leave taking around a birth was strongly related to their employment contracts, a pattern that was clear in the interview data.

Self-employed fathers interviewed in the pre-DAPP sample generally took very short periods of leave unless their partners had a high need for support from them. For most self-employed fathers the key barrier to taking leave was the financial penalty if they stopped working. The obvious and immediate financial penalty was the loss of income during the period they were absent from work. In addition, these fathers feared that closing their businesses for more than a few days made them vulnerable to the loss of customers or contracts. For example, a self-employed father who happened to have no work for two weeks around the birth reflected that he would have given up work to be with his wife but he nevertheless would have worried about the long term impact of this. He explained:

...I'm confident I would have done [taken time off work] and I did it with [older child], but it is difficult because the work can't be replaced. It's gone, and it's gone ... if I miss a [job], and somebody else does it, that's it, it's gone. There's no money and plus there are also professional risks associated in [city] with - it's a small town with a small number of [experts in his field]. I protect the jobs that I have fairly vigilantly. While a lot of employers are loyal, it's always the risk that if you're not there, someone is, and...it just – favour moves pretty quickly

around here so. (35-39 year old, professional/managerial, self-employed / casual, public, medium, NCI)

However, two of the self-employed fathers did not face these barriers. These fathers worked in family businesses that provided them with paid leave and had the ability to 'back-fill' their position. These two fathers explained that without access to these conditions they could not have afforded to take the three weeks of leave that they did. In the words of one of the two:

- Interviewee: I did get paid my usual wage for while I was on leave. Work, it's fairly flexible, the guys knew that I can't afford to just take three weeks off without pay and...
- Facilitator: So you just got paid your regular salary?
- Interviewee: Yeah. It was probably structured more as like a favour from the business more than anything else. I did take part of my annual leave. I think I took - what actually happened was we said well, you get three weeks paternity leave, just to put a name on it. I had taken holidays previously in that year and I forfeited the last two weeks of my annual leave. You could push for it as annual leave plus an extra week, but we're not really that focused on that side of things, like if someone needs a week off, they take a week off, it's not the end of the world because we can pick up the slack. It's not hugely disruptive to the business. (30-34 year old, non-professional/managerial, small, private, NCI)

Several self-employed fathers took no formal leave, though in one case the father did not work for approximately two weeks because the birth coincided with a regular period that work was not available.

Some self-employed men who took longer unpaid periods of leave had families with high support needs. One was a barrister who had no support from extended family and a financial situation that made it possible for him and his wife to take a year off. As he explained:

- Interviewee: this is just my guess but I think for a lot of the men, even if they wanted to [take a year off], they couldn't financially.
- Facilitator: Okay. So you guys were fortunate that that wasn't a constraining factor.
- Interviewee: No. It cost a lot but it was possible.

The other father had an older child with a significant disability.

In the pre-DAPP period, several fathers employed on fixed term or casual contracts faced financial constraints similar to the self-employed when considering leave just after birth. They had no access to paid leave, and like the self-employed they said this significantly constrained their ability to take leave. These workers usually faced significant employment insecurity when they took leave. One father working on contract only took a few days leave because his employer refused to allow contractors to take more leave than this at any one time. Another took three weeks but reported that;

To get that three weeks off work was - I thought I was actually almost going to lose my job over it...Because you're a contractor. ...I haven't had a day off since then and I've worked all public holidays. All public holidays. (30-34 year old, non-professional/managerial, contract, small, private, CALD)

Another father, a chef who worked on variable hours contracts, was keen to be as involved with his baby as possible. He also wanted to spend time on leave to support his partner, given her needs and the fact that no extended family were able to be present to help at the time of the birth. He organised to have himself rostered off for two weeks at the time of the birth, with the result that he did not earn during this period.

In the pre-DAPP sample, virtually all fathers employed on a permanent basis had some access to employer paid leave at the time of the birth, and they took some leave unless they perceived the workplace to be unsupportive. Annual leave was the most common type of leave entitlement. Fewer fathers had access to carer's leave or a dedicated paternity leave. Before DAPP, permanently employed fathers who had access to paid paternity leave tended to take it unless the workplace culture was seen as unsupportive (see below) or they only had a small amount of leave accrued which they wished to keep in case of future illness. In a few cases fathers used carers' leave which came out of their sick leave entitlement and in a couple of cases fathers instigated this even though it was not the workplace norm. As one dad explained:

I wasn't really quite sure how to broach the leave and how to manage that until after I returned and then I made a claim for sick leave because I knew I had a lot of accrued sick leave, but that seemed to be something which the employer - well my direct manager wasn't quite sure about whether or not that's acceptable and I know other people have taken annual leave. I certainly had enough annual leave to take a few weeks, but I had hundreds of hours of sick leave that I've accrued over the years and never had. So I requested for sick leave and there were some internal discussions and then they eventually approved it without any questions asked basically. I think they just asked for a note from the midwife just to say that I was required for home duties or something like that during those two weeks. I just took two weeks off... one guy I know he'd taken annual leave and didn't really even consider taking - because I didn't see it as sick leave, I saw it as more a support like carer's leave. So I know a lot of the guys with young families are always taking carer's leave so I thought that's quite legitimate. They were a bit surprised that I wasn't taking annual leave, but at the same time they couldn't see a reason why I couldn't use my sick leave. (35-39 year old, professional/managerial, permanent, large private, NCI)

The in-depth interviews indicated that fathers only used annual leave where they had no access to paid paternity leave or carer's leave. Pre-DAPP, fathers who had to use up their entire annual leave entitlement around the birth often expressed regret that they were not able to save it for an actual holiday, since they did not view their time at home following the birth as holiday, and that they went back to work with no leave "up their sleeve". This concern often emerged when fathers were asked if they would have taken DAPP if it had been available. A father of three who had taken six weeks leave explained that he would have taken DAPP because:

Interviewee: I guess now I've had to wait so long before I've accrued more leave. I would have probably kept some leave up my sleeve and probably substituted that certainly...Whereas I didn't really have any other options before. If there was certainly another option there I think that - yeah I guess at the end of the six weeks, knowing I had no leave at all - had to accrue it - that was a bit of a...
Facilitator: Scary prospect?
Interviewee: It was, yeah for both of us.
Facilitator: Yes, so you essentially came back to work with zero leave available to...

Interviewee: In arrears actually...we have an option where we can actually salary package two extra weeks leave - which I've taken advantage of. So instead of the traditional four, I've got six weeks leave. (35-39 year old professional/managerial, permanent, large, private, NCI)

Similarly another dad who used all his accrued leave when he took three weeks off work around the birth reflected that he would have taken two weeks of DAPP if it had been available:

I probably would have done the two weeks at minimum pay [DAPP] and then I'd probably take two weeks annual leave and make it four weeks. I would have kept - because I've been - I keep going back to zero ever since we've had the baby. I just can't get any extra leave going. So I would have taken four weeks, two and two and I sort of planned for the baby a bit. So just put a little bit of it in the bank for - so the fact I'd get paid a little bit less probably wouldn't have been too bad. You're haemorrhaging money as it is when you have a baby. (30-34 year old professional/managerial, permanent, large private, NCI)

7.1.6.3 Workplace cultures and work demands

Existing research shows that workplace culture has a significant impact on fathers' leave taking around the birth of a child (e.g., Bygren and Duvander 2006; Haas et al. 2002). In the pre-DAPP in-depth interviews, fathers who would have preferred to have taken one to three weeks leave (the most common length of leave) were unwilling to push against an unsupportive workplace culture (or a culture they felt might disapprove) in order to gain these short periods of leave. However, fathers who were seeking longer periods of leave (more than two months) were willing to resist non-supportive workplace cultures that disapproved of their leave taking behaviour. For instance a professional who sought to take four months unpaid leave and to receive PPL reported that his employer was very unsupportive but that he persevered in his claim nevertheless.

Interviewee: That's right and then - they're a very traditional firm in the sense that the Chairman's a bit of a dinosaur. Bit of a dinosaur is understatement. The - I guess the expectation was that you'd take some time off and then you'd go back to work, business as usual.

Facilitator: So when you said he's a bit of a dinosaur, what...

Interviewee: He sat me down about a month before saying I was really disappointed that you're taking this parental leave, I think it would have been - he's also quite a bit of a bully. So he didn't quite get - he doesn't quite get that relation. I said, well quite frankly I - we made a financial decision and there were certain other aspects that meant staying at home - me staying at home was better for the family.

Facilitator: So I take it from that that it wasn't that common inside the firm...

Interviewee: No, no, no.

Facilitator: So would you say that he accepted the arrangement with some reluctance? Or...

Interviewee: Yes, yes. When I had all these discussions with other people...my response when other people would tell me he'd had that discussion with them. I'd say, well it's the law. So I didn't really give him much of an option. (30-34 year old, permanent, medium private, NCI)

Fathers quite often anticipated the response of their employer to a birth-related leave, possibly miscalculating the employer's response. In some cases fathers felt that their employer would view leave taking as unnecessary unless their wife or child needed additional support, but this message was never explicitly articulated by the employer. For instance one pre-DAPP father worked for a large

organisation that offered a week of paternity leave, long service leave and annual leave, but he took no leave around the birth. Instead he postponed his leave until eight weeks after the birth at which time his mother in-law returned back to her home. Explaining that he had planned to take leave only when he was really needed, he said:

The company's happy with that. In the same side they look at things like you didn't waste time when he could have, so they think he's been smart enough with his time, so...A little bit of responsibility. They look at that sort of thing so... (55-59 year old, non-professional/managerial, permanent, large private, CALD)

Fathers sometimes received mixed messages about leave taking following a birth. This was particularly common amongst men in professional and managerial positions: their managers may have been supportive of them taking leave, but the quantity of work and the perception that they were indispensable made it hard for them to actually take this leave. For example, one father who only took a single day of leave (employer paid paternity leave) described his supervisor as supportive, but at the same time explained that it was hard to take time off because work was so busy. In this case the family support needs were relatively low as the birth went well and his in-laws provided significant support. He explained his rationale for taking one day as follows:

- Interviewee: ...just with what we were doing at the time with the work as well. It was just balancing it all out and sort of [baby] being our second child it seemed a bit more easier as well.
- Facilitator: Okay, a bit easier, you need the routine a bit more. Can you tell me about that when you were saying there were other things happening at work at the time and what was happening at work that worked best?
- Interviewee: Look just lots of meetings with the customer, finishing packages, drawing packages, supply meetings. There was a lot going on. (30-34 year old, professional/managerial, permanent, large private, NCI)

Quite similarly, another father said he took a total of seven days of paid paternity leave in three separate periods, with only three of these being full days of leave. The other four days were taken as part days, in which he worked at home for half a day and was on leave for the other half. While this father reported that his workplace was supportive of men taking leave, it nevertheless was very challenging for him to actually take this leave. Ultimately he did not use his full entitlement to two weeks of paid paternity leave (30-34 year old professional/managerial, permanent, large private,).

In contrast a father whose employer was supportive and who had a strong desire to be actively involved with his newborn took three weeks of leave. His employer reacted to the news that he wanted to take leave by saying: "it happens all the time and very congratulatory and all that and said, take as much leave as you need to and they were very flexible around the dates". He took three weeks leave. The father felt that three weeks was a good length of time because:

...it was a bit of a compromise, in that I know what goes on at work and if I take more than three weeks then there's a significant disruption to my business. I've got a bonus potential to work towards and therefore I'm taking that away. I thought three weeks was a good compromise. Some people at work thought three weeks was a long time for me to take away. But I was very comfortable taking three weeks. (30-34 year old professional/managerial, permanent, large private, NCI)

Those professional men who took two or more weeks leave prior to the introduction of DAPP all mentioned that their manager explicitly encouraged leave taking, and explicitly encouraged them not to work while on leave. For example a professional father who took three and a half weeks, which was the maximum paid leave that he could access, explained that fathers were encouraged to do no work while on leave:

Facilitator: Yes. So you didn't have to tap into work while you were off?
Interviewee: No. They've sort of got the opposite motto - just do a proper handover before you leave and don't answer the phone while you're away basically. So family - it's good to have proper family lives. Just do the proper handover and make sure whoever's taking it over knows what's going on. But - I mean, they're the responsible person. (30-34 year old, permanent, large private, NCI)

Some fathers thought that their workplace expected them as fathers to take much shorter periods of leave than mothers. One father worked in a state government agency where most of his colleagues were women, who generally took long maternity leave following a birth and worked part-time when they returned to work. He felt that it would be seen as "unrealistic" for him to take the three months he desired to take. He took three weeks leave and then worked a nine day fortnight for two months but would have preferred to take longer leave. He explained:

Facilitator: What would have been your ideal?
Interviewee: Probably would have been closer to three months.
Facilitator: Of full time?
Interviewee: Well, yeah, ideally but I know that's not realistic. ...Well, I think it's just the matter of - I suppose, just in the current expectations of our society, that seems - that would probably be viewed as excessive for a father to take that. (35-39 year old, professional/managerial, permanent, large state, NCI)

In summary, workplace culture does not determine whether or not a man takes leave. Instead workplace culture influences fathers' ability to take leave when their family's support needs or their desire to be an active co-parent who is very engaged in nurturing the baby motivates them to take leave. When men very strongly identify as active and involved fathers or their family has a high need for them to be at home, or where both conditions are present, they are likely to push against unsupportive work cultures. In contrast, when neither of these motivations is present, an unsupportive work culture appears to have a much stronger impact on men's ultimate decisions about leave around the birth.

7.2 The introduction of DAPP

This section describes the uptake of DAPP and the factors related to whether fathers took DAPP or not. This section of the chapter uses data from a post-DAPP online survey of a sample of men whose partners had given birth in April 2013, along with data from in-depth interviews with other mothers and fathers from the same group. The sample of fathers contacted to participate in the survey was drawn from applicants for DAPP, BB or PPL. It is a random sample of fathers who were working for pay at the time of the baby's birth and lived with the baby's mother around the time of birth; the sample excludes certain specific cases such as multiple birth or adoptions (see Appendix 7 for details).

Details of these surveys and interviews are provided in Chapter 1 (Sections 1.5.2) and in Appendices to this report (Appendix 7).

7.2.1 DAPP uptake

Since the start of the DAPP scheme in January 2013, 102,521 fathers and partners have received DAPP, with 75,669 parents receiving payment in 2013-14.

According to the data collected in the online survey, among coupled families who had a single baby born in April 2013 and where the father was working around the time of the baby's birth, 36 per cent of dads/partners took DAPP in the first six months after the birth of their baby³⁵, while 64 per cent did not take it. However, this take up rate was partially affected by the fact that many fathers (23 per cent of all working fathers) said they had not heard about DAPP. Therefore, the uptake was around 50 per cent among those working fathers who were aware of the payment.³⁶

Table 7.4 shows that the uptake of DAPP is dependent on fathers' employment conditions and contract type. Specifically, casual employees and self-employed fathers without employees were significantly more likely than other fathers to have taken DAPP: the uptake rate for both of these groups was around 50 per cent (compared with the overall average of around 36 per cent).

Table 7.4 DAPP uptake by contract type and leave eligibility

	Proportion who took DAPP (per cent)	N
Employment/contract type		
Employee permanent	33.9	902
Employee fixed term contract	30.7	43
Employee casual	49.9	79
Self-employed with employees	31.0	65
Self-employed without employees	49.1	87
Not specified	33.9	29
Eligibility for paid leave		
Eligible	33.8	933
Not eligible	42.9	272
Eligibility for unpaid leave		
Eligible	45.7	514
Not eligible	29.2	691
All fathers	36.0	1205

Source: post-DAPP online survey

The uptake of DAPP also significantly differed according to fathers' perceptions of their eligibility for paid and unpaid leave. Some 46 per cent of dads who said they were eligible for unpaid leave took DAPP, compared with 29 per cent among those who said they were not eligible for unpaid leave. This

³⁵ Appendix 9 discusses in more detail the technical aspects of the estimated DAPP uptake on the basis of data supplied by DSS.

³⁶ Fathers' responses in the pre-DAPP survey indicated that 64 per cent expected they would have taken DAPP had it been available to them, a far greater proportion than actually took DAPP. This is not surprising since such hypothetical declarations are typically inflated in surveys, when compared with actual behaviours.

strong relationship between eligibility for unpaid leave and DAPP uptake is not surprising as one of the DAPP eligibility criteria is that the father must be on unpaid leave or not working while the payment is taken. The uptake of DAPP was lower (34 per cent) among those working fathers who were eligible for paid leave than among those not eligible for paid leave (43 per cent) suggesting that fathers who had access to paid leave tended to use it first.

The correlates of DAPP uptake were further investigated using a logistic regression model that predicted the likelihood of taking DAPP on the basis of a number of characteristics of dads and their families. These characteristics included factors related to fathers' employment and job characteristics, their work environment, their family and care demands, their attitudes towards leave taking, and their socio-demographic characteristics. The results of this analysis confirmed the key role that eligibility for unpaid leave plays in determining the likelihood of fathers' taking DAPP. It also identified two further work-related factors increasing the probability of DAPP uptake: working in the public sector (rather than the private sector), and knowing other men at the workplace who have taken parental leave. Older dads (over 30) were also more likely to take DAPP compared with those under 30. Finally, dads who expressed more traditional gender role attitudes³⁷ were less likely to have taken DAPP. Table A10.1 in Appendix 10 presents the parameter estimates for the model.

Few fathers were aware of the provision that allowed employers to top-up DAPP to fathers' normal earnings, and virtually no fathers had been paid top-ups. Only six per cent of fathers who applied for DAPP said they were aware of the provision, and only one per cent said they had been paid a top-up.

In-depth interviews shed further light on these patterns. As was the case before the introduction of DAPP, fathers took leave following a birth either to support their partner and/or other family members, or because they wanted to be closely involved and engaged with their newborn, or both. In the context of these motivations, financial considerations and the other leave options available to fathers were the overwhelming factors in their decisions about whether to take DAPP. Many fathers with no access to paid leave, typically those on casual contracts or self-employed, took DAPP because it provided them with some income while they spent time with their families following the birth. Fathers on casual employment contracts generally had incomes quite close to the national minimum wage, so the income they received from DAPP was usually similar to the income they would have received had they been working. Self-employed fathers sometimes also had lower incomes, so that their income was not reduced for the period they took DAPP. However, most self-employed fathers who took DAPP indicated that it provided income during a period when they would not have been working anyway. Without DAPP they simply would have had no income at this time. One father who worked as a self-employed project manager, and arranged to take five weeks away from work without pay following the birth put it like this:

³⁷ Attitudes were measured on a scale combining answers to the following questions:

- *At home, my role is more about supporting my partner than taking a 'hands on' child care role*
- *Going out to work and being the breadwinner is the most important aspect of being a father to me*
- *Women are naturally better than men at caring for children*
- *It is better for the family if the husband is the principal breadwinner and the wife has primary responsibility for the home and the children*

Interviewee: It wasn't a great deal. It was simply just a monetary benefit.
Facilitator: Better than having nothing for that week?
Interviewee: Better than having no income for that week. (30-34 year old, NCI)

Amongst fathers who did have access to paid leave, usually those on permanent or fixed term contracts, financial considerations were often prominent in the decision about whether to take DAPP. Eligible fathers who were aware of DAPP but had decided not to take it almost always said the main reason for the decision was that their normal income was significantly higher than DAPP, and they felt unable or unwilling to receive the lower DAPP income. These fathers typically used employer paid leave to take time away from work following the birth. A father who worked as a senior administrative officer in a large government agency had already taken over 6 weeks of employer paid leave, and thought it unlikely he would take DAPP. He said:

The problem is, is that - it's not really a problem but when [mother] goes - when we go to a single income, which will be soon, it's significantly less money and we've just bought a house so I haven't been able to budget for it and basically prepare. (30-34 year old, NCI)

Another father who was on a permanent contract in a large private firm saw it as a simple financial calculation, and ruled out taking DAPP because his normal income was significantly more than the minimum wage:

Obviously financially it depends on your income level. So if your income level is above the average you probably, if you would take that two weeks leave ... you won't get an advantage ... but if you're below that income level you probably would have the advantage ... obviously I would have more financial benefits in terms of going to work and without taking the leave. So I took that choice. (40-44 year old, professional/managerial)

Like many others in permanent positions, he said that he would use personal leave or annual leave if he wanted or needed to spend time at home with his family.

Nevertheless, some fathers did choose to take DAPP even if their DAPP income was significantly lower than the income they usually earned, often regarding it as a substitute for unpaid leave or annual or other paid leave they would otherwise have taken. An IT manager was very clear about this when asked:

Facilitator: If you hadn't taken the Dad and Partner Pay, the two weeks, would you have still had two weeks off but have taken them out of holiday pay?
Interviewee: Definitely.
Facilitator: So you still would have had the two weeks? That was not negotiable?
Interviewee: Yeah, definitely. (30-34 year old, professional/managerial, permanent, large, private, NCI)

A professional who took one week of employer paid parental leave, followed by two weeks of DAPP, made it clear that he valued the additional leave DAPP made possible, even if it was at a significantly lower rate of pay than he usually received. As with many other permanently employed fathers, the availability of DAPP did not change the amount of leave he took at the time of the birth, but it meant he did not use his annual leave to be away from work at this time:

In my situation I thought well okay, I'm going to go down to half salary for a couple of weeks but I want to be at home for that time. The funny thing was I had quite a bit of annual leave built up and I didn't - at the time, before [mother] mentioned to me I didn't realise this scheme [DAPP] existed. So I'd already booked up ... leave and I was just going to take three weeks annual leave anyway, in total. So the fact of when I found this out and I weighed it up and I said yeah, you know, we've got a buffer there. We can survive on half pay for a couple of weeks and I think we'll be fine. So for me it was an easy decision because I just wanted to spend time at home. (25-29 year old, professional/managerial, permanent, large, private, NCI)

Most fathers who saved their annual leave had not yet used it at the time of interview.

7.3 Impact of DAPP on fathers' leave taking

This section uses a comparison of patterns in pre- and post-DAPP samples to assess whether the introduction of DAPP lead to a change in fathers' patterns of leave taking. It uses online survey data and interview data to explore the patterns of change.

7.3.1 Impact of DAPP on fathers' leave uptake

To assess the overall impact of the introduction of DAPP on the form and amount of leave fathers take following a birth, fathers' leave taking in the pre-DAPP online survey sample was compared with the leave taken by an equivalent sample of men who became fathers after the introduction of DAPP. The profiles of the pre-DAPP and post-DAPP samples are slightly different. Propensity score matching techniques were again used to adjust for these discrepancies, and ensure that differences between the samples are likely due to the introduction of DAPP rather than differences in the sample profiles. More detail about the propensity score matching used here can be found in Section A3.1.6 of Appendix 3.

Overall the introduction of DAPP did not lead to an increase in the proportion of fathers taking leave in the first two months following the birth of a child, but it did somewhat increase the average length of leave taken in this period among all working fathers (see Section 7.3.2). There was a significant increase in the proportion of fathers taking unpaid leave in the first two months and a decrease in the proportion of men taking annual leave during this period. This suggests that fathers substituted unpaid leave taken in conjunction with DAPP for annual leave. The proportion of fathers who took annual leave between two and six months after the birth also decreased.

Table 7.5 shows the proportion of fathers who took different forms of leave in the post-DAPP analytic sample compared to the (matched) pre-DAPP sample. Even though the overall proportion of fathers taking leave following the birth of their baby did not change, there were differences when specific types of leave are considered. Fathers' uptake of unpaid leave in the first two months post-birth increased by about seven percentage points following the introduction of DAPP. Furthermore, even though the overall uptake of paid leave in the first two months post-birth did not change, there was a shift in the types of paid leave taken. The proportion of fathers who said they took employer paid parental leave increased by about 10 percentage points after DAPP was introduced, and there was a decrease in the uptake of annual leave of roughly the same magnitude. It is likely that some fathers in

the post-DAPP sample mistakenly reported DAPP as employer paid leave, so that some of this increase in reported uptake of employer paid parental leave may, in fact, represent DAPP uptake.³⁸

Table 7.5 Proportion of fathers/partners who took leave following the birth of their baby (after matching)

	Pre-DAPP (per cent) (matched)	Post-DAPP (per cent)
0-2 months after the birth		
Any leave	77.0	79.4
PAID leave	66.8	66.7
Paid Parental Leave ^a	28.1	38.2**
Annual Leave	46.8	37.5**
UNPAID leave	14.9	22.1**
Unpaid Parental Leave	6.4	11.9**
3-6 months after the birth		
Total leave	32.6	30.8
All PAID leave	28.6	26.3
Paid Parental Leave	4.0	5.3
Annual Leave	21.7	18.6
All UNPAID leave	4.9	5.2
Unpaid Parental Leave	1.2	2.3
0-6 months after the birth		
Total leave	79.0	80.8
All PAID leave	68.3	68.4
Paid Parental Leave	28.9	39.1**
Annual Leave	50.5	43.5**
All UNPAID leave	16.2	23.0**
Unpaid Parental Leave	6.9	12.4**
Total N	1031	1087

Source: pre-DAPP and post-DAPP online survey

* significant at the 5%-level; ** significant at the 1%-level

^a Note: respondents were asked whether they had taken 'paid parental leave'. Although the intention was that this referred to employer paid leave, some fathers may have included their DAPP here.

In-depth interview data suggest that, as well as post-DAPP fathers substituting unpaid leave in conjunction with DAPP for annual leave, some fathers were pushing more assertively to take carers' leave/paid parental leave. In line with the finding from the survey data that DAPP did not change the overall proportion of fathers who took some leave, there were no fathers in the in-depth interview sample who said they would not have taken any leave at all if DAPP had not been available. As described above (Section 7.2.1), many fathers talked about substituting DAPP for other forms of leave, particularly annual leave. These fathers often mentioned that they were glad of the opportunity to retain their annual leave entitlements to use later, usually to spend more time with their families. As

³⁸ The question used in the online survey asked about "Paid parental / paternity / primary carer's leave (that is, time off for new fathers provided in addition to annual leave entitlement)" and was intended to capture employer-sponsored paid parental leave. It is however possible that some of the respondents counted unpaid leave taken in conjunction with the DAPP payment under this category, as some of the qualitative results seem to suggest.

a further example, one father took DAPP and saved his annual leave to spend time with his older children from a previous relationship:

Facilitator: Did you have other leave that you were able to take in terms of annual leave or...
Interviewee: I did. I did have that option, but no I didn't, I just took two weeks.
Facilitator: What were the reasons for choosing not to use other leave?
Interviewee: I pretty much like to keep my leave as it is. I do actually have two other children in [city]... [baby]'s my first child with my partner, but I was previously married and I tend to keep as much leave as possible to go to and from [city]. (30-34 year old, professional/managerial, permanent, medium private, NCI)

7.3.2 Impact of DAPP on fathers' leave duration

Analysing the impact of DAPP on the average length of leave taken by fathers reveals additional detail. One form of analysis focuses on the overall policy impact of DAPP, by asking what impact its introduction has actually had on the average leave duration of all fathers, whether or not they took DAPP. This analysis indicates that the introduction of DAPP was associated with an increase in the average length of fathers' leave in the first two months following a birth, but a decrease in average leave length taken in months three to six after the birth. The net result was no change in the length of leave taken in the first six months after the birth. The second analysis focuses on differences in leave length between fathers who did and did not take DAPP *after* its introduction. This analysis provides an upper bound estimate of the impact DAPP could have if all eligible fathers took DAPP in its current form. The analysis suggests that DAPP could have the effect of significantly increasing the leave fathers take in the first six months after the birth.

Overall, the introduction of DAPP was associated with an increase in the average number of days of leave taken by all fathers in the first two months after the birth from 10.0 days to 10.9 days. Thus, averaged across all fathers (including those who did not take leave and/or DAPP), there was nearly a 10 per cent increase in the average length of leave fathers took in the first two months following the birth of a child. This was due to increases in the average duration of unpaid leave (including unpaid parental leave) and paid parental leave³⁹ taken in the first two months after the birth of the baby, and despite a decrease in the average duration of annual leave taken in that time.

However, the average duration of paid leave, including annual leave, taken by all fathers when the baby was between three and six months old decreased significantly after DAPP was introduced (by almost a day for annual leave and almost 1.5 days for all paid leave). This decrease in the average duration of annual leave translates into an overall statistically significant decrease in the duration of paid leave and total leave taken between three and six months. This in turn offsets the slight increase in the duration of leave observed in the first two months, resulting in no change to the average duration of all leave taken in the first six months.

³⁹ Respondents were asked whether they had taken 'paid parental leave'. Although the intention was that this referred to employer paid leave, some fathers may have included their DAPP here. As a result, it is unclear whether fathers took more paid parental leave following the introduction of DAPP.

Table 7.6 Average leave duration (in days) taken following the birth of the baby (after matching)

	Pre-DAPP (days) (matched)	Post-DAPP (days)
0-2 months after the birth		
Total leave	10.04	10.94*
All PAID leave	8.53	8.74
Paid Parental Leave ^a	2.42	3.51**
Annual Leave	5.11	4.11
All UNPAID leave	1.51	2.26**
Unpaid Parental Leave	0.55	1.25**
3-6 months after the birth		
Total leave	4.74	3.03*
All PAID leave	3.65	2.31*
Paid Parental Leave	0.81	0.54
Annual Leave	2.33	1.48**
All UNPAID leave	1.08	0.73
Unpaid Parental Leave	0.49	0.40
0-6 months after the birth		
Total leave	14.79	13.95
All PAID leave	12.17	11.04
Paid Parental Leave	3.22	4.04*
Annual Leave	7.42	5.59**
All UNPAID leave	2.59	2.98
Unpaid Parental Leave	1.05	1.65
Total N ^b	1023	1072

Source: pre-DAPP and post-DAPP online survey

* significant at the 5%-level; ** significant at the 1%-level

^a Note: respondents were asked whether they had taken 'paid parental leave'. Although the expectation was that this referred to employer paid leave, some fathers may have included their DAPP here.

^b N may vary across leave types due to missing cases, only minimum case number is presented in the table.

The analyses presented in Table 7.6 show the average effect of the availability of DAPP on all fathers' leave taking. Such pre- and post-DAPP comparison represents the best estimate of the overall policy effect of DAPP, which is the aggregate changes in the length of leave taken following the birth of a child that can be attributed to the introduction of DAPP. For instance, the change in the length of leave reported in Table 7.6 can be interpreted as a mean change for 'an average dad' following the introduction of DAPP.

However these results do not describe the difference in the length of leave taken between those who actually took DAPP and those who did not. Table 7.7 shows PSM-adjusted estimates of the differences between the DAPP takers and non-takers following the introduction of the scheme. This analysis indicates that, all other things being equal, fathers who chose to take DAPP took about 2.4 more days of leave during the first two months after a birth, compared with similar fathers who did not take DAPP (a statistically significant increase from 9.8 to 12.2 days). This represents a difference in

leave time of nearly 25 per cent, a larger difference than that between all pre- and post-DAPP fathers shown in Table 7.6. Moreover, these additional analyses show no significant decline in the days of leave taken in the two to six months after the birth by fathers who chose DAPP, and a net statistically significant increase in leave taken in the first six months for DAPP-taking dads of 3.1 days (again, nearly 25 per cent increase). As in Table 7.6, results presented in Table 7.7 suggest that fathers substituted DAPP for paid annual leave during the first two months after their babies were born.

The difference between the two sets of estimates stems from the fact that many dads did not take DAPP for various reasons: some of them were not aware of it, others could not take it (including those who thought they were eligible), and some chose not to take it. As such, the comparison in Table 7.7 can be interpreted as an upper band estimate for what could have happened if all dads were aware of DAPP, were able to, and had decided to take it in its current form.

Table 7.7 Average leave duration (in days) taken following the birth of the baby, post-DAPP (after matching)

	Took DAPP (days) (matched)	Did not take DAPP (days)
0-2 months after the birth		
Total leave	12.24	9.62**
All PAID leave	8.20	8.47
Paid Parental Leave ^a	4.12	2.78**
Annual Leave	3.32	4.45*
All UNPAID leave	4.05	1.23**
Unpaid Parental Leave	2.19	0.73**
3-6 months after the birth		
Total leave	3.63	2.82
All PAID leave	2.47	1.94
Paid Parental Leave	0.61	0.38
Annual Leave	1.52	1.34
All UNPAID leave	1.19	0.89
Unpaid Parental Leave	0.65	0.50
0-6 months after the birth		
Total leave	15.84	12.42**
All PAID leave	10.62	10.41
Paid Parental Leave	4.72	3.15**
Annual Leave	4.85	5.79
All UNPAID leave	5.24	2.11**
Unpaid Parental Leave	2.84	1.23**
Total N^b	396	712

Source: pre-DAPP and post-DAPP online survey

* p<0.05, ** p<0.01, *** p<0.001

^a N may vary across leave types due to missing cases, only minimum case number is presented in the table.

Post-DAPP survey and interview data shed further light on these patterns. The survey data suggest that changes to men's leave uptake and the duration of leave after DAPP was introduced are not uniformly distributed among fathers but vary depending on the employment contract type (Table A10.3

in Appendix 10). While the small number of cases in some of the categories means that there is often not enough statistical power to assess the significance of the differences, the results suggest an increased uptake, and extended duration of leave taken post-DAPP among fathers on casual contracts, the self-employed and those with other non-standard employment and contractual arrangements. In other words, these were the groups that seem to have benefited most from the introduction of DAPP, in terms of increased uptake and extended leave duration. For instance, the average duration of leave more than doubled among casual employees, from about three days pre-DAPP to over seven days post-DAPP.

This finding was strongly supported by the in-depth interview data where some fathers who were self-employed (particularly sole traders), or employed on fixed term or casual contracts reported that they took longer leave than they otherwise would have as a result of being able to receive DAPP. In particular, some fathers reported that without DAPP they would have taken only a few days leave around the time of the birth. These fathers generally had no entitlement to paid leave, either because they were employed on casual contracts or self-employed. For example, a self-employed tradesman said:

Interviewee: I think if I hadn't got it I wouldn't have taken the time off.
Facilitator: What sort of time do you think you would have taken off?
Interviewee: Probably less, just probably a couple of days, not the full two weeks (30-34 year old, NCI)

A teacher who was working on contracts that ran for one school term at a time took DAPP during the school vacation when he had no income from these contracts. He had taken 5 days paid paternity leave at the time of the birth, and then received DAPP when the baby was about three months old. Without DAPP, he would have worked in vacation care to ensure that his family had income at this time:

Facilitator: So how did you come to the decision to take the DAPP - the Dad and Partner Pay?
Interviewee: Well it just - because like I said normally in the holidays I'll do vacation care. So I just thought instead of doing vacation care I'll take some time off instead.
Facilitator: Oh so you took - that coincided with the school holidays, those two weeks that you took?
Interviewee: Yeah. (NCI)

Fathers who said they took longer leave as a result of the availability of DAPP, like this father, generally had limited paid leave, most commonly because they were self-employed or worked on casual or fixed-term contracts that gave them little or no paid leave.

Prior to the introduction of DAPP, fathers' perceptions of the need for family support appeared to determine whether those on these employment contracts took only a few days of leave or a somewhat longer leave (two to four weeks) (see section 7.1.6.2, above). After the introduction of DAPP, all had access to an income stream while they were on leave and they took longer periods of leave. The interview data revealed that all the men in this category took some leave and the vast majority took

over two weeks of leave. While the DAPP rate was much lower than their usual income, it nevertheless 'took some pressure off' and made it financially feasible for them to take longer leave (see Section 7.2.1, above). Overall, in-depth interviews suggest that the impact of DAPP has been to increase the propensity of self-employed fathers and those on fixed-term or casual contracts to take at least two weeks of leave around the birth of a child. While pre-DAPP men in this category tended only to take leave when their family had high support demands, equivalent post-DAPP men tended to take leave regardless of whether or not their family's support needs were high. Thus, after the introduction of DAPP, interviewees did not say that they only took leave because their family needed them to be at home.

Fathers on permanent contracts who took DAPP strongly appreciated that it allowed them to use their annual leave to spend further time with their families later in the year. Thus, while men in permanent positions in general did not use DAPP to lengthen the total leave they took around the time of the birth, many did plan to use it to lengthen the total leave they took during the baby's first year. As described above (Section 7.2.1), financial considerations were usually central to these father's decisions about whether to take DAPP, so that fathers whose normal incomes were significantly higher than DAPP were much less likely to take it.

After the introduction of DAPP a few fathers whose partners needed significant support reported taking unpaid leave in conjunction with DAPP once their paid leave entitlements were exhausted. DAPP was particularly important for a small group of permanently employed men who had exhausted their employer paid leave and whose family had high support needs. In these cases fathers did not initially plan to claim DAPP and only made a decision to claim this payment once their partner's high support needs became evident. For example, a father who was employed in a small firm used up his paid leave entitlements to be with and help his partner who gave birth five weeks prematurely, had a difficult labour and spent over two weeks in hospital altogether. He explained his decision to take DAPP when his employer refused to give him paid carer's leave and he had used up his annual leave:

- Interviewee: So I ended up having about three days off work which they wouldn't give to me as caretakers leave. They forced me to take it as holiday leave. I had to then take - I pre-negotiated with them to take two weeks paid by them and then two weeks annual leave. I did want to take longer as paid but they didn't want to do that. They were only keen to give me the time off because of the part that they didn't have to pay me. The fact that they could not pay me for two weeks to them, was music to their ears.
- Facilitator: Did you have any other leave that you could have taken if they were open to it?
- Interviewee: No I'm pretty stretched on leave. I've kind of used up all my leave over time. (35-39 year old, professional/managerial; NCI)

Prior to the introduction of DAPP a few fathers whose families had high support demands reported running out of paid leave and being unable to take any additional time off (see Section 7.1.6.2 above).

7.3.3 Workplace culture

An expressed aim of DAPP was to provide “a strong signal that taking time out of the paid workforce to care for a child is viewed by the wider community as part of the usual course of life and work for parents.”⁴⁰ Some progress towards this aim would be achieved if DAPP is associated with workplaces becoming more accepting of fathers and partners taking leave following a birth. This may occur if fathers are more willing to assert their desire and/or right to take leave following a birth. In-depth interview data provides some evidence that the introduction of DAPP has changed some men’s willingness to insist on taking leave following a birth, even in non-supportive workplaces. In the pre-DAPP in-depth interviews, a father who only took one day of leave because his work was too busy to take longer reflected that he would have taken DAPP because it related specifically to the birth of his child. He reflected that if DAPP was available:

No, I would have taken more [time]. Because we were only entitled to one day [employer paid paternity leave] so you sort of - it was I'll take the one day and that'll be all right sort of thing because as much as you want to go in to take your holiday leave you want to save that for time together.... That you're entitled to go [and take DAPP] and do that [take time]. I think there's always been - it's gotten a lot better but there's always a stigma attached to parental leave for males and I suppose it was always taken as maternity leave was for your wife and it wasn't really for men. So getting that to become more recognised now is pretty good. (30-34 year old, professional/managerial, permanent, large private, NCI)

This sense that DAPP established a behaviour norm was even more strongly evident in the post-DAPP in-depth interviews. After the introduction of DAPP, across all occupations, fathers appeared less concerned that leave taking would be viewed as inappropriate, and more fathers reported being very assertive about their right to take leave. This increased assertiveness was particularly evident among dads who were seeking to take relatively short periods of leave of two to three weeks. None of the men with permanent jobs in professional occupations in the post-DAPP interview sample decided not to take paid leave in order to meet real (or perceived) workplace cultural expectations. In contrast, some similar men in the pre-DAPP interview sample had curtailed their leave because of workplace expectations (see Section 7.1.6.3 above). Furthermore, while DAPP did not change fathers’ workplace entitlements to unpaid leave, some men perceived that it did, and they used information about their eligibility for DAPP to pressure employers who were initially unwilling to provide unpaid leave to do so.

In summary, in-depth interviews strongly suggested that DAPP has had an impact on workplace cultures. This was evident in men who sought short periods of leave being more confident about their right to do so, and being more willing to be assertive in unsupportive workplaces. Further evidence of an effect on workplace culture is provided in Chapter 9 below, where evidence from interviews with employers is provided. This pattern echoes the findings of the evaluation of the UK paternity leave scheme which found that the existence of two weeks of government funded paternity leave created a new cultural norm that men take two weeks off at the time of a birth (Thompson et al 2005).

⁴⁰ See: www.dss.gov.au/our-responsibilities/families-and-children/programs-services/paid-parental-leave-scheme/paid-parental-leave-dad-and-partner-pay.

7.4 Summary and conclusions

Fathers use a variety of forms of leave to spend time with their newborn children and provide support to their partners. Not all fathers are eligible for all forms of leave and the eligibility for a given type of leave depends on their employment conditions and contract type. In particular, casual employees and the self-employed are often not eligible for any type of leave, and those with eligibility often have only unpaid rather than paid leave. By contrast, permanent and fixed term employees are more often eligible for many types of leave, including paid annual/holiday leave and employer paid parental leave. These differences in the eligibility for different types of leave translate directly into differences in the leave taking patterns across different groups of workers. The leave uptake is higher and its duration is longer among permanent and fixed-term employees, compared with fathers on casual contracts, contractors and the self-employed.

There are a number of factors affecting whether, and how much, leave fathers take following the birth of a child. Two primary factors motivate fathers to take leave around the time their baby is born. First, fathers respond to the increased support needs in their families following the birth. Second, some fathers wish to be engaged with their newborns and very involved in caring for them, and see the need to spend considerable time with the newborn to achieve this role. However, fathers' actual leave choices are influenced by a range of other contextual factors including the support the family receives from extended family and friends, fathers' leave entitlements and employment security, workplace culture and overall financial security. When examining facilitators and barriers to leave taking, it is crucial to recognize that there is a very strong correlation between access to leave, particularly paid leave, and the type of employment contract.

Overall, around three-quarters of fathers take some kind of leave in the first six months after their baby is born, with around two-thirds of fathers taking some form of paid leave (mainly annual leave). Almost all of them do so immediately following the birth but a significant proportion take some more leave later on, when their baby is between two and six months old. Pre-DAPP fathers tended to take longer periods of paid leave, whenever available, rather than unpaid leave. If paid leave was not available, as often was the case for casual workers and those working on contracts or the self-employed, only a short period of unpaid leave was typically taken immediately following the birth of a child.

The introduction of DAPP has extended the range of options available to fathers. According to the data collected in the online survey, 36 per cent of eligible fathers took DAPP in the first six months after the birth of their baby. Nearly one quarter (23 per cent) of eligible fathers had not heard about DAPP, undoubtedly affecting uptake. The uptake of DAPP depended on the type of employment and contract. Specifically, casual employees and contractors were significantly more likely than other fathers to have taken DAPP. Other factors independently correlated with a higher uptake of DAPP included working in the public, rather than private sector, and knowing other men at the workplace

who have less traditional attitudes towards work and childcare. DAPP uptake patterns may change as knowledge of DAPP becomes more widespread.

At an aggregate level, DAPP did not lead to an increase in the overall proportion of fathers taking leave in the first six months following the birth of a child, but it did slightly increase the average length of leave taken by all fathers in the first two months after a birth and change the composition of leave taken. Post-DAPP, more fathers took unpaid leave, and fewer took annual leave, particularly in the first two months after the birth of a baby. This suggests that many fathers were substituting unpaid leave taken in conjunction with DAPP for the annual leave they would otherwise have taken at the time of the birth, possibly saving the annual leave to spend time with their families when the baby was older.

While the average effect of DAPP on the amount of leave taken by all fathers was small, the impact for those fathers who took DAPP was larger. Estimates suggest that fathers who chose DAPP took nearly 25 per cent more days of leave than similar fathers who did not take it, both in the first two and first six months after a birth. Fathers who chose DAPP took an average of about 16 days (just over three working weeks) of leave during the first six months of their babies' lives, compared with under 13 days for similar post-DAPP fathers who did not take the payment.

However, DAPP appears to have had a different impact on men who were self-employed or casual employees. In-depth interviews strongly suggested that DAPP increased their propensity to take at least two weeks of leave around the birth of a child. Before DAPP these men generally took leave only when they felt that their families needed their care and support, and there were no other options. After DAPP, many took leave regardless of whether or not their family's support needs were high. On the other hand, DAPP appears to have also affected the length of leave taken by a sub-group of men who had exhausted their employer paid leave and whose family had high support demands by opening up a new possibility to at least partially funded leave around the birth of a baby.

Another, broader impact of DAPP appears to be through emerging changes in cultural and workplace norms that it might have triggered. In-depth interviews with fathers suggest that one of the DAPP effects has been that parental leave has become more widely recognised and accepted in workplaces. And because of that more fathers are willing to apply for parental leave and push harder for it, as they more often think they have the right to do so.

8 Fathers' support for mothers and involvement in care of children

One of the key aims of DAPP is to enable fathers and partners to provide greater support for mothers following the birth of a child, and to provide greater opportunities for them to be involved in caring for their newborn. The need for care within families increases substantially following a birth, as outlined in the previous chapter. Moreover, the increase in care needs varies depending on a range of factors including the nature of the birth, the health of mother and baby, and whether the baby is a first child. Many fathers are keen to be engaged with their baby and involved in caring for it, but their ability to participate in the care may be curtailed if they are unable to take leave from their jobs. DAPP's effect in these areas may be to provide fathers with time away from work that generates new opportunities to contribute to meeting the increased care needs in the family and/or to increase their participation in care for their newborn child.

This chapter focuses on three broad and overlapping areas where fathers may support mothers and provide care for the newborn in the immediate post-birth period for both pre and post DAPP: 1) taking on a greater share of housework chores; 2) caring for the new infant or older children (or both); and 3) explicitly assisting the mum to get time for self-care and sleep.

8.1 Fathers' involvement in housework

The results from the online survey of pre-DAPP fathers provide a useful context for understanding their involvement in domestic activities. Table 8.1 shows how frequently pre-DAPP fathers were involved in a number of domestic activities (preparing meals; cleaning around the house; doing laundry; and shopping for food and other essentials) in three different periods: before the baby was born, in the first two months after the birth, and 3-6 months after the birth.

Table 8.1 Frequency of fathers' involvement in domestic work before DAPP (row per cents)

	Every day (per cent)	A few times a week (per cent)	Once a week (per cent)	Less than once a week (per cent)	Never (per cent)	N
Before the baby was born						
Prepare meals	18.4	41.8	16.3	16.2	7.3	1114
Clean around the house	19.9	41.5	18.9	14.7	5.0	1113
Do laundry	7.5	26.4	23.2	23.7	19.2	1111
Shop for food and other essentials	8.2	32.7	33.8	18.0	7.3	1109
First 2 months after the baby was born						
Prepare meals	26.8	41.3	13.7	10.5	7.8	1107
Clean around the house	25.8	40.1	18.0	11.3	4.7	1111
Do laundry	9.7	31.9	23.7	17.3	17.4	1103
Shop for food and other essentials	8.9	42.8	30.9	11.8	5.7	1108
3-6 months after the baby was born						
Prepare meals	18.5	35.5	17.9	19.1	9.0	1111
Clean around the house	18.7	35.4	22.0	16.8	7.2	1111
Do laundry	4.9	21.3	24.7	25.4	23.7	1103
Shop for food and other essentials	5.5	31.8	31.7	21.8	9.1	1104

Source: pre-DAPP online survey

Fathers increased their involvement in domestic work in the first two months after the birth of their babies. For example, 27 per cent of fathers prepared meals every day in the first two months after the birth of the baby, compared with 18 per cent before the birth. Similarly, 26 per cent cleaned the house on a daily basis in the first two month after the birth, compared with 20 per cent before the baby was born. This increased involvement in domestic activities generally fell back to about the pre-birth level when the babies grew older (the bottom panel of Table 8.1), by which time the vast majority of fathers would have returned to work.

The in-depth interviews confirm that fathers generally increased their engagement in household tasks while they were on leave around the birth of a child. As one dad put it “the benefit of me being at home was that I could assist and complete more household tasks than I normally would.” Fathers engaged in a range of household tasks including grocery shopping, cooking, and laundry to give mums time to rest and recover from the birth.

The in-depth interviews also confirm that, regardless of the length of leave taken, when fathers returned to work, they generally fell back to their pre-birth level of engagement in housework. This sometimes happened despite fathers' best intentions. As one father who took three weeks explained:

- Facilitator: Okay, so did [mother] then take over the regular running of the household again [when leave finished]?
- Interviewee: Pretty well much, yep. It was, I think if I remember clearly, I had a good plan in my head to right 7.30 I get up and do that and then I don't plan any appointments until 10am and then I don't do this until 10am and I think it might have lasted a week and then it just all - oh okay I've got to go to – [nearby town] which means I leave here at six o'clock at the morning just to get up there, so it kind of fell apart after a week. We tried to get a bit of a routine happening but again with the amount of work that we had at that point in time, it just - yeah, it's frustrating because I want to come home and I want to be able to leave a little bit later....so that routine didn't last very long and that's where [mother] just took over again, she does a lot.
- Facilitator: So you'd sort of planned on being able to be a bit more...
- Interviewee: To try and do it, be a bit more supportive in the house. (35-39 year old, professional/managerial, permanent, large private)

The survey results show that changes in fathers' involvement in indoor domestic activities after the birth of a baby (Table 8.1) coincide with changes in their other activities, such as gardening and mowing the lawn (which can be seen as traditionally male tasks) and recreational activities. Table 8.2 presents pre-DAPP online survey data and shows a decrease in involvement in these activities following the birth of a baby, particularly in the first two months after the birth. For instance, before the birth of their child, 57 per cent of fathers did gardening and 59 participated in recreational activities away from home at least once a week. This compares with 48 and 45 per cent respectively in the first two months after the baby was born, and 45 and 51 per cent of fathers when the baby was 3 to 6 months old. This evidence suggests that fathers prioritise some tasks (such as those presented in Table 8.1) over less-essential activities (such as those presented in Table 8.2) following the birth of a baby.

Table 8.2 Frequency of fathers' participation in gardening and leisure activities (pre-DAPP, row per cents)

	Every day (per cent)	A few times a week (per cent)	Once a week (per cent)	Less often than once a week (per cent)	Never (per cent)	N
Before the baby was born						
Do gardening or mow the lawn	4.1	13.7	38.5	32.8	10.9	1104
Participate in leisure / recreational activities away from home	2.9	27.1	29.4	29.1	11.5	1107
First 2 months after the baby was born						
Do gardening or mow the lawn	3.6	10.5	33.4	38.7	13.8	1096
Participate in leisure / recreational activities away from home	2.6	15.9	26.1	34.6	20.8	1111
3-6 months after the baby was born						
Do gardening or mow the lawn	2.7	9.1	33.3	40.6	14.3	1096
Participate in leisure / recreational activities away from home	3.0	20.5	27.1	35.5	13.9	1107

Source: pre-DAPP online survey

8.1.1 Impact of pre-birth involvement in housework

While taking leave was often associated with fathers becoming more involved in household work, in-depth interviews demonstrated that the extent of this increase varied. In particular, while fathers usually did more household tasks while on leave, their level of housework involvement at this time was closely related to their pre-birth pattern of involvement. Because some fathers began from a very low base of involvement, they still did limited housework while they were on leave, even though they did a little more than before the birth. Furthermore, fathers' involvement in housework was further moderated by the mother's support needs.

Where the couple tended to share the housework equally in the pre-birth period, and the mother did not have high support needs, this relatively equal division largely continued in the immediate post-birth period. An illustrative example is the following father who was a first time father, who took two weeks of leave and usually worked as a production manager. In the post-birth period his wife did not need

significant support with her usual domestic work and, as he explained, they largely continued their usual equitable division of housework:

- Interviewee: We were both working fulltime before that so whoever got home first started cooking first or started cleaning first and they just pretty much carried on when she started maternity leave....Whoever had the time done it.
- Facilitator: Yeah, okay, so did you find yourself doing a bit more of the cooking in those early weeks when you were home or about the same?
- Interviewee: About the same. There was no big difference just now she does more of the cooking and I just do a bit more of the cleaning. (30-34 year old, professional/managerial, permanent, large private; NCI)

In contrast, fathers who did not significantly contribute to the housework activities prior to the birth were usually less proactively involved in the housework in the immediate post-birth period. These men tended to just “help out” or “share” or do what they were explicitly asked to do rather than take over responsibility for cooking, and cleaning. One father worked long hours in two manual labour jobs and had little involvement in the pre-birth period. He reported that his long work hours had left him little time for housework and that he had spent very little time with his first child, who was now a toddler. Around the most recent birth (of his second child) he had taken one week of leave and devoted little time to housework. The interviewer asked who did the housework and he explained:

- Interviewee: [Mother] does most of that. I still do most of the gardening; I'll do the lawns and whatnot, or try to. I do work a few hours. I try and do most of that but [mother] does most of the inside stuff....
- Facilitator: Have you ever sat down and had the discussion and made those arrangements, or is it just something that's happened?
- Interviewee: It's just something she's automatically done. She's happy doing it.
- Facilitator: All right. In the early weeks how did you manage those sorts of tasks? Did you find that things just carried on as normal, or you sort of adjusted a bit what you were doing in terms of household things?
- Interviewee: It was just normal. (30-34 year old, non-professional/managerial, permanent, small, private, NCI)

From this fathers' perspective his wife had the ability to manage the load, and he explained “She works in child care so you'd think that she can handle a few of them”.

However, these pre-existing patterns can be affected by the mother having significant birth complications or higher support needs. In such cases, many fathers took over the running of the home in the post-birth period if the mother had significant birth complications or higher support needs. For example, one father who had a job as a professional took over the housework while he was on leave. His wife had relatively high post-birth support needs; she had a caesarean birth, some breastfeeding problems, and the baby was premature. This father took a planned leave of three weeks and then worked four days a week for a month so as to provide additional support. In the immediate post-birth period he aimed to support his wife and he took on all the laundry and cooking. This pattern of involvement followed from an apparently equal division of housework in the pre-birth period (his wife wrote the menu, he did the shopping and cooking, and they split the cleaning and laundry). This division had largely continued after the birth though he had endeavoured to be more organised by cooking a bit more in advance and he usually tried “to cook up a casserole and then freeze it” (35-39

year old, professional/managerial, permanent, large state, NCI). This kind of pattern was also evident in the in-depth interviews with mothers. The following is an illustrative example from a mum who described her partner as actively involved in housework in the pre-birth period and who herself had very high support needs in the first few weeks after the birth. As she explained:

- Interviewee: ...he pretty much did everything [housework] to be honest those two weeks, just because of the horrific mess of the birth and everything. He [baby] wasn't feeding properly so we had to do some special stuff in relation to getting him fed on breast milk. So [interviewee's husband's name] did do a majority of the stuff around here and I also had my mum as well ...
- Facilitator: Getting up to bub at night? Did you both kind of do that?
- Interviewee: It was both of us for those first two weeks while we were trying to get him to feed properly. But then after that we just ended up doing the bottle feeding. It was still him to a point but it was mainly me. (Partner: 30-34 year old, professional/managerial, fixed term, large private, NCI)

Fathers who had virtually no involvement prior to the birth increased their involvement where their partner had high support needs and their family had no other access to support.

The specific kinds of household tasks that men assisted with were also shaped by their existing housework skills. For instance, where mothers were able, they sometimes continued to cook if that was usually their task, and the father might assist with tasks such as shopping, cleaning up after meals or a more general "helping out". If the mother was not able to cook, then relatives helped out, or the family bought more takeaways:

I'm not the best person to cook and she's a very capable cook. I tend to - we did eat out more or get takeaway more so what I said to her was I'm not able to help with all of those things but I don't want you to feel you have to do them as well so let's just take the hit, have a few eat out or takeaway meals. So we did do that a bit. (35-39 year old, professional/managerial, permanent, large private, NCI)

In contrast men who had experience with cooking sometimes took on greater responsibility for this task in the post-birth period. For example, a father who took one and a half weeks leave explained that post-birth his wife "does most of the - I don't do a lot really. She does most of it. All the inside stuff she does; so she does all the washing and everything, all the shopping and all that sort of stuff". However, during the leave he did all the cooking and cleaning after meals. Like families that did not get significant support from extended family, this family managed the rest of the housework (such as cleaning) by putting it "on the back burner". This comment resembles the pattern seen in the quantitative data (Table 8.2) where less essential activities, such as gardening, lawn mowing and recreation, appeared to be given lower priority and undertaken less frequently following the birth of a baby.

8.1.2 Assistance from extended family

As the previous chapter showed, support from extended family is important in fathers' patterns of leave taking, since families may use extended family support to modify the demands on fathers for various forms of support. Results from the pre-DAPP online survey provide a snapshot of the patterns

of significant help provided on a regular basis (that is, at least once a week) by families and friends before and after the birth of a baby. Thirty-one per cent of fathers declared that their families or friends provided significant help on a regular basis before the birth of a baby. This increased to 47 per cent of families in the first two months after the baby was born, and dropped again to 36 per cent when the baby was between three and six months old.

In the in-depth interviews, respondents were asked about any support they received from family around the time of the birth. Results from the in-depth interviews largely aligned with the survey results but provided a more complex picture. They gave information about whether support was continuous, regular or irregular, along with details of the specific kinds of support that was provided. From the analysis of the parent's responses a clear distinction emerged between families that received *some* support and those that received *significant regular* support. In families receiving *some* support, extended family provided some general help, dropped over some meals (or did other minor household chores), or stayed for a week or less but provided only minor practical assistance. In contrast, when families received *significant regular* support, respondents said that they received a lot of support from extended family, or extended family provided consistent help with childcare, cleaning, cooking, and other household chores for more than a couple of days. Consistent with the survey results, the in-depth interviews revealed that nearly half of families in the in-depth interview sample received this level of extended family support. An additional third received *some support* from family around this period.

Around a third of mothers and fathers in the in-depth interview sample reported that extended family came to stay for a period of time following the birth (for periods ranging from one week to six months). Longer stays were more prevalent among immigrant families particularly those with Asian backgrounds. The presence of extended family appeared to shape the division of housework in the post-birth period. For instance, parents commonly helped with cooking. As one father whose parents came to stay for six months explained:

Facilitator: When they were here, were they a help to your wife and so on and you?
Interviewee: Yes, a lot.
Facilitator: Did they do cooking?
Interviewee: Yes, my mum used to cook and my dad used to take care of my son. (30-34 year old professional/managerial, permanent, large private, NCI)

Similarly another father who had migrated to Australia from an Asian country described the substantial help that his mother provided:

Interviewee: My mother stayed down here for like three months I reckon, two and a half, three months. Yeah, she stayed ...
Facilitator: Okay, and what kind of help did she give you when she was here?
Interviewee: It was a big help. It was a new child, so she used to teach us how to actually wash the child, how to look after it, how to feed it and then with the cooking and looking after the house - friends coming over.
Facilitator: Okay.
Interviewee: ... like all the things that can...

Facilitator: Yeah, okay. So she was a really big help for three months. (30-34 year old, non-professional/managerial, contract large private, CALD)

Generally, the presence of a mother/mother in-law freed the father to focus more on the infant or other older children. There were only a few cases where the father appeared to absent himself entirely from household chores and childcare tasks (other than playing) while his mother/mother in-law was living with them. The presence of a relative usually allowed more time for self-care and a greater focus on the infant. The following father was a good example of this:

My mother-in-law primarily is cooking. She loves her cooking and loves the kitchen. So that's her primarily and then bits and pieces with the older one. She was primarily involved with the older one and little bits here and there with the baby. But it was more my wife and myself with the baby, in terms of washing, cleaning and all of that sort of stuff with the baby ... a part of the culture - the food is very important as part of the culture. (35-39 year old professional/managerial, permanent large private, CALD)

8.2 Caring for the new infant or older children

Before the introduction of DAPP, fathers often closely engaged with their new babies, and were involved in their care. However, their extent of engagement varied considerably. Table 8.3 shows the frequency of fathers' engagement in selected activities with their new babies: feeding the baby or helping with feeding; changing nappies; bathing or dressing the baby; putting the baby to bed; supervising or monitoring the baby; engaging / playing with the baby.

Table 8.3 Frequency of fathers' engagement with their baby (pre-DAPP, row per cents)

	Several times a day (per cent)	Once a day (per cent)	Several times a week (per cent)	Once a week or less often (per cent)	Never (per cent)	N
First two months						
Feeding the baby/helping with feeding	32.7	20.8	15.0	10.0	21.5	1111
Changing nappy	51.7	20.5	16.0	6.9	4.9	1114
Bathing / dressing the baby	14.5	43.7	23.9	12.1	5.7	1112
Putting the baby to bed	21.2	25.4	23.9	17.2	12.4	1106
Supervising or monitoring the baby	47.6	18.3	22.0	10.0	2.0	1109
Engaging / playing with the baby	66.3	19.6	11.0	2.9	0.2	1107
At 6 months						
Feeding the baby/helping with feeding	25.3	33.4	23.8	11.9	5.6	1109
Changing nappy	35.4	27.8	21.9	11.3	3.6	1107
Bathing / dressing the baby	10.2	40.5	29.3	15.0	5.0	1107
Putting the baby to bed	10.6	31.7	27.5	20.2	10.0	1101
Supervising or monitoring the baby	43.1	24.6	25.3	6.3	0.6	1107
Engaging / playing with the baby	61.0	26.2	10.4	2.1	0.3	1106

Source: pre-DAPP and post-DAPP online survey

Fathers participated in some of these activities more often than in others. For instance, in the first two months after the birth, two thirds of fathers (66 per cent) played with the baby several times a day, around half (48 per cent) supervised their baby several times a day, and half (52 per cent) changed their baby's nappies several times a day. At this time, only around 15 per cent of dads participated in bathing or dressing the baby and 21 per cent put baby to bed with the same frequency. While these differences are partially driven by the intrinsic characteristics of the activities, some of which simply need to be done more frequently, there seems to be a pattern suggesting that fathers participated in some activities more intensively than in others, probably leaving them to the mothers. For instance, one in five fathers (21 per cent) said they never fed or helped to feed their babies during the first two months, and one in eight (12 per cent) never put their baby to bed at this time. The interview data

described in detail further below confirm such gendered patterns of engagement with different types of activities.

The frequency of engaging in these activities changed somewhat over time, as the babies grew a little older and fewer fathers were on leave. For all activities listed in Table 8.3, the proportion of fathers engaging in these activities with their babies several times a day decreased when the babies were older than two months. However, the proportion of those fathers who never engaged in these activities with their baby, or did so very rarely, also decreased.

These results provide an overview of the general patterns of fathers' involvement in caring for their new born babies. The evidence from in-depth interviews with fathers provides a more detailed picture of how such engagement depended on fathers' characteristics and the family and workplace contexts.

8.2.1 Factors shaping fathers involvement in childcare: evidence from the in-depth interviews

In the pre-DAPP in-depth interviews, more than half of all respondents reported that the father did not have significant involvement in caring for their infant in the post-birth period. A range of factors shaped fathers' involvement in caring for their children, including the household division of labour prior to the birth, fathers' desire to be engaged with their newborns, the presence of extended family, mother's support needs, the length of their leave and their regular work hours, and the age of their infant.

In-depth interviews revealed that fathers were more involved in childcare in the post-birth period when they were on leave, compared to when they were back at work. However, mothers' and infants' care needs in the post-birth period also shaped men's involvement. In particular where the mother delivered via caesarean section the father usually helped out more and did more lifting of the baby, and this may have included more nappy changes. Where there were breastfeeding problems the dad was usually more involved in assisting at feeding time including getting up at night to assist the mother.

Fathers who were not involved in infant care while on leave usually devoted themselves to other household tasks, including caring for other children, although in a few cases fathers had little involvement in childcare or household chores. Fathers who were not significantly involved in infant care often viewed themselves as taking "just a support role". Sometimes they were simply uncomfortable with caring for a tiny baby. As one father of four explained:

She will take a bottle from me but I haven't been as helpful as I should be...Being a hands on dad way, I have not been hands on simply because I'm scared I'm going to fumble something really. I know I've had a lot of kids, I'd rather leave it in safe hands than in my hands that sort of stuff. (45-49 year non-professional/managerial, self-employed, NCI)

While there was considerable variation in what fathers did when they were involved in infant care, in the immediate post-birth period there were some common gendered divisions. In this early period men were less involved in soothing activities including holding the baby when it was crying, and putting the

baby to bed, and less involved in feeding the baby. Furthermore, as discussed in Chapter 7 (section 7.1.5.2) those fathers who wanted to be very engaged and involved with their newborn were more likely to take longer leave and therefore could spend more time with the infant. Finally, the availability of support from extended family can also impact on the household division of labour, including childcare. The next sections examine each of these factors that shaped fathers' involvement in childcare.

8.2.1.1 Pre-birth involvement in child care and birth order

In-depth interviews indicated that, amongst fathers who were not having their first child, their involvement in child care before the birth was important in determining post-birth involvement. Their pre-birth involvement in childcare was generally strongly linked to their desire to be engaged and involved with their children. Many fathers were keen to engage with their children, treated hands on care for them as integral to that engagement, and often undertook childcare. Nevertheless, some fathers saw their breadwinner role as primary, and were less involved in caring for their children. Amongst fathers with other children, patterns established with previous children strongly shaped fathers' childcare following the arrival of a new baby.

In most families with other children, the roles of mother and father were already well established, and these continued with the arrival of a new baby. Many of the mums had already taken up a primary carer (or stay at home) role and many of the fathers who were their partners expected that the new baby would slot into the mother's existing primary carer role and that he would be less involved. In a few cases roles were reversed and the father had already become the primary carer.

Fathers of second children were somewhat less involved in infant care than those who were becoming fathers for the first time, and they tended instead to focus their attention on the older children. A small minority of fathers of second and subsequent children in the pre-DAPP in-depth interview sample reported significant involvement in infant care, far fewer than the first time fathers. The division of childcare responsibility between fathers and mothers was usually explained on the grounds that mothers needed to devote their time to breastfeeding. The response of the following dad was typical of many second time dads. He explained that he took on more of a support role for the mother rather than taking primary responsibility for baby in the early weeks:

You know what? I reckon the first couple of weeks that I took off for the [baby], is really to help my wife look after the second one - the elder one, rather than giving her a hand with the [baby]. (30-34 year old professional/managerial, permanent, large private, CALD)

This had not changed by the time of the interview, when the dad said that he only had a short amount of time when he arrived home from work to be involved in bathing, feeding and putting the baby to bed. He tried to spend more time with his infant daughter, but he felt she was going through a 'mummy phase' where she only wanted her mother to give her baths. However, on the weekends he tried to devote more time to childcare. Men who became fathers for the third time tended to devote

more time to childcare overall; however again this tended to be more focused on caring for older children.

8.2.1.2 Presence of Extended Family

The presence of extended family was a very important factor in shaping fathers' involvement in childcare. Where the father took leave and a member of the extended family came to stay, they often lifted the housework burden from the father and allowed him to focus more on childcare. One mother whose partner took three weeks of leave around the birth and whose mother also came to stay for a few weeks, explained that her own mother helped with housework and that her partner was involved in childcare in the early weeks. She explained that this both allowed her partner to bath and play with the baby, which he wanted to do, while also allowing her some time for herself:

...I'd say that in the beginning just having that time with his father as well, even for the early feeds and just with the bath and with the little bit of play here and there and everything, it did help a lot. But it helped me as well. (Partner: 30-34 year old professional/managerial, permanent, large, private, NCI)

In other cases all the adults shared the infant care work. For example, the parents of one father came from an Asian country to help after the birth. During his own leave, this father would get up at night with the mother, but then his parents would care for the baby in the morning (30-34 year old professional/managerial, permanent, large private, NCI).

There were some exceptions to this general pattern. In a few cases where a father was from a cultural background that saw domestic tasks as primarily women's responsibility, the mother or mother-in-law 'took charge' of housework and infant care and the father remained on the sidelines. One father who worked very long hours (5.30am-7pm four days a week) only took one week off at the birth and had little involvement in infant care (30-34 year old non-professional/managerial, contract, large private, CALD). His mother came from an Asian country and stayed for three months. She took charge of the infant care and gave the new parents advice on how to change, bathe and feed the baby and would often do these tasks for them. For the two months prior to the interview, the mother and infant had been back in his home country. As was the case in this example, where the father took little or no leave in the post-birth period and the extended family came to stay, the father was less involved in childcare.

8.2.1.3 Changes to childcare patterns over time

Both online survey data and in-depth interviews indicated that fathers' responsibilities for childcare changes slightly as children get older. In particular, responsibility for feeding changes over time, with men tending to become more involved in feeding as children become older. In-depth interview data showed that infants commonly start to combine formula and breastfeeding between 6 weeks and 6 months and this makes it easier for fathers to be involved in infant feeding. All infants begin to reduce their reliance on breast milk around six months as they begin to consume solid food. Interview results show that around six months it became much more common for men to feed the baby breakfast or

dinner. Similarly, online survey results showed a decrease in the proportion of men who said they 'never' fed the baby in the later months (see Table 8.3 above). Fathers often linked their increased role in feeding to the end of exclusive breastfeeding. When asked about his contribution to caring for the baby shortly after it was born, one father explained the difference in his role as the baby's feeding patterns changed:

Obviously I can't feed the baby - I couldn't then [when the baby was born], I can now because she's starting to eat solid food, so yeah, I can do my share of most things. (35-39 year old IT professional/managerial, permanent large private, NCI)

As the baby gets older it is less common for men to never look after the baby on their own, but once fathers return to work it is also less common for them to spend a significant amount of time caring for the infant. For example, one father's job had required him to spend most weeks interstate commencing a few months after the birth of his second child. He explained the responsibilities of his partner during the work week, and how the family tried to ensure that he spent time with them on weekends:

Really it was down to during the week for [mother] to get up, feed, wash the kids, get [older child] ready for day care and then look after [baby] and do the shopping and keep the house tidy ... it's all been down to her during the week, then during the weekends we try and do bits and pieces but it's more as a family group trying to get out somewhere and do stuff together. (30-34 year old professional/managerial, permanent, large private, NCI)

Interviews showed a similar pattern with play. As the baby gets older and starts to 'open up to the world', men tend to spend more time playing with them but due to work obligations, most tend to spend a maximum of an hour or so per day during the working week playing with the infant during the week.

In the early months men do not regularly put the baby to bed, frequently citing breastfeeding as the reason for this. However, men do not substantially increase their involvement in putting the baby to bed as it gets older, although the majority of fathers are regularly involved in bathing.

8.3 Other support for the mother

While undertaking housework and caring for the new baby are important activities that fathers may undertake, they may also support mothers in other respects. In-depth interviewees were asked about the degree to which fathers helped mothers find time for sleep and other aspects of personal care (showering etc.). They were also asked about any problems with feeding (including breastfeeding) and whether mothers received adequate assistance.

Sleep deprivation is common following the birth of a child but it is also a crucial aspect of self-care for mothers. The extent to which fathers can assist in securing appropriate sleep time for their partner reflects an important contribution to providing support following the birth of a baby. The majority of fathers provided some night-time assistance in the early weeks while they were on leave but very few provided any night-time assistance once they returned to paid work. As one father explained:

Earlier on, there was a little bit more of - well certainly in the first couple of weeks when I was home, there was more me getting up as well as [mother]. So I'd change nappies and things. But now it's probably primarily [mother], who gets up during the night. Earlier on, I would try to do maybe like - when I say last feed, I mean like the dream feed or whatever, which is like at 10:00 or 10:30. Give her the bottle before I went to bed, even though [mother] had already gone to bed. (30-34 year old professional/managerial, permanent, medium, private, NCI)

For mums this reduction in support once fathers returned to work could be very challenging. One mother explained the effect of her partner returning to work after two or three weeks:

I think just the lack of sleep was probably the worst ... It's like torture. (Partner: 35-39 year old, non-professional/managerial, permanent large private)

While mothers were generally supportive of fathers' need for adequate sleep when they are engaging in paid employment, they nevertheless appreciated any night-time assistance they received.

Another area where dads provide support is around breastfeeding. There is a very high incidence of breastfeeding problems during the first few weeks with the majority of first time parents experiencing some difficulties. Dads most commonly provided emotional support with this, and less commonly provided practical assistance such as getting the baby into position or getting mum a glass of water. Men less commonly talked about specifically ensuring the mum has time to shower or engage in other personal care tasks.

8.4 Impact of DAPP on involvement in childcare and support for the mother

To determine the impact of DAPP in changing fathers' involvement in housework (help with domestic tasks), caring for other children (when present), and engagement with the new baby, scales measuring the frequency in doing these tasks were created and used to assess the changes between pre-DAPP and post-DAPP samples. Help with domestic tasks and engagement with the new baby were measured on a scale from one to five, with higher values indicating higher involvement, while caring for other children was measured in average hours per week. As before, Propensity Score Matching was used to test whether the observed difference between the pre- and post-DAPP samples were statistically significant (Table 8.4).

The results in table 8.4 suggest that fathers' help with domestic tasks and engagement with the baby in the first two months after birth increased slightly following the introduction of DAPP, though there was no change in their caring for other children. They also suggest that post-DAPP fathers were more involved in helping with domestic tasks later on (3-6 months after the birth).

The analysis also suggests that the introduction of DAPP was associated with an increase in fathers' contribution to domestic tasks before the birth, which is an unexpected finding. One explanation for this result could be that the introduction of DAPP coincided with a small shift in fathers' involvement in domestic work that was not caused by DAPP. This could also be an alternative explanation for the shift in post-birth engagement with the baby and help with domestic tasks. To assess whether the

increase in fathers' contribution to domestic tasks before the birth could account for the post-birth changes, additional regression analyses were run. These analyses tested the differences in pre- and post-DAPP involvement in childcare and help with domestic tasks 0-2 and 3-6 months after the birth of a child, while controlling for the father's involvement in housework before the birth (which would provide a proxy for any broader changes to the patterns of housework in the society). These analyses confirmed that small differences persist both in the frequency of engagement with the baby and help in domestic work between pre-DAPP and post-DAPP fathers in the first two months after their baby was born. However, the differences between pre-DAPP and post-DAPP fathers were no longer visible for later months, that is, 3-6 months after the birth.

Overall, it seems reasonable to conclude that DAPP may have slightly increased fathers' involvement in activities that represent engagement with the baby, and their involvement in housework in the first two months after the birth. This would be consistent with the small increase in the average amount of leave taken by fathers associated with the introduction of DAPP.

Table 8.4 Engagement with the baby and involvement in work around the house, difference between pre and post DAPP

	Pre-DAPP (per cent) (Matched)	Post-DAPP (per cent)
Before the birth		
Engagement with the baby (on a scale 1-5)	N/A	N/A
Help with domestic tasks (on a scale 1-5)	3.27	3.45**
Caring for other children ^b (hours)	23.20	24.46
First two months after the birth		
Engagement with the baby (on a scale 1-5)	3.85	3.99**
Help with domestic tasks (on a scale 1-5)	3.46	3.66**
Caring for other children ^b (hours)	25.30	26.46
3-6 months after the birth		
Engagement with the baby (on a scale 1-5)	3.78	3.82
Help with domestic tasks (on a scale 1-5)	3.12	3.29**
Caring for other children ^b (hours)	23.85	24.85
Total N	1023 ^a	1080 ^a

Source: pre-DAPP and post-DAPP online survey

* difference significant at the 5%-level; ** difference significant at the 1%-level

^a N may vary across leave types due to missing cases, only minimum case number is presented in the table.

^b Only fathers who have other children in the household answered this question, n=974 (437 in post-DAPP sample and 537 in pre-DAPP sample).

In-depth interview data were consistent with post-DAPP fathers being somewhat more involved in activities with their babies in the first two months after the birth, compared with pre-DAPP fathers. More post-DAPP than pre-DAPP interviewees reported that the dad had significant involvement in infant care. This change may be due to increased leave taking amongst fathers who were not entitled

to paid leave from their workplace, and the decrease in the number of fathers who took no leave or less than two weeks of leave. Responsibility for infants is strongly related to the length of leave fathers take. Thus, amongst those who took less than two weeks, few pre-DAPP fathers had significant responsibility for infant care. Fathers who took two weeks or more leave were much more likely to take significant responsibility for infant care (though still a minority of these longer leave takers also took significant infant care responsibility). Therefore it appears that the main impact of DAPP was through reducing the proportion of fathers taking only very short periods of leave, and it is likely that this in turn generated the observed increase in father's involvement with infants.

Families have varying needs for care and support following the birth, as Chapter 7 demonstrated, and these varying needs are sometimes very important in decisions about whether fathers will take leave and how much leave they will take (see section 7.1.5.1). Variation in these needs relates particularly to the mothers' birth experience and health, the baby's health, and the presence of other children in the family. The support available through family and friendship networks, particularly the support of the new baby's grandparents, is often taken into account when decisions are made about the leave fathers will take to ensure that the mother and new baby have sufficient support and care (see section 7.1.6.1).

One group of fathers whose leave taking was particularly affected by DAPP were those who had limited or no paid leave, either because they had exhausted their paid leave or had no paid leave entitlements, and whose partner and/or baby had significant needs for care and support (see section 7.3.2). Comparing the pre-DAPP and post-DAPP in-depth interview samples indicated that fathers in this situation were more likely to take two weeks or more of leave after DAPP became available. Families often said that the availability of DAPP made a real difference, providing income when they would otherwise have had none. In these circumstances, the availability of extended family support did not seem to be so important in decisions about fathers' leave and the support they offered. These fathers usually wanted to be at home to support their partners and contribute to caring for the baby even if there was support available from extended family.

In-depth interviews indicated that fathers who were self-employed or employed on casual contracts were involved in the care of mothers and babies while on leave in ways that would not have been possible without the time away from work that DAPP allowed. For example, one father was a self-employed tradesman who did not work for two weeks and took DAPP. His partner had a caesarean section and was in hospital for five days. While taking DAPP, he was able to spend most days at the hospital, and then spend another week at home before returning to work. The mother explained the value of the father being able to spend time at the hospital learning how to care for the baby, and the father confirmed this:

They [hospital staff] spent a lot of time - well [father] was very hands on which was great, so they spent a lot of time showing [father] how to do things as well, not just me [mother].

They did show me a few things like how to bath him and how to change his nappy and all that, so yeah, they helped me out a bit. (father) (30-34 year old; NCI)

The father was also able to ensure that all was ready when his partner and the baby returned home, as the mother explained:

[father] had been coming home [while mother was in hospital], [father] had everything organised here anyway for when we came home.

He explained that both parents contributed to the baby's care, and he took responsibility for housework while he was on leave:

If I had him [baby] and he needed to be changed, I would change him. We just both did it if it needed doing ... [I did] a lot more cleaning [than usual] because all the cloths we used to clean stuff, a lot of changing of the sheets on his bed. I did more washing and cleaning.

He said that he would only have taken a few days leave if DAPP had not been available. The mother described how DAPP significantly reduced financial stress for this family:

[DAPP] just helped with all of our - like we had to pay for the anaesthetist and all of our expenses once we got out of hospital. So that was good. That pretty much covered our paediatrician bills and all of that sort of stuff, so that was good.

Similarly, another self-employed father whose partner also had a caesarean birth also described the effect of DAPP. During two weeks of leave while he took DAPP, he did most of the domestic work and took an equal share in caring for the baby. Although he thought he would have taken leave from his business without DAPP, he said DAPP was 'great' and explained that it made a real difference to how he treated his time away from work:

Well I didn't have to worry about work which is good. I suppose I was feeling a bit anxious about what was going to happen, the onslaught. Everyone was telling us this [the birth of a first child] is going to change your life and all these terrible things. But it was good to be able to have that time to set aside and say, okay, I'm going to at least a couple of weeks. I think without the Dad and Partner Pay I probably would have done it anyway. But it kind of - with the Dad and Partner Pay I kind of thought, well, I'm not allowed to work anyway while I'm doing it so I'm not going to work ... So I think that if I had have made a decision to maybe take a little bit of time off [without DAPP] I probably would have still been taking a phone call or talking to people or going out and visiting people ... But I thought, because it's there [DAPP] ... it was like, okay, I'm going to do this. I'm going to take two weeks off ... She [mother] was really - the cooking and the cleaning that she was just - she was out of it for a few days. She was just really, really tired. Yeah, just sore, really sore, on pain killers for quite a while. ... I think it was really essential that I spent the time with her [mother] early on. (45-49 year old, non-professional/managerial, NCI)

In families where fathers were employed on casual contracts, DAPP provided crucial income that would not have been available otherwise. For example, following an unplanned pregnancy, one mother had a difficult labour from which it took her some time to recover, and the family had moved into their home only two weeks before the birth without much of the equipment they needed for the new baby. Her partner's family did provide significant support through helping to clean the new home and garden and assist in caring for the baby. The father was employed on a casual contract as a warehouse worker and had no entitlement to paid leave. The mother said that, during the two weeks when her partner took unpaid leave and DAPP:

He did everything [laughs] I could hardly move because I had 18 stitches and I was just: "I am not going anywhere [laughs]. I'll just stay in the one spot." ... But no, [mother] did most of the housework. (Partner: 20-24 year old, non-professional/managerial, casual, large, private, NCI)

Asked whether DAPP made a difference, she indicated that she would not have been able to manage on her own if her partner had been working, and that the DAPP payment was "good, it was helpful too because it came exactly when we needed it really."

However, many fathers who had some leave entitlements chose to take DAPP too. Amongst these fathers, DAPP appeared to make most difference when they had no support from extended family or only limited support. For these fathers, DAPP made a difference even if the mother and baby did not have unusually high needs following the birth. One father was employed permanently in a large private firm and took two weeks of unpaid leave and DAPP immediately following a normal birth. There was no support from extended family straight after the birth, as neither his nor the mother's parents lived nearby. He described his involvement in supporting his partner, who breastfed, and caring for the new baby at this time:

I was pretty much just in charge of just household upkeep; going to get the groceries and making food and preparing food. I would also take [baby] when [mother] was tired and needed to sleep, and she [baby] wouldn't sleep. So for the first couple of days, I would be up in the middle of the night from about four in the morning till about nine, just with [baby]. She probably could have slept by herself but she was just asleep on me so I just hung out and watched TV on the couch while [mother] slept, and that kind of went like that for a few days. Then ... I basically just remember doing lots of washing and support stuff, because I can't - feeding's such a - it's the main thing at the start. It's what they're doing. So I was just doing everything else I could around that. (non-professional/managerial)

This father said that he would have taken this time as paid annual leave if DAPP had not been available, but that DAPP allowed him to save his annual leave so that he was able to spend more time overall with his family in the first year:

I was real keen to do this [take leave immediately following the birth] because I was pretty thankful for what I was given. So yeah it [DAPP] just helped a lot. It was like another two weeks really that I could hang out and spend with my family and help out.

Another father (20-29 years old), who was employed permanently in a medium size firm, took two weeks of unpaid leave and DAPP, along with one week of annual leave. Although the birth was uncomplicated, his baby had difficulty feeding for the first two weeks, and he was very glad of his decision to take three weeks leave. He and his partner had some support from extended family, but it was not extensive. He described what he did during the time he was on leave:

Just looking after him [baby], spending time with him and looking after my wife as well, because she wasn't - we were both not getting much sleep at all at the start there [laughs], so just making sure I was doing enough like the washing and cleaning and just keeping things going. Just normal household stuff, just to take the load off [mother], and look after [baby]. (non-professional/managerial)

DAPP made it much easier for him to take the leave he wanted following the birth.

8.5 Summary and conclusions

One of the key aims of DAPP is to enable fathers and partners to provide greater support for mothers following the birth of a child, and to provide greater opportunities for them to be involved in caring for their newborn. The pre-DAPP data showed that when fathers are on leave in the post-birth period they generally increase their involvement in housework and childcare. However, the degree to which this means that they take on a significant burden of household labour depends on a range of factors, including support from extended family and pre-birth patterns of involvement. It also depends on the amount of leave taken in the post-birth period, with fathers' involvement being greater while they are on leave.

Overall close to a half of all families receive significant assistance from their extended family and friends around the birth of a child. The availability of this support influences the father's involvement in care and support for the mother and baby. Around a third of mums and dads in the interview sample reported that extended family come to stay for a period of time following the birth. Periods varied from one week to six months, with families coming from overseas usually staying for two to six months. When family comes to stay they commonly take over the cooking and leave fathers to concentrate on other tasks. When family live nearby, they commonly help by doing some house-cleaning or bringing over meals.

Pre-birth patterns of involvement in household work and childcare are also very important. Fathers who have little involvement in household chores prior to the birth rarely substantially increase their involvement while on leave. In other words, fathers' pre-birth patterns of involvement significantly shape their involvement post-birth and this in turn will mediate the impact that any new paternity leave payment will have on fathers' support for mothers in the post birth period.

Birth order also shapes the kinds of support that fathers provide. Fathers who have other children often focus their efforts on the older child or children rather than the new infant during their leave. Furthermore, with second and subsequent births the father's efforts are informed by the family's experience with the first birth. For instance, if the mother experienced significant depression or other problems with the first birth, the father will often try to ensure she has greater support this time around. Alternatively, if the mother coped very well with the first birth, the fathers tends to assume that she will be able to largely continue with her usual housework and childcare tasks in the immediate post birth period.

Overall, fathers are much more likely to provide childcare and support when they are on leave compared to when they are not. To this extent, the introduction of DAPP appears to have had a small impact on fathers' provision of support through extending the length of leave taken following the birth of a child. Specifically, the evaluation found a slight increase in fathers' involvement in activities that represent engagement with the baby, and their involvement in housework in the first two months after the birth, which is a period that coincides with the observed increased leave taking post-DAPP.

The interview data suggest that DAPP affected support patterns through two mechanisms. Firstly, DAPP eased the financial burden associated with having to take unpaid leave when families' support needs are very high and leave simply has to be taken. This mechanism appears particularly important for the group of fathers with no or limited access to paid leave, such as the self-employed, contractors and those working on casual basis. In such cases DAPP did not necessarily change the length of the leave taken, but it reduced the financial pressures associated with taking time off work. Secondly, DAPP increased leave duration amongst fathers whose families had some extra support needs and only limited assistance from extended family. It provided this broader group of fathers with an additional mechanism enabling them to take longer leave, or save other paid leave to be with their families at a later time, and focus on childcare and supporting the mother. In both cases, fathers and mothers in the in-depth interview sample clearly described the additional involvement in care and support for the mother and baby that fathers were able to provide as a result of the availability of DAPP.

9 Paternal bonding – what affects it and the impact of DAPP

DAPP aims to “help fathers to establish bonds with their new child and be involved in their child's care from an early age”⁴¹. This chapter focuses on whether DAPP has increased fathers' opportunities to bond with their newborn. The chapter begins by outlining what is usually meant by bonding between fathers and newborns and why it is important. It then describes how fathers themselves appear to understand bonding, and what factors they think enhance and hinder them in developing a strong bond with their new child, based on data collected for the DAPP evaluation. On the basis of this background, the chapter then considers the impact of DAPP on paternal bonding.

9.1 Defining bonding

The term ‘bonding’ was originally used to describe the mother/infant relationship, but it now refers to the infant-father connection as well (Barclay and Lupton, 1999; Brandão and Figueiredo, 2012). Paternal bonding has been most extensively researched and measured by health researchers, and they have variously defined it as “emotional attachment” (Brandão and Figueiredo, 2012), “father-child attachment security” (Brown et al., 2012), father-infant interactions which involve “engaged parenting” (with engaged parenting defined as: “warm, engaged patterns of parenting that allow the child to learn to manage emotional difficulties and positive strategies for dealing with difficulties” (Ramchandani et al., 2013), and finally as that which generates “engagement behavior, including social gaze, exploration, and social reciprocity” (Weisman et al., 2012, p. 982).

Fathers have been shown to feel that many activities help them bond with their baby. These include feeding their baby (Goodman, 2005; Hamilton and De Jonge, 2010), playing with and cuddling their infant (Premberg et al., 2008), burping the baby, and helping the mother to breastfeed (Fågerskiöld, 2008). While some fathers feel unsure about how to care for their newborn in the early weeks, they develop confidence as their baby grows older (Chin et al., 2011; Goodman, 2005; Shirani and Henwood, 2011). Researchers have also examined the factors that affect the paternal bond or attachment security, including umbilical cord cutting experience (Brandão and Figueiredo, 2012) and father's sensitivity and involvement (Brown et al., 2012). The degree to which the quality of father-infant interaction (sensitivity, intrusiveness, remoteness and depression) affects infant's outcomes has also been considered (Ramchandani et al., 2013).

In-depth interviews with fathers undertaken for the evaluation provided new information about how men define paternal bonding themselves, and about the kinds of activities they feel help build this connection. In general, fathers' definitions of bonding echoed those available from the academic literature. Thus, fathers' definitions emphasised warm engagement with the baby. All interviewed fathers described their bond as good. Fathers often provided the clearest sense of their understanding

⁴¹ These words are used to describe one aim of DAPP on the DSS website. See: www.dss.gov.au/our-responsibilities/families-and-children/programs-services/paid-parental-leave-scheme/paid-parental-leave-dad-and-partner-pay.

of bonding when they were asked to explain how they knew the bond was good. Fathers referred particularly to feeling comfortable with the baby and mutual joy in seeing each other:

...he feels comfortable around me I think and I'm comfortable around him. (30-34 year old, professional/managerial, permanent, large private, NCI);

She's always happy to see me. (20-24 year old non-professional/managerial, self-employed, NCI);

...he lights up when he sees me. He laughs so I'd say I'm very connected to him. (45-49 year old, professional/managerial, permanent, small private, NCI);

We get along well, if that makes - as much as you can get along with an eight-month-old... Obviously she is still very comfortable with me and gets excited and those type of things. We get on well. (35-39 year old, professional/managerial, permanent, public large, NCI)

9.2 Factors that shaped paternal bonding pre-DAPP

Fathers have varying views about the factors that help and hinder them in developing a connection with their newborn. These views are central to assessing the impact of DAPP on bonding. DAPP's capacity to enhance fathers' opportunities for bonding is closely related to its ability to affect these views. In-depth interview data indicated that fathers' varying views on the following three issues were important:

- The relationship between paternal bonding and breastfeeding: While some fathers felt that breastfeeding very significantly restricted the development of their bond with their newborn, others did not see it as having as much impact.
- The relationship between paternal involvement with the baby and the paternal bond: While some fathers thought that the time they were able to spend with the baby was central to their connection with their infant, others thought the paternal bond would always be weak in the early months.
- The paternal role: While many fathers had a pre-existing desire to be involved, engaged parents, others primarily viewed themselves as breadwinners and had a lesser desire to be a hands-on father. These pre-existing desires influenced the time that fathers invested in childcare, and in turn this affected the strength of the father-infant bond.

It is important to understand this diversity because, while DAPP did not seek to directly address father's desires, fathers' views on these issues nevertheless mediated the impact that DAPP had. Fathers' beliefs about each issue are outlined in more detail below.

9.2.1 Paternal bonding and breastfeeding

The academic literature has found that many fathers believe that breastfeeding shapes the relative strength of the paternal and maternal bond, and that because they cannot breastfeed, their ability to interact with the infant is much less than that of the mother. Some 22 per cent of fathers in the pre-DAPP online survey said they never participated in feeding the baby in the first months after the birth.

Consistent with this, around one quarter of fathers in the pre-DAPP interview sample either said that they felt excluded by breastfeeding, or that breastfeeding naturally generated a stronger maternal bond in the early months and that the paternal bond would develop when the infant was older. These beliefs were evident from fathers' responses to questions about the time they spent with the infant in the early weeks, the strength of their bond, or their feelings about breastfeeding. A father whose wife ceased breastfeeding within the first few weeks reflected:

...so when that happened [we moved to formula] then I was able to have more of an active role on the feeding side of it and for a start that's really the most interaction that you have with a baby if she's either sleeping or feeding; there's not much else. (35-39 year old professional/managerial, permanent, large private, NCI)

In a similar vein a father whose partner continued to breastfeed reflected:

I felt excluded on that front because I couldn't do it. It was a real close bonding time between mother and son, but definitely now that he's been - he's eating solids I can feed him. Now, also, I really enjoy loading up the car in the morning and taking him down to care and dropping him off. (35-39 year old professional/managerial, permanent, large private, NCI)

Fathers who viewed breastfeeding in this way tended to believe that their bond would develop once the child got older and they had the opportunity to engage in activities such as feeding or playing. For example, at the time of the interview (when the baby was about eight months old) this father had begun playing with his son every evening and he described his bond as strong. This pattern is corroborated by the online survey data, which suggest that only about 6 per cent fathers 'never' participated in feeding the baby at around 6 months after the birth. Furthermore, some 87 per cent of dads were involved in playing with the baby on a daily basis at this age (see Table 8.4 in Chapter 8).

9.2.2 Paternal bonding and spending time with the infant

Fathers often see the time they are able to spend with their new child as crucial to developing their bond. Fathers tend to have different perceptions of the importance and role of spending time with their newborn (around the time of the birth) compared to spending time with the child later in the first year of life.

9.2.2.1 Around the time of the birth

Fathers in the pre-DAPP in-depth interviews had varying views about whether having time away from work at the time of the birth helped them to bond with their infants. Most of those who expressed a clear view spoke about the relationship between time and bonding, and said that leave (or lack of leave) at the time of the birth made at least some difference to the strength of their bond. Typically men who held this view made comments such as the following:

Facilitator: Do you think that having that leave around the time of [baby]'s birth helps to develop that bond?
Interviewee: Oh for sure, yeah. Look, I'd - you definitely - yeah I reckon definitely in the first fortnight you've got to spend time with them from - to get to know you and - yeah, that first little bit of bonding, for sure. (35-39 year old professional/managerial, permanent, public large, NCI)

Fathers who felt that leave made a difference to their bond with the infant frequently suggested that longer leave was better.

I mean if you take your two weeks as a block as soon as the baby's born you sort of get a little bit of adjustment but - and it obviously will vary between parents and couples and all that sort of thing as to what happens with their child and how they adjust. But I think more along the lines of four to six weeks is probably a lot better length of time because it certainly gives dad a chance to bond with baby. (35-39 year old non-professional/managerial, permanent, large public, NCI)

According to the online survey data, some 54 per cent of pre-DAPP fathers who took some leave following the birth of a baby said that the leave they took was shorter than they needed. Furthermore, 76 per cent of the fathers who thought their leave was too short said they would have liked to spend more time with their baby.

The view that the leave taken at the time of the birth made a significant difference was particularly strong among first time fathers who used this time to become familiar with the basic mechanics of infant care. As one first time father explained:

Yeah, very important. Particularly with your first as well. Maybe if it was my third it probably wouldn't be as important, but my first. ... very, very important. The bonding side of it as well. So yeah you'd need a very, very significant reason not to want to be there for the first week or so. (25-29 year old professional/managerial, permanent, large private, NCI)

Of those fathers who said that leave (or lack of leave) at the time of the birth made at least some difference to the strength of their bond, some added the strong caveat that it only had long term consequences if they continued to spend significant time with the infant once they returned to work. These men pointed out that babies change very rapidly in the first few months and that long term work hours were a much more important factor than the relatively short leave taken around the time of the birth. Several of these fathers were not first time fathers and they based their reflections on their prior fathering experiences. One father in the pre-DAPP sample suggested that by offering paternity leave, his employer was telling him to "do the right thing" and thereby sanctioning him to prioritise family on an on-going basis in a way that he had not with his older children (35-39 year old professional/managerial, permanent, large private, NCI).

In contrast, some of the pre-DAPP fathers thought that the time off did not make a significant difference to their bond. A couple argued that they were more focused on caring for an older child and some said that in the immediate post-birth period the baby was too young to develop a bond with them. Comments from those fathers who had older children reflected that they spent little time with the infant:

Facilitator: Do you think that having that leave around the time of [baby]'s birth helped you to be able to work out on some of her cues? Some of what she needed, to get to know her better?

Interviewee: It certainly was better than not being here, but as I said, I didn't spend a huge amount of time with her during that period. So yeah it would have - yeah it certainly helped, but wasn't - would by no means solve the solution, or find

the solution, yeah. (30-34 year old professional/managerial, permanent, large private, NCI)

Another father said:

[The time was] not really [helpful for bonding], because I don't think they know what's gone on at that age, to tell you the truth. I don't know, it's still good to be there I'd say. (30-34 year old non-professional/managerial, permanent, small, private, NCI)

Thus a minority of fathers felt that time did not make a significant difference to the development of their bond, though they nevertheless often felt that the time off was important.

9.2.2.2 On-going time spent with infant

Fathers generally said that the total time they spent with the infant in the first six months strongly affected the strength of their connection. Many fathers said that they spent a lot of time caring for their infant during this period, and most of them reported a good bond. However, some men did not spend a lot of time on infant care and fewer of them reported a good bond, while some reported a comparatively weak bond. One father explained how he was careful to ensure that he spent time with his baby and that this supported a strong bond between father and baby. He went on to draw a contrast with a workmate who spent much less time with his baby and appeared to have a different bond:

I made a conscious effort to make a lot of time for her. Whilst sometimes you feel like you don't have any other life besides work and the baby, I try and make a lot of time. I get up - that's why I make sure I just get up with her in the morning and play with her. Every night I'm religiously home at the same time and have a play with her. Even on the weekends - we've talked about it - I used to play golf and stuff and I haven't really been doing much of that because it takes up all day. I usually spend time with the baby. But yes, I'm not just minding her ... I try and spend good time with her and throw her around. I take her out in the - we've got a pool - take her out in the pool and take her into the beach. So that sort of thing ... I've taken her for little bush - in the national park just take her out there because she gets annoyed sitting in the house. So I just take her up there and she loves it ... So - I reckon - [mother] always says that she [baby] likes me better. She thinks - I can see what she's saying because when I come home or when I'm with her ... she can't stop staring at me and she's always looking at me. Always laughing and - but I think part of that is definitely because I'm making time ... whereas my friend had one at the same time and he hasn't even really had his baby for - during the day like I have .. it's just like "No, it's too long. I'm not going to have - I don't want to have him all day." ... So you can tell he - even though they're the same age as our baby he'll just go straight to his mum. He'll put his arms out to his mum and only wants mum all the time. Whereas [baby] it's definitely at least a 50/50 with us. (30-34 year old professional/managerial, permanent, large private, NCI)

9.2.2.3 Birth order and time spent with infant

The relationship between the time fathers spend with infants and bonding was also revealed in the narratives of men who had second or subsequent births. Fathers with more than one child sometimes had spent more time with their first child compared to the new infant, and sometimes the reverse was the case. In reflecting on any differences in the strength of the bond they usually raised the issue of time spent with the infant. One father described the effects of spending more time with an older child

on bonding with a new baby, and how he and his partner became aware of the issue and reorganised their division of responsibilities as a result:

- Facilitator: Moving to now, and your relationship with [baby] now. How would you describe that relationship? You might start by telling me about other activities that you do with [baby] now, apart from giving her bottles, yeah?
- Interviewee: Yeah. Well I started to - I've noticed that - a big difference between the relationship I have with [baby] and that I have with [older child]. Just because of the time that we have. The time that we spent with [older child], and the time that we've been able to spend with [baby]. Particularly as we fell into roles where say in the mornings I would be getting [older child] out of bed and dressing him, and getting him ready for the day before I go to work. [Mother] would look after [baby]. So I was tending to spend more time with [older child], and I felt less - like I knew [baby] less. So we - probably about ten months ago, we started actively swapping that every morning. So one of us would get [baby] up, and - yeah, in the morning, so that we were spending more time with each [child]. (45-49 year non-professional/managerial, self-employed, NCI)

Another father reflected that his bond with his older child was strong because he stayed home with her during the first few months of her life, whereas his current job had required him to be away from home Monday to Friday in the six months following the birth:

- Interviewee: When [older child] was born it was easier because there's more bonding time because I was here every week. But obviously I spent six months of my youngest being away every week.
- Facilitator: Yep and you're just home on weekends. (30-34 year old professional/managerial, permanent, large private, NCI)

9.2.3 Involved, engaged fatherhood and bonding

The time fathers spend with their newborns is strongly intertwined with their pre-existing commitment to being an involved and engaged father. While extremely long work hours and demanding workplaces do place considerable constraints on some fathers' ability to spend time with their infants, these constraints only partly explain differences in the time fathers spend with newborns. Firstly, as noted earlier (see section 7.4), men who took long leave were usually committed to being involved and engaged with their babies, and in many cases took long leave despite disapproval from their workplace. Secondly, fathers vary in how they spend the time they have at home (see Chapter 7.5.1). Some devote themselves to their children whenever they are at home and in turn developed strong bonds. The following quote comes from a father who described himself as less career focused and liking the idea of raising his infant. He felt that his bond with his infant was as strong as his wife's and at the time of the interview he had become the primary carer. However, for the first three months when he was working full-time he would:

come home and basically spend from 5.30 till 7 o'clock with him just playing and then going through the bedtime procedure: bath and all that and giving him his night bottle and settling him at night. Then I'd get up for the 10 o'clock to midnight feed depending on when he'd wake up, which gave [mother] time then to sleep through, get her sleep and then she'd do the 2 or 3 am feed. (40-44 year old professional/managerial, permanent, medium private, NCI)

Fathers like this were usually conscious of actively engaging with the baby whenever they were with the baby. Indeed, the mechanical engineer quoted above (section 9.2.2.2) explained that he was not simply “minding” the baby when he spent time with her, but was participating in meaningful activities with her which helped to maintain a bond. In contrast fathers with a more traditional view of fathering felt that full-time hours constrained their ability to invest this amount of time in infant care and were less conscious about actively focusing on the children when at home.

9.3 Impact of DAPP on paternal bonding

One of the key aims of DAPP is to give fathers increased opportunities to bond, primarily by giving them the opportunity to take more leave in the infant’s first year. As Chapter 7 showed, DAPP produced a small increase in the length of leave taken by fathers who took leave in the two months following the birth, though it did not increase the proportion of fathers who took leave. Nor did DAPP produce any significant increase in overall leave length in the first six months after the birth. However, in-depth interview data suggests that it did significantly increase leave duration for specific sub-groups: 1) fathers who were self-employed or casual workers; and 2) permanent employees whose family had high care needs and had used up all their other leave entitlements. Given the complex range of factors that shape the strength of paternal bonds, it is challenging to precisely determine whether this translated into an increased opportunity to bond, and to stronger bonds. As in the pre-DAPP period, dads sometimes thought that it was not possible to connect with the infant in these early weeks because they are 'little blobs' (as one dad expressed it). However, more commonly fathers felt that this time had helped them learn to care for their infant and to develop a better bond. The following father took two weeks leave without pay and DAPP, and no other leave at the time of the birth. He said that even though he used the leave to focus on supporting his partner rather than caring for the new infant, he still felt that the two weeks of leave helped him to get to *know* his new child even though the *connection* itself came later:

- Interviewee: Well, I didn't really look after him for the first two or three months, like I held him and did look after him, but she was looking after him the majority of it. She'd feed him and put him to bed and bath him and all that sort of thing ... I think I got to know him pretty much straight away. Yeah. It was good having the time off because we did spend a lot of - well obviously we spent heaps of time with him, but yeah I really, I did enjoy that start. Yeah, it was good ...
- Facilitator: Do you think things would be different if you hadn't taken that leave?
- Interviewee: Yeah, things would be heaps different.
- Facilitator: In what sort of ways? I know it's hard to guess - hypothetical.
- Interviewee: Well I wouldn't have had as much time with him at the start so I wouldn't have known him as well. (20-24 year old non-professional/managerial, permanent, large private, NCI)

Fathers who took DAPP were certainly very grateful for the payment and the time that it gave them. However, as with the pre-DAPP fathers, the post-DAPP fathers said that they needed to have on-going opportunities to spend time with their infant. For example, one father reflected that bonding is about spending time with his baby. He said that his connection was as strong as the mother’s when he was on leave the first couple of weeks after the birth, but the mother’s connection became strong

once he returned to work. Now that he cared for the baby all day Saturday while the mother worked, the connection was becoming more equal again (30 year old, bricklayer, self-employed, NCI).

9.4 Conclusions

This chapter examined the ways in which fathers develop bonds with their new baby and whether DAPP has increased opportunities for doing so. Academic literature suggests that fathers feel that many activities, such as feeding, playing with and cuddling their infant, help them bond with their baby. In-depth interviews revealed that fathers' definitions of bonding included warm engagement with the baby, feeling comfortable with the baby and mutual joy in seeing each other. This largely aligns with how paternal bonding has been defined in the academic literature.

In-depth interview data suggests that fathers thought three factors were particularly important in influencing their bond with the new baby. First, the time fathers spent with the infant, particularly through its impact on the strength of their connection. Time spent with the infant covered time at birth, and total time devoted to childcare in the first six months. Second, fathers' desire to be involved and engaged with their newborn was important because it motivated them to invest time in childcare, and in turn influenced the strength of the father-infant bond. Third, fathers' views about the effects of breastfeeding on the development of their bond with the newborn. Some fathers (around one quarter of the pre-DAPP in-depth interview sample) felt that breastfeeding naturally generated a stronger maternal bond in the early months and that the paternal bond would develop when the infant was older.

Fathers generally thought that the total time they spent with the infant in the first six months strongly affected the strength of their connection. The time they were able to spend with their baby depended on their ability to take longer periods of leave, with the length of time taken often seen as inadequate. For instance, over half (54 per cent) of pre-DAPP fathers who took some leave following the birth said that the leave they took was shorter than they needed. Interview data suggests that many fathers felt the time spent with the baby only had long term consequences for bonding if the father continued to spend significant time with the infant once they returned to work.

A small group of fathers argued that the time off work did not make a significant difference to their bond with their baby. This was often the case when fathers were more focused on caring for older children than involved with the infant while on leave. Some fathers however considered the baby too young to develop a bond with them in the immediate post-birth period.

One of the aims of DAPP was to give fathers increased opportunities to bond, primarily by giving them the opportunity to take more leave in the infant's first year and spend more time with them. As demonstrated in the previous chapters, DAPP does appear to have provided some new opportunities due to the small average increase in leave it produced, particularly in the first two months after the birth. Additionally, and as noted earlier, fathers appear to commonly substitute DAPP for paid annual

leave they would otherwise have taken following a birth, thus allowing them to take annual leave later in the first year of the baby's life.

Given the complex range of factors that shape the strength of paternal bonds it is difficult to precisely determine whether and how these changes to leave taking patterns will translate into an increased opportunity to bond, and to support/develop stronger bonds. Many fathers see it as important to continue to have on-going opportunities to spend time with their infant over a longer period of time, including after they returned to work. For these fathers, the opportunities created by DAPP, such as being able to bank up annual leave to spend more time with their families later on, may provide additional opportunities for bonding during the first year of life.

10 Employer Response to DAPP

Employers' responses to DAPP are important because they may affect the likelihood that fathers and partners will take up the payment, and because the operations of the organisations that employ fathers and partners may be affected when they take leave to receive DAPP. Employers' views about the appropriateness of fathers and partners taking leave following the birth or adoption of a child may facilitate or hinder leave taking, as may organisational cultures that support or impede fathers and partners in taking leave at this time. When fathers and partners take leave, organisations may need to replace them temporarily or reorganise work to cover their absence. They may also need to make adjustments in their pay and human resource arrangements to accommodate fathers' and partners' absence. To assess all of these issues, this chapter focuses on employer responses to DAPP.

The chapter asks the following questions:

- Were employers aware of the availability of DAPP, and did their awareness change following the commencement of DAPP?
- What expectations did employers have about fathers' and partners' use of DAPP before the payment was available, and what was their experience of uptake after the payment commenced?
- What were employers' views about fathers taking leave following a birth, and did these views change following the commencement of DAPP?
- Did the introduction of DAPP influence employers' paternity leave practices, organisational operations, or the organisational culture around new fathers taking leave?
- Were employers aware of the top-up provision in DAPP, and did they use this provision?
- Following its introduction, what were employers' perceptions of the effects of DAPP within families?

The data used to answer these questions come from in-depth interviews with samples of employers conducted before and after the commencement of DAPP. Interviews were conducted with 55 employers before the introduction of DAPP and 38 employers after DAPP commenced. For details of the interview samples and data collection procedures, see section 1.5.2 in Chapter 1.

10.1 Employers' knowledge and understanding of DAPP

Employers' knowledge and understanding of DAPP is important, since they must accommodate fathers taking unpaid leave in order to receive DAPP. Moreover, employers may be conduits of information to new fathers about the payment. There were considerable differences in employer knowledge of DAPP in the post-DAPP interviews compared to the pre-DAPP ones.

In the pre-DAPP interviews, a majority (30 of 55) of employers were entirely unaware of DAPP or had very minimal awareness of it at the time of the interviews. One in five employers (11 of 55) had some prior knowledge of DAPP, which they received from a variety of sources including the news media

(n=1), queries from interested employees (n=2), a human resources or payroll-related newsletter (n=3), and direct communication from Centrelink or the Australian Tax Office (n=5).⁴²

Following the commencement of DAPP, most employers (34 of 38) were aware of DAPP and its general entitlements, such as the payment being administered through Centrelink and the employee requirement to take two weeks' unpaid leave from their employer. Only four employers were minimally aware of DAPP and considered conducting further research as a result of being interviewed. As one of these employers said:

I wasn't fully aware until you rang and then I sort of went on the website and had a look to familiarise myself. I knew it was available but I didn't know what period of time I could get, so yeah just not aware. (Large business, public sector, construction industry)

In the post-DAPP interviews, employers cited the media, the internet, Centrelink, circulated periodicals and staff training as their primary sources of information on DAPP. Some mentioned the following:

I am a subscriber to...HR newsletters so it came via that. (Medium business, private sector, professional, scientific and technical services)

We have it up on our website for all our staff, the flyer from the Federal Government, and there's also been articles in our internal newsletter to let people know that this exists and always when somebody is about to have a child we have a conversation and talk it through with them. (Large business, public sector, public administration and safety industry)

I got it from formal training, because we would attend payroll trainings every year which is provided [with some] professional trainers and associations. (Large business, private sector, manufacturing industry)

Employers compared the DAPP advertising unfavourably to the initial PPL advertising, saying that the Government's campaign to educate employers about DAPP was not as widespread or effective as the initial PPL scheme. Many employers felt that they and their employees were less knowledgeable about the process, with one stating:

I must admit when the paid maternity leave was introduced I did receive more information about it. Like, I actually received material about it whereas with the paid paternity leave I didn't actually receive anything. (Large business, private sector, retail trade industry)

I don't remember actually seeing anything. Has there been a lot of media coverage about it? The paid maternity leave, 18 weeks, that was pretty much advertised and everyone knew about it but I don't think too many people know about the dad leave. (Large business, public sector, construction industry)

Employers were also generally unclear about how their employees gathered or accessed information relating to DAPP, but some identified word of mouth, the media, and the employer's communication channels (e.g. human resources, employee newsletters and staff meetings) as possible sources of information for employees.

⁴² For the remaining employers (n=14) the question of how they heard about DAPP was not asked.

I have developed a fact sheet we put on our intranet. We also advised all of our branch managers that it was to be implemented on 1 January and I should imagine also word of mouth. Yes, they are fairly succinct and it's all incorporated in the fact sheet that I've developed. (Large business, public sector, public administration and safety industry)

So it is by word of mouth that we in HR become aware that someone is expecting or there's an addition to the family, because we wouldn't know otherwise. If we become aware then we usually approach the employee and give a little bit of an overview, what can be given to them. Obviously the Dad and Partner Pay now forms part of that information that we provide to them. (Large business, private sector, professional, scientific and technical services industry)

Sometimes employers suggested they were able to advise employees on the leave due to the industry or sector they were in. For example, employers who tended to be more aware of new policies, such as trade unions and legal services firms, were more likely to be familiar with the particulars of DAPP.

Because we're a trade union we knew about it and we advised our members that it existed. We have an electronic newsletter that we send out weekly and we had an article in our electronic newsletter. (Small business, private sector, other services industry)

Several employers believed that their employees had experienced difficulty with the DAPP application process. The main issue was that it took a long time for some employees to access the payment because of confusion regarding DAPP's administration through Centrelink, rather than the employer, in contrast to PPL. In some cases, employers expressed uncertainty whether DAPP impacted on their employees' other leave entitlements (large business, public sector, public administration and safety industry): "It's not complex to do, it's actually apparently relatively simple to do, but it's the complexity of juggling..."

In a similar vein, another employer said:

The management of it, the administration of it would be challenging I think. Because you've got what I call multiple transactions going on for the individual but operationally I think it comes down to what makes sense for the individual in terms of how much time they want to have off. I think it's probably easier for the individual to say, I'm going to take leave from the company's leave policy than to say, I'll take unpaid and I'll apply for something else from the Government. I think that's actually administratively more complex for the individual and more complex for the organisation. (Large business, private sector, information media and telecommunications industry)

10.2 DAPP uptake and its effects on father leave taking

What expectations did employers have about fathers' and partners' use of DAPP before the payment was available? Employers were asked in both the pre-DAPP and post-DAPP interviews if they felt DAPP would impact their employees' leave taking behaviours. In the pre-DAPP interviews, employers were asked to anticipate whether their employees were likely to access the payment. In the post-DAPP interviews, not all employers were certain if employees had accessed DAPP even though the payment was available.

10.2.1 Employers expectations before DAPP commenced

Before DAPP commenced, there was near universal support for the idea of fathers taking leave around the birth or adoption of a child, and a significant number of employers (26 of 38) expressed in-principle support for DAPP specifically. However, at that stage, prior to the availability of the payment, employer responses were mixed as to whether their employees were likely to take the payment. Most employers, when asked to assess whether they believed their staff were likely to access DAPP, tended to apply a rudimentary cost-benefit analysis to the decision, balancing DAPP's NMW entitlement against their existing wage levels and other types of leave to which the employee might already be entitled.

Those who said they believed their employees were *likely or highly likely* to want to use DAPP (n=13) tended to be employers with younger staff on lower incomes, with no dedicated secondary carer's leave. For instance the following two comments from employers interviewed pre-DAPP indicate this:

I think – because what is happening now, people are taking unpaid leave to support their partners, or their wife or spouses, if they have babies. So I think they'll use the option.
(Medium business, private sector, professional, scientific, and technical services industry)

I would say, yes, people would take up that offer. We had another case of a gentleman wanting to take unpaid leave, but it was for about a six month period and it was going to be unpaid and he couldn't afford to do that. So even two weeks, I think that would be great ... I think, if it's marketed prior and it's organised prior, you can always save and put some savings aside I guess to, so you can pay all your bills at the same time and then live on that minimum wage if you're paying off a mortgage, and you're used to being at that higher rate of pay.
(Medium business, private sector, medical industry)

Employers who thought their staff were likely to access DAPP regardless of their age, income or employment status were those who personally regarded parenthood as a major life event, and believed their staff were likely to forgo their normal wage, if it was above NMW, in order to spend more time at home with the family. For example:

Of course you would, maybe. There will be plenty of people who will. Because I'm a bloke and I've had a child – okay, it's a while ago now – but I'm quite qualified to talk to this: it's a big deal. (Large business, public sector, education and training industry; emphasis added)

Employers who expressly doubted or were uncertain whether staff would use DAPP tended to be those who already offered some form of paid leave to fathers or partners, or had employees on higher incomes. These employers typically considered that uptake of the payment would depend on the individual employee's financial circumstances. A common perception was that an employee's willingness to take unpaid leave to access DAPP would depend on whether that employee could afford to forgo his/her normal salary and live on the NMW for two weeks. The relatively low value of the NMW (\$606/week at the time of interviews), and the inability to combine this payment with existing entitlements (as the payment was understood) such as company parental leave or annual leave, was the most common reason cited by employers who believed their staff were *unlikely* to use the DAPP:

I would be surprised if anyone would then take the extra time off on unpaid leave from us to take it up on the minimum wage through Centrelink – very much doubt it. The other thing to bear in mind here is that we're very flexible with staff and annual leave. They obviously get four weeks' annual leave. Often times when people know that they're going to be becoming a parent, they defer taking that leave until the time of the birth and then take some of their annual leave to coincide with it. So that gives them a chance to have quite an extended period on full pay. I therefore doubt that they would opt to take unpaid leave just to get the advantage of that little bit – well, not a little bit – but the payment from Centrelink. (Large business, private sector, arts and recreation services sector)

The dads that we have are the 30 to 40-year-olds. They are the high-end earners. They are the breadwinners. So I can't imagine– there's no reason why they would take leave without pay, I wouldn't think anyway. [They would more likely use] their annual leave or sick leave, or long-service leave, depending on how long they'd been in the company ... We allow them to do all of those things. (Large business, private sector, information media and telecommunications industry)

Another, less prevalent thread that emerged in the pre-DAPP interviews was a sense among some employers that fathers or partners may not actually *want* to extend the length of time they spend at home with a new child:

I don't think so, to be honest. They might take a couple of days' annual leave or whatever. But I don't get the feeling that people take a lot of time off when their child is born. (Large business, private sector, retail industry)

[Most fathers] if there would be anything, it would be like a week after, you know, just taking leave to be home with the baby – but yes, just asking for a week's leave, not stipulating that it would be parental leave or anything ... That's probably all they can cope with, with a new baby. (Large business, private sector, accommodation and food services industry)

It really depends – I think some people maybe they don't want to take too much longer because [they'd] rather make more money or something. (Large business, private sector, retail trade industry)

10.2.2 Employer perceptions of DAPP uptake and related leave taking

The post-DAPP interviews sought information from employers whose employees had taken unpaid leave around the birth or adoption of a child, and those who had not taken leave, or used some other form of leave. Of the 38 employers interviewed after the commencement of DAPP, 27 employers (small n=2, medium n=10, large n=15) had at least one employee who was a father or partner who took unpaid parental leave around the birth or adoption of a child from January 1 2013. Of these, 22 employers reported that their employees took unpaid leave for the purpose of accessing DAPP. Eleven employers (small, n=1, medium, n=3, large, n=7) reported having employees who did not take unpaid parental leave but did take other forms of leave around the birth or adoption of a child from 1 January 2013.

It was sometimes difficult for employers to be certain whether an employee used DAPP, since there is no requirement that employees inform their employers if they take DAPP. Moreover, communication about receipt of DAPP is between the employee and Centrelink. For example, one employer said: "We don't know if an employee has actually applied for it or not..." (large business, private sector, manufacturing industry). Many employers assumed that their employees had taken unpaid leave to

access DAPP because the employees specifically commented or asked about the entitlement (n=22), but a few employers were unable to confirm whether their employees had taken unpaid leave with the intention of applying for DAPP (n=5).

Where unpaid leave had been taken by fathers, the majority of employers reported that employees were taking one to two weeks of leave around the birth of a child. Some employees took up to four weeks, most often in the combination of two weeks' unpaid leave plus two weeks' annual leave (n=5).

Employers reported that in previous years, fathers would access either one type of leave (for example, dedicated paid paternity/secondary carer leave) or annual leave and sometimes combine that leave with other forms of leave, such as unpaid leave, long service leave, personal leave or sick leave. Employers indicated that the average length of time taken by fathers prior to the introduction of DAPP was two weeks.

Among employers with limited or no dedicated paternity/secondary carer leave, most reported that fathers tended to take unpaid leave (along with DAPP) or annual leave around the birth or adoption of a child. The average length of time taken by fathers with limited or no dedicated paternity/secondary carer leave was also two weeks.

Few small employers interviewed after the commencement of DAPP provided dedicated paternity/secondary carer leave, and the effect of DAPP was particularly marked in this group. Eight of nine smaller employers (with fewer than 100 employees) had at least one employee take unpaid leave around the birth or adoption of a child in the previous year. In other cases, a few medium (n=2) and large-sized employers (n=3) reported that their employees extended their leave to four weeks, including two weeks' unpaid leave (presumably to access DAPP) and two weeks' annual leave (n=5).

Employers were asked how likely they believed their employees were to access DAPP in the future. As with the pre-DAPP responses, many employers said they thought it depended on the individual employee's financial circumstances. While some high income earners did take DAPP, the majority of employers believed that fathers with higher incomes or who had access to a company's dedicated paternity/secondary carer leave were less likely to take DAPP:

Yeah, I would say [the uptake would be] very small, because what they would be getting from Centrelink, is a lot less than what their normal pay would be. (Large business, private sector, financial and insurance services industry)

One employer said with more certainty that the DAPP level of pay was not enough to encourage the employee to take the leave:

We have had one employee that has just gone off - his wife's just had a child, and he's not taking unpaid leave because he says he can't afford it, because what he would get paid under the parental dad and parents' scheme [sic] is not as much as what he would normally get paid. (Medium business, private sector, wholesale trade industry)

10.2.3 Employer experiences in accommodating DAPP

Overall, post-DAPP employers had accepted the introduction of DAPP and considered DAPP easy for employers to accommodate. They often remarked that it was up to the employee to contact Centrelink, and the employer to provide the unpaid leave, which was part of their normal leave process: “All the companies really have to do is to provide the leave without pay and the person gets paid regularly by the government” (large business, private sector, professional, scientific and technical services industry).

However, some employers commented on the different approaches required to accommodate this leave. Leave approval depended on the employee’s position and work area, when the leave was requested and if the necessary resources were available. If the leave was expected to be longer than the standard DAPP or company paternity leave time period, the employer would be required to hire temporary staff or distribute work across other employees:

It would depend entirely on staffing and other resources. As a company, we have a mantra to try and accommodate, and where possible be flexible to employees with children, family, or any matter - there could be a dependent parent. But basically we look after our employees. Where possible we try and accommodate all reasonable requests. Sometimes that’s not always possible. (Medium business, private sector, wholesale trade industry)

More mention was made of the legislative change and the need for companies to comply with new legislation in the pre-DAPP interviews than in the post-DAPP interviews (undertaken after DAPP had been operational for almost one year). In the pre-DAPP interviews, a significant number of employers remarked that if an eligible employee asked for leave without pay to access DAPP, the employer would comply with the law, as they would with any other mandated employee entitlement.

When the laws change they [the managers] may sit down and have a discussion, but I can’t see how there would be any problem with it. Once it happens to one case, it just becomes the norm really...When the policy comes in place, obviously our policies as procedures manuals will be updated to incorporate the new laws, but generally – I mean, personally I think Australia is in the Dark Ages when it comes to taking parental leave – but apart from that, as I understand it, the law is basically we have to do what the law says and anything offered above it within an employment contract is extra really. (Large business, private sector, financial and insurance services industry)

Well I guess they are obliged to do that [allow unpaid leave]. (Large business, private sector, manufacturing industry)

10.2.4 Summary

In both pre- and post-DAPP interviews, employers were generally supportive of their employees taking time off around the birth or adoption of a child. Typically this was a period of one to two weeks. Overall, employer responses indicated that they did not think DAPP had significantly increased the amount of time from work that fathers are taking around the birth of a child. However, based on the responses from the employers interviewed, DAPP may have altered the type of leave that new fathers are taking, with DAPP being taken instead of two weeks of annual leave. This was particularly true for

the smaller employers in our sample, who generally did not offer any form of dedicated paternity/secondary carer leave.

10.3 Employers' views about fathers taking leave around time of birth

As noted above, most employers expressed in-principle support for the idea of fathers taking leave around the birth or adoption of a child. Employers' views about fathers taking leave around the time of birth were generally very positive. Responses were particularly positive where employees were taking one to two weeks' leave, with employers noting that business disruption was minimal, could be 'worked around' and that 'government regulation' was thus complied with. There was also no apparent difference in employer support for DAPP according to organisation size or industry sector.

10.3.1 General views on paternity leave

In the pre- and post-DAPP interviews, employers were asked to assess where they thought their workplaces fell on a scale from 'very open' (score=1) to 'very against' (score=5) the idea of fathers taking time off around the birth or adoption of a new child.⁴³ Overall, employer responses were slightly more positive following the commencement of DAPP. In the pre-DAPP interviews, while many employers felt their workplaces were relatively supportive of the idea in principle, the majority rated their workplaces as being 'fairly-open' (2) to 'averagely-open' (3) open to the idea,⁴⁴ citing operational and cultural factors as the main impediments to accommodating requests for leave around the birth or adoption of a child. In the post-DAPP interviews, all employers provided a response to the question (n=38), of which the vast majority felt their workplaces were 'very open' (1) to the idea (n=26), followed by 'fairly open' (2) to the idea (n=9), saying that the concept of DAPP matched the company culture well and that organisational practices and procedures were open to the new payment. As one employer said:

I don't think it could be much more streamlined. It's very open, it's very accessible, it's talked about well in advance and all worked through, everybody knows what they're doing, payroll have completely switched on to the whole thing and ... the view is [as] this is available, of course we'll support people that just had a child. It's pretty important. Of course we'll help them to settle the baby into the family. (Large business, public sector, public administration and safety industry)

The results from the post-DAPP interviews indicate a small, but positive, shift in employer norms in favour of fathers taking paternity/secondary carer leave. Some employers said that the culture of the workplace was changing, with more fathers taking time off than in previous years.

I think it's good. We have had more men have children this year, as opposed to women, and previously where men would have had children, say, may have been a little bit more reluctant to be taking leave and knowing that it is completely unpaid leave and there's no support

⁴³Employers were not directly prompted to comment on why the rating was given.

⁴⁴ Note, due to the semi-structured nature of the interviews, not all pre-DAPP employers were directly asked the ranking question

mechanism behind it all. Considering we do - we are an international company where a lot of our team members would come in from overseas, and in the understanding that there is very little support for men when they do have children here, there was that missing link. So in having that government paid parental leave it does provide a little bit more support there for their families this far. (Medium business, private sector, wholesale trade industry)

I think it's just this generation of males, I think they are quite receptive to be around at the time of the birth. So it's sort of the attitude has changed a little bit. (Large business, private sector, professional, scientific and technical services industry)

Only three post-DAPP employers rated their workplaces as 'averagely-open' to the idea (3). One said (large business, private sector, transport, postal and warehousing industry): "Well I think because it is legislated, I mean companies will have to work around it whether they like it or not." Another (large business, private sector, manufacturing industry) simply noted that requests for the leave were easy to accommodate, and that fathers taking the leave did not impact on the culture of the workplace. However, one employer expressed a negative view towards DAPP and the employee who took it, believing that the employee had 'taken advantage' of the leave and the company, as well as potentially "annoyed" other staff:

He had a variety of leave. We have a parental payment scheme within the firm ourselves, and he had some of that to start with. Then he had the actual parental leave that he took, where he wasn't paid. Then he had the leave without pay, so he'd get the paid leave from the Government. Saying that, I'm not actually sure if he didn't actually also get not just the Government payment for the fathers, but also for the mothers. We have return to work bonuses here, and he got that. (Medium business, private sector, administrative and support services industry)

10.3.2 Employers' perceptions of operational issues

In the pre-DAPP interviews, most employers did not feel that the current patterns of leave-taking among fathers around the birth or adoption of a child were difficult to accommodate. Typically the time taken was one to two weeks and many employers felt that providing two weeks' unpaid leave to allow employees to access DAPP would not be problematic, comparing it to the existing pattern of accessing two weeks annual leave:

I mean, it's really no different to them saying, I want two weeks off, when they have a baby, whether we're paying them holiday pay or whether we're not paying them. I mean, it probably makes it easier on us, because we don't have to pay them and Centrelink does. (Small business, private sector, retail trade industry)

Employer responses in the post-DAPP interviews were similar, focusing on the operational requirements of the business and the ability to cover employees on leave. One employer noted that the level of support for fathers taking leave depended on the amount of time they requested to be away from work. Beyond the customary requests for one to two weeks' leave, the employer noted a preference for extended leave, noting that leave of four to eight weeks created operational burdens for the business:

I would prefer if they asked for the three, six or 12 months because then we can actually replace them and have coverage for their role, because that just makes it easier because there's someone who's going to be out of the business for three, six or 12 months, that's fine,

because then we can actually legitimately bring someone in to cover their role for that period. (Medium business, private sector, administrative and support services industry)

Only two employers in post-DAPP interviews directly mentioned that occasionally a request for leave was difficult to accommodate, and again noted the slight increase to four weeks, up from two weeks leave:

I'd say they're accepting of the three days' off, but in the industry, unless they're going to still be doing some work from home, that makes it difficult. There would be some that have already been through and had their children that wouldn't be as happy that someone was going to front up to them and say, I'm not going to be here for X amount of time. (Medium business, private sector, administrative and support services industry)

Look, normally they would actually - I mean if they'd applied for leave without pay I guess we would have to have a look at it on a ... case by case basis. Because obviously if people have annual leave accrued we are quite reluctant to give leave without pay.⁴⁵ So you have to look at it in that context. But to the best of my knowledge when there was a birth they just took the two weeks and then came back to work so there was no additional leave. So with this Dad and Partner Pay now we find that, as I said to you, they're away four weeks instead of two. (Large business, private sector, professional, scientific and technical services industry)

10.4 DAPP's Influence on existing paternity leave policies and practices, operations and culture

Of the 38 employers interviewed following the commencement of DAPP, just over half (n=21) had a dedicated paid paternity/secondary carer leave policy (large n=14, medium n=6, small n=1). The majority of these schemes came under company policy rather than union negotiated agreements. The period of leave provided ranged from three days to 12 weeks, with the majority (n=17) providing one to two weeks' (or five to 10 days) leave at full pay. Two employers offered 10 weeks' paid paternity leave and one offered three months.

Of the 55 employers in the pre-DAPP sample, less than half (n=20) reported offering dedicated paternity/secondary carer leave. In most cases, this benefit fell under company policy, and enterprise agreements accounted for only a small fraction of cases. The period of leave offered ranged from a minimum of two days to a maximum of four weeks at full pay. The median number of working days offered was five (one week).⁴⁶

Some informal arrangements were also reported among employers in the pre-DAPP sample. These included:

1. allowing fathers to take two to three days' full-pay at the discretion of the manager;
2. access to two weeks of sick leave, if accrued;
3. access to one week of carer's leave; and

⁴⁵ This quote suggests the interviewee's possible lack of knowledge of the NES entitlement to 12 months unpaid parental leave. Occasionally interviewers would correct employer understanding of entitlements during the interview if it was appropriate, in this case, it was not deemed appropriate.

⁴⁶ Note, this accords with research on the availability of paid paternity leave. See Baird M, Frino B and Williamson S 2009 'Paid Maternity and Paternity Leave and the Emergence of 'Equality Bargaining' in Australia: an Analysis of Enterprise Agreements, 2003-2007', *Australian Bulletin of Labour*, vol.35:4, pp. 671-91

4. allowing staff to salary sacrifice for extra time off, in addition to one week's paid leave for the secondary carer.

Some employers in the pre-DAPP sample, who rated themselves as being 'very open' to the idea of fathers taking leave around the birth or adoption of a child, reported using informal arrangements to accommodate secondary care-giving responsibilities, particularly in reference to a difficult pregnancy or a medical crisis. One very large employer reported that paternity/secondary carer leave was occurring inside the organisation, but was often not reported (i.e. the employee was taking the leave with the approval of a manager, but it was not being reported to the system), making it difficult to ascertain exact usage. Both large and small firms in the pre-DAPP interviews reported informal practices:

Because we're a small firm, we're pretty informal and people take time off ... I'm in my 50s, but I've got four children so I understand. One of the gentlemen– they had a baby last August; he had considerable time off over that period and time off to go to the doctors and the nurses and things like that. (Small business, private sector, financial and insurance services industry)

What happens is that the fathers predominantly would take a week off and it just wouldn't be recorded; unfortunately, we don't always record. I think the take up is pretty good, it's just that we don't always record when people are going off on the secondary parental leave. (Large business, private sector, transport, postal and warehousing industry)

Most post-DAPP employers believed that DAPP had little or no influence on their existing paternity leave policies and practices. For instance, one said (medium business, private sector, professional, scientific and technical services industry): "our actual process or practice, no, we haven't changed". However, some (n=6) employers noted that their organisations' current policies were in the process of being reviewed or updated since DAPP commenced, or that they had incorporated information about DAPP in their companies' policy documents (large business, private sector, professional, scientific and technical services industry): "Obviously the Dad and Partner Pay now forms part of that information that we provide to them [employees]".

Similarly to the minimal impact on policies and practices noted above, over half of post-DAPP employers believed that fathers taking time off work and DAPP had little or no impact on their workplace culture (n=20). However, those who considered that DAPP had influenced their workplace (n=13) in some way were predominantly positive (n=12), stating that permitting fathers to take time off work helped create a supportive environment for employees, or that it had complemented the organisational culture and enhanced the culture the organisation was wanting to achieve (medium business, private sector, professional, scientific and technical services industry): "Yes. People know that they can request time off for family reasons and for the birth of a new baby and it won't be declined".

A few positive impacts were noted by employers:

I think it's actually complementary to the existing culture. The existing culture is very strongly supportive of flexible workforce and work-life balance and things like that. It's quite consistent

with the general approach. I don't know that it's modified it any but it just fits very neatly with the overall approach. (Large business, public sector, public administration and safety industry)

I actually think it has been a positive. I actually think it is positive. I definitely do believe that moving into, like the government bringing in a paid parental leave and also too for like our company personally, bringing in a top up arrangement, even if it is only nine weeks. But even 18 weeks of \$622.10, that takes such a burden off, because for families now you've got to have two incomes. (Large business, private sector, manufacturing industry)

One employer, while considering that DAPP had little or no immediate impact in their own workplace, commented in a positive manner: "I suspect that in years to come it'll be a lot more entrenched and the fact that it's only two weeks doesn't - it doesn't disrupt the organisation that much and also because it's eligible to be taken within the first 52 weeks the organisation can work around or work in conjunction with the employee" (large business, public sector, public administration and safety industry).

Only one post-DAPP employer seemed to consider that DAPP had negative impacts on the workplace culture, and this was because of a particular individual employee's use of the paternity leave overall: "In this situation, for him, yes, because it was perceived that he took advantage of the firm with regard to our policy, whereas in his position, he should have been advising the firm. We had loopholes that cost money in the long run" (medium business, private sector, administrative and support services industry).⁴⁷

10.5 Employers' knowledge and use of top-up payment provision

Under the PPL rules⁴⁸, employers may make a top-up payment to supplement a person's Dad and Partner Pay during their DAPP period. The "top-up payment" may be an adjustment to partial or full income replacement.

Top-up payments were not widely used nor well known by employers interviewed in the post-DAPP sample. Only one employer stated that their employer had issued top-up payments to DAPP (small business, private sector, other services industry). For those employers that did not top-up DAPP, many employers said that they did not know it was possible or had not considered it. Others stated that making a top-up payment did not make sense because unpaid leave is required to receive the payment:

⁴⁷ This case is also considered in section 10.3.1 above.

⁴⁸ 3A.9 What is taken to be not working

1. A person is taken to be not working if:
 - a. the person is on unpaid leave from their employer and during the period of unpaid leave, the person receives workers' compensation payments or accident compensation payments from another body in relation to the person's employment with their employer; or
 - b. the person receives a top-up payment from their employer during or in relation to their DAPP period.
2. For paragraph (1)(b), a top-up payment means a payment made by an employer to an employee that supplements a person's dad and partner pay during their DAPP period.

Note The "top-up payment" may be an adjustment to partial or full income replacement. The Rules are at comlaw.gov.au under Legislative Instruments.

Well, we didn't know it was possible because our understanding was they had to be on leave without pay, so that, in itself, doesn't make sense. If you're on leave without pay, how can you top-up someone? How can you top-up leave without pay? (Large business, private sector, financial and insurance services industry)

Another employer indicated there were budgetary constraints that prevented the employer from providing top-up payments:

Yes, but I guess just from a budgeting perspective, it's probably not feasible for us at our size. It's not to say that we wouldn't consider it in the future but as a short term, I wouldn't think it's something we would be able to implement, unfortunately. (Medium business, private sector, professional, scientific and technical services industry)

In another instance, the request for top-up payment was declined:

So the top-up options, I'll look at the notes on this review - was around that it would be more difficult to administer because you've got to then track the payments that employees receive from Government, et cetera. You know there was a concern that it meant that we were using the Government for paid parental leave scheme to subsidise our existing paid parental, so are we actually either using Government funding rather than just using our own policy. I'm not sure if that's a big concern but clearly they thought about it. (Large business, private sector, information media and telecommunications industry)

10.6 Employers' perceptions of effects in the family – opportunities for bonding, greater share of caring, greater support for mothers

Both the pre- and post-DAPP interviews focused on the workplace effects of DAPP because these were the issues that employers knew about most reliably. It was difficult for employers to speculate on the influence of DAPP in families and households. With these qualifications in mind, a couple of quotes suggest that employers are not yet witnessing significant shifts in time spent by fathers at home around the birth or adoption of a child

One theme that emerged more strongly in the pre-DAPP interviews than in the post-DAPP interviews was that many employers regard fathers'/partners' leave-taking around the birth or adoption of a new child as being important in supporting the mother, rather than to bond with, or participate directly in, the care-giving of the child. Employers tended to talk about fathers needing to take leave "to support their partners, or their wife or spouses if they have babies" (medium business, private sector, professional, scientific, and technical services industry); "to assist their wives" (large business, private sector, information media and telecommunications industry), "stay with the mum" (large business, private sector, professional, scientific and technical services) and "drive her to the hospital" (large business, private sector, retail trade industry).

They [mothers] are in hospital, so you need to be around. You need someone when you get home. (Large business, public sector, public administration and safety industry)

In the post-DAPP interviews, the norm appeared to be for fathers to take a period of short leave at or around the birth of a child. One employer (medium business, private sector, administrative and

support services industry) said: “I’m yet to have worked with a dad that’s taken extended parental leave.”

There was also one quote from an employer about returning to work sooner when the father realised work was better than home:

...most (fathers) would take five days and some might take up to two weeks but most would take five days. Often they’re quite keen to come back to work once they’ve realised they get no sleep at home. (Large business, private sector, information media and telecommunications industry)

10.7 Conclusions

This chapter has examined a range of aspects of employers’ responses to DAPP before and after the commencement of the payment. These include employers’ knowledge of DAPP, their views about fathers taking leave around the time of a birth or adoption of a child, their expectations and experience in the uptake of DAPP, the effects of DAPP on practices and culture within organisations, and employers’ observations about the impact of DAPP within families.

Employers were more knowledgeable about DAPP following its introduction than before it commenced, regardless of whether their employees had asked for unpaid leave or not. The majority of post-DAPP employers knew of DAPP, while most pre-DAPP employers had been unaware of DAPP. However, both before and after the commencement of DAPP, employers were largely unaware of the top-up provisions (allowing them to top-up employee pay above the NMW to a wage replacement level). Post-DAPP interviews also made it clear that employers were not offering a top-up.

Employers were slightly more positive about and receptive to DAPP following its commencement. The majority of post-DAPP employers stated that their employer was ‘very open’ to the idea of fathers taking time off to look after a new child. This did not vary according to size or sector of organisations. In pre-DAPP interviews, the majority of employers were either ‘fairly-open’ or ‘averagely-open’ to the idea of fathers taking time off to look after a new child.

Based on the comparison of interviews with employers before and after the introduction of DAPP, it is possible to discern a small increase in leave being taken by fathers. In pre-DAPP interviews, it was reported that the average time fathers were taking was five days/one week. In post-DAPP interviews, two weeks was more commonly reported as the time fathers were taking. Furthermore, there were indications that where employees were using two weeks’ unpaid leave to access DAPP, they were using it instead of their annual leave, thus potentially leaving more annual leave for time off later with the family.

However, some employers in both the pre- and post-DAPP interviews thought the rate at which DAPP is paid would be a barrier to take-up. Those who felt that employees would not access DAPP said that

the rate of pay for DAPP (at the NMW) was not enough to substitute for the employee's normal rate of pay.

It appears that the introduction of DAPP has formalised birth-related leave arrangements in some companies. There was less mention of informal leave arrangements in the post-DAPP interviews, whereas in the pre-DAPP interviews, informal arrangements, such as the use of unreported leave, sick or carer's leave for paternity leave purposes, were reported.

However, most employers interviewed following the commencement of DAPP thought that it had little or no influence on their existing paternity leave policies. This was consistent with employers' expectations as expressed in pre-DAPP interviews. Nevertheless, following the commencement of DAPP, a few employers had incorporated information about the new payment into their policy documents.

Most employers in both pre- and post-DAPP interviews believed that fathers taking time off work had little or no impact on the culture of the workplace. However, amongst post-DAPP employers who considered potential impacts, mainly positive influences on the overall workplace culture were cited. The majority of post-DAPP employers also said that colleagues were not bothered or affected by fathers taking time off work.

In summary, employer responses were consistent across size and sector in both the pre- and post-DAPP interviews and there was no clearly discernible reaction occurring in small business. Both before and after the commencement of DAPP, employers expressed support for fathers taking leave at the birth or adoption of a child, and this was typically understood to be one to two weeks. There was a modest increase in support for the DAPP payment following its commencement: in post-DAPP interviews, employers were 'very open' to DAPP, whereas prior to DAPP employers had felt 'fairly open' to it.

Based on these results, it appears that employers have accepted the introduction of DAPP and are now more likely to regard the norm for fathers taking leave around the birth or adoption of a child as two weeks. DAPP appears to have cemented the previous 'soft' norm of one to two weeks into a 'hard' norm of two weeks. This period of time can be, and is being, accommodated by employers into their workplace practices and cultures.

11 Conclusion – DAPP evaluation

This part of the report has focused on assessing progress towards DAPP's main objectives. It has focused on how DAPP has affected new fathers' leave taking and its impact on their opportunities to support new mothers, contribute to the care of their newborn, and bond with their newborn. The evaluation has also examined employer responses to DAPP.

DAPP provides working fathers and partners with two weeks' pay at the national minimum wage when they take unpaid leave or are not in paid employment following the birth or adoption of a new child. The evaluation has shown that DAPP's main effects arise, first, through the financial support it provides for fathers to take additional time away from work around the time of a birth. This has resulted in fathers taking slightly longer leave, on average, in the first two months after a birth, thus providing them with additional opportunities to support mothers and to care for and bond with their newborns. Fathers also commonly substitute DAPP for paid holiday leave they would otherwise have taken after a birth, with the result that they save their holiday leave for use later. For some families, particularly those with high care needs, limited extended family support and/or limited paid leave for the father, DAPP has been particularly important in providing some financial security when fathers take essential unpaid leave. DAPP's other significant impact appears to have been in fostering a change in the assumptions and attitudes of fathers and employers towards more widespread acceptance and support for fathers and partners taking leave for parenting following a birth.

11.1 DAPP uptake

Knowledge of the availability of DAPP is widespread, with over three quarters (77 per cent) of eligible fathers whose babies were born nine months after the payment commenced being aware of DAPP. The evaluation estimated that about 36 per cent of eligible fathers chose to take DAPP. In line with most expectations, DAPP uptake was significantly higher amongst fathers who had limited paid leave eligibility such as casually employed and self-employed fathers (around 50 per cent uptake for both groups). The top-up provision in DAPP was not widely known, and virtually unused.

11.2 DAPP's effect on fathers' leave taking following a birth

Most fathers take some time away from work following a birth (at least three quarters of fathers do so during the first 6 months), especially if they are eligible for paid leave of some kind. In the immediate post-birth period (up to two months after the birth), the most common pattern is for fathers to take two weeks of leave or less. DAPP appears to have been used by fathers to substitute for paid leave (most commonly annual or holiday leave) they would otherwise have used following a birth. As a result of this substitution and the fact that most eligible fathers do not take DAPP, the impact of DAPP on the average amount of leave all fathers take in the first six months after a birth has been small. Thus, DAPP appears to have increased the amount of time all fathers take away from work by about one day during the first two months. However, it has had no effect on the total leave all fathers take in the first six months, or in the likelihood that they would take leave at all. Nevertheless, the substitution of

DAPP for other paid leave means that fathers who use DAPP will generally have the opportunity to take other paid leave at times that work best for them. Interview data indicated that fathers were 'banking' this leave for later use and expected to take it in the first 12-18 months of the baby's life.

While the overall average impact of DAPP on leave taking was small, for some fathers DAPP had a significant impact. First, comparing post-DAPP fathers who took DAPP with those who chose not to take it showed that, all other things being equal, those who took DAPP had an average of 3 days more leave than those who did not take DAPP. This represented a difference of nearly 25 per cent in the leave fathers took. Secondly, interview data indicated that DAPP was particularly important in allowing fathers who had previously had no access to paid leave to take leave. Second, it made an essential contribution for some fathers whose families had high support needs following a birth, who had exhausted their paid leave entitlements, and whose families had limited extended family support.

11.3 DAPP's effect on opportunities for fathers to provide support for mothers and participate in newborn care

The desire to provide support for new mothers and participate in the care of their newborn babies is a prime motivation for fathers to take time away from work following a birth. To the extent that DAPP allows fathers to take additional leave, it does provide new opportunities for fathers to participate and contribute in these ways. Online survey data suggested that, on average, fathers did slightly increase their contribution to household work and their activities with the newborn in the first two months after the birth, following the introduction of DAPP. This is highly consistent with the small change in length of leave taken by fathers during this period (noted above).

Several contextual factors affect the household and childcare contributions fathers make following a birth, and whether DAPP is important in a particular family depends on how its availability interacts with these factors. First, many families receive varying degrees and types of support from extended family following a birth, and fathers often adapt their leave taking to complement this help. Second, fathers' leave eligibility, particularly for paid leave, is important since fathers are generally unwilling to take unpaid leave. Third, workplace cultures and work demands may affect fathers' leave decisions, so that unsupportive workplace cultures and/or high work demands may discourage fathers from taking leave or from taking as much leave as they would like. Finally, birth order may be important. Family support needs are higher with second and higher order births than with first births, while mothers are often least confident with first births. Fathers may also attach different meanings to births depending on their order: first or (presumed) last births may be seen as particularly important. The interactions between these factors in families are often complex. As a result, DAPP's impact on the support and childcare contributions of fathers varies and depends on the particular characteristics and circumstances of families. However, it clearly increases the options available to fathers to take leave from work at times and in ways that best suit the individual circumstances of themselves and their families.

11.4 DAPP's effect on fathers' opportunity to bond with their newborns

The DAPP evaluation found that bonding with their new children is very important to most Australian fathers. Many hold the ideal of being involved, nurturing fathers, seeing this in contrast to a more traditional fatherhood role. Fathers see bonding as involving warm engagement with their babies, resulting in mutual joy in being with each other. They see bonding as being promoted most effectively by spending time with their newborns, participating in feeding, playing with and cuddling their children. Fathers hold different views about when this time with their new children is most essential for bonding. For example, some fathers see the opportunity to spend time with their babies consistently over the first and subsequent years (rather than focused around the time of birth) as especially important, while others see bonding as depending on having time when the baby has ceased exclusive breastfeeding. Given these complexities, it is difficult to tie the availability of DAPP to particular bonding experiences, though, as noted above, DAPP does seem to have slightly increased the average participation of new fathers in activities with their babies in the first two months after the birth. Once again, however, DAPP's important contribution is clearly in providing fathers with additional flexibility to arrange the time they feel they need to promote their bond with the baby when they think it is most valuable.

11.5 Employer responses

Before DAPP commenced, almost all employers interviewed for the evaluation expressed support for fathers taking leave around the time of a birth. Many also supported the idea of DAPP itself. However, most were unaware of DAPP or had minimal awareness of it. Employers expected that whether fathers used DAPP would depend on the relative size of their normal earnings and DAPP, with those on lower incomes expected to be most likely to use it.

Following the commencement of DAPP, most employers had become aware of it and accepted it. While the majority of employers did not think the availability of DAPP had affected their workplace culture and operations, some said that it had a positive effect by supporting employees to take time away from work after a birth, or by complementing or enhancing a culture the employer wanted to foster. Overall, employer responses were highly consistent with DAPP having a positive cultural effect in some workplaces, by increasing the acceptability of fathers taking parenting-related leave around the time of a birth, and promoting the value of engaged fatherhood.

11.6 Conclusion

For many fathers, DAPP represents a small initiative in the complex array of factors that impact on their decisions about what leave to take around the time of a birth, and how best to support their partner, participate in the care of their newborn and bond with it. It is therefore unsurprising that DAPP has had only a small effect on the average amount of leave all fathers take and their typical activities following a birth. Nevertheless, DAPP provides important additional flexibility for fathers to decide how best to support their families and achieve their aspirations for fatherhood. For those fathers who

choose to take DAPP, it allows them to take 25 per cent more leave than equivalent fathers who do not choose DAPP. Time is the most valuable commodity for fathers' ability to achieve these goals, and DAPP's effect has been to increase their ability to flexibly find the time they need with their families. This added flexibility is particularly important for fathers who previously had the most limited access to paid leave of any kind (notably those employed casually and the self-employed). But it is also of great value to fathers who have unexpectedly high demands placed on them due to birth and family circumstances, and have limited paid leave options. More generally, many fathers appear to have substituted unpaid leave and DAPP for the annual or holiday leave they would have previously used following a birth. This has the effect of freeing up annual and holiday leave for later use. The evaluation was not able to assess how this might have impacted on the leave taking and family-related activities of fathers over the full 12-18 months following a birth.

Several employers interviewed for the evaluation noted a steady shift over recent years to wider acceptance of new fathers taking leave following a birth specifically for parental purposes. Results from the evaluation strongly indicate that the commencement of DAPP made a substantial contribution to supporting and enhancing this trend. Fathers appear to have become more resolute in insisting on their right to take parenting leave around a birth, even when employers are not particularly supportive. Moreover, fathers feel that taking DAPP (with unpaid parental leave) appropriately marks their time away from work as focused on their paternal role, rather than obscuring it as taking annual or holiday leave would have done. At the same time, there were strong indications that, following the introduction of DAPP, employers and co-workers had generally become more accepting of fathers taking leave following a birth, and often more supportive of it as well. Overall, it appears that DAPP has cemented a 'soft' norm of fathers taking two weeks leave around the time of a birth. These cultural effects are very important, and are particularly remarkable given the short time that DAPP had been in operation at the time of the evaluation.

Part D – Conclusion

12 Conclusion

The introduction of Australia's first national paid parental leave scheme in 2011 was a significant social policy innovation with broad-ranging objectives. The Paid Parental Leave (PPL) scheme aims to support women's workforce participation, enhance maternal and child health and development, encourage gender equality, improve work-family balance, and increase fathers' and partners' involvement in the first months of a child's life. The PPL evaluation assessed the extent to which the policy objectives of the PPL scheme have been realised or are likely to be realised over the long term.

The PPL scheme is closely based on a model the Productivity Commission (2009) recommended as most likely to achieve the policy objectives. The PPL scheme aims to increase the amount of time mothers take off work following the birth or adoption of a child by providing up to 18 weeks Parental Leave Pay (PLP) at the rate of the national minimum wage to eligible parents while they remain away from paid work after the birth or adoption of a child. In most cases, PLP is provided to parents through their employers. Keeping in Touch (KIT) provisions allow PLP recipients to attend their workplaces for specified activities. From January 2013, the scheme has also included Dad and Partner Pay (DAPP) for fathers and partners to receive up to two weeks' pay at the rate of the national minimum wage when they take time away from work to help care for a newborn.

The Australian Government commissioned a consortium of independent Australian academics to conduct an evaluation of the PPL scheme. The evaluation used nationally representative quantitative and qualitative data, and included a prospective, quasi-experimental design. The evaluation collected comprehensive data on all the relevant outcomes and had sufficient statistical power to detect changes in those outcomes following the scheme's introduction.

This chapter draws together some of the common patterns found in the evaluation, focusing on the main ways the scheme operates as a whole to make progress towards achieving its goals.

Based on the findings of the evaluation, the following overall conclusions can be drawn:

- The scheme is achieving its objectives, most significantly extending the time parents take away from work following the birth of a child, while increasing the rate at which mothers return to work by the time their child is one year old.
- The positive impact of the scheme has been largely driven by reducing the financial barriers to parents taking leave following the birth of a child.
- The increase in leave-taking has led to flow-on effects, most notably improved maternal and child health, less stress and greater breastfeeding duration.
- In Australia mothers are still the primary carers for babies, however DAPP has led to a greater acceptance of fathers taking leave following a birth and a small but significant increase in the duration of leave some fathers take after a birth.

12.1 PPL reduced financial barriers to parents taking leave following a birth

The PPL scheme seeks to achieve its main policy goals largely by removing or reducing financial barriers to parents spending more time away from work with their newborns or newly adopted children. Through PLP the scheme provides financial support to primary carers (mostly birth mothers) to allow them to take time off work to care for the child after the child's birth or adoption. DAPP similarly provides fathers and partners with financial support to allow them to take time off work after the birth or adoption of a child.

The PPL evaluation demonstrated that, for many mothers and fathers, PPL reduced financial barriers to taking leave after a birth. PLP has been more effective in this respect than DAPP, most likely because the duration of PLP is much longer than that of DAPP, and its financial value is greater. In removing or reducing financial barriers to taking time away from work, PPL led to mothers and fathers spending more time away from work following a birth. Progress towards PPL's policy aims – supporting women's labour force participation, enhancing maternal and child health and development, improving gender equality and work-life balance, and increasing fathers' involvement with their newborns – has been achieved through the additional time that parents are able to spend away from work, and through the financial security the scheme provides families, following a birth.

The evaluation has found strong evidence that PPL has produced important changes in behaviour amongst new mothers, and clear indications that these changes arise from the removal or reduction of financial barriers to mothers' leave taking.

In the area of mothers' labour force participation:

- Following the introduction of PPL, fewer mothers return to work in the early months of their babies' lives. For example, evaluation results suggest that following the PPL scheme's introduction about 85 per cent of mothers remained away from work 18 weeks after the birth, some seven percentage points more than before PPL commenced.
- By about six months following the birth, pre-PPL and post-PPL mothers are equally likely to have returned to work (about 36 per cent have returned).
- By the time babies are 12 months old, PPL's effect is to slightly increase the proportion of mothers who have returned to work (by about 4 percentage points), given that nearly three quarters have returned by this point.
- All of these effects were strongest amongst those mothers for whom PPL had the largest effect in reducing financial barriers to taking longer away from work after the birth. In particular, PPL had larger than average effects on mothers who had been self-employed before the birth. There were also strong indications that mothers were more impacted by PPL

if they had been in casual jobs before the birth, had lower pre-birth incomes, had lower levels of formal education, or were single at the time of the birth.

In in-depth interviews mothers who said that PPL affected the timing of their return to work clearly identified the secure, predictable financial benefits it provided as the reasons for its effect. In effect, they said that PPL had reduced the financial barriers to spending longer at home with their babies.

Much of PPL's impact in other realms can be attributed to its effects in reducing financial barriers to mothers staying out of paid work for longer:

- The additional time mothers remain away from work is an important reason for the small improvement in their average physical health following the introduction of PPL because this often leads to mothers delaying the placement of children into formal childcare. As in-depth interviews confirmed, when babies enter formal childcare, they often pass infections on to their mothers who experience more physical health problems as a result.
- In a similar vein, PPL was associated with small improvements in some indicators of babies' health that appear to arise from mothers' delayed re-entry to paid work. In particular, a small decrease in the proportion of mothers reporting that their child had experienced an illness of a week or more was most likely due to delayed entry into childcare. Similarly, delayed return to work probably produced the small increase in mothers' continuation of breastfeeding after 6-7 months post-partum.
- The extra time some mothers were able to take away from work also had other benefits. In particular, it resulted in a small decline in mothers' tendency to feel rushed or pressed for time.
- Reducing financial barriers to taking time away from work also has direct effects on the stress and worry that mothers' reported feeling while away from work. In-depth interviews showed that mothers in insecure jobs and those on lower incomes often said that the availability of PPL had removed or reduced their worries about remaining away from work for the time they wished. This is the most likely explanation for the small average improvement in all mothers' mental health following the introduction of PPL.

DAPP also had impacts that can be attributed to its removal or reduction of financial barriers to fathers taking leave following the birth of a child.

In the area of fathers' leave taking:

- DAPP did increase the average time away from work taken by all fathers in the first two months after a birth by about one day to 11 days, even though it was taken by a minority of eligible fathers (about 36 per cent) and the proportion of fathers who took leave did not change after the introduction of DAPP. DAPP was also used by fathers to substitute for other

paid leave they might have used following a birth, allowing them to retain that leave for later use.

- In-depth interviews clearly showed that fathers who said that DAPP made a large difference to their leave taking were often those who had previously faced the most significant financial barriers to taking leave. For example, fathers who had no access to paid leave from their jobs (without DAPP) often felt this way.
- In effect, DAPP appears to have been taken by fathers for whom it most reduced financial barriers to taking leave. Thus, in the first six months after a birth, those fathers who did take DAPP took about 3 days more leave than comparable fathers who did not take it.
- Overall, though, DAPP had a fairly small effect on financial barriers to fathers taking leave because it is a short term payment at a rate below most men's normal earnings.

Overall, there can be no doubt that PPL removed or reduced financial barriers to taking leave for both mothers (mainly through PLP) and fathers (mainly through DAPP). The result was that parents were more able to care for their new babies in ways that fitted with their desires and expectations than they had been before the commencement of PPL. This also resulted in flow-on effects for children and mothers that were in-line with key policy aims, such as improved maternal and child health.

12.2 Supporting change in attitudes and assumptions amongst working parents and employers

In addition to removing or reducing financial barriers to parents being able to take time off work, the PPL scheme also had the potential to support changes in attitudes and assumptions amongst both working parents and their employers. Change of this kind was envisaged by the Productivity Commission when it noted that a paid parental leave scheme:

“would provide a strong signal that having a child and taking time out for family reasons is viewed by the community as part of the normal course of work and life for parents in the paid workforce.”

and that:

“It could stimulate further cultural shifts and attitudinal changes in the workplace and in the community more generally.” (p. 6.1)

Some of the PPL scheme's policy aims could be achieved if it prompted cultural and attitudinal change of the kind envisaged by the Productivity Commission. For example, encouraging gender equality, or increasing fathers' contributions to caring for newborns, might be achieved equally effectively through cultural and attitudinal change as through simply reducing financial barriers to

parents taking time away from work. The evaluation produced evidence related to this pathway for achieving policy aims too.

The main indications that the advent of PPL might be opening possibilities for cultural and attitudinal change were found in the DAPP evaluation. The advent of DAPP appears to have supported fathers and employers in opening a space to consider new expectations about men's role as fathers and how it relates to their work. The evaluation found that many Australian fathers hold the ideal of being closely involved in caring for their children from birth, nurturing their development, and following it closely. This ideal contrasts with a more traditional model in which a fathers' main role is as a provider, child's playmate, and sometime disciplinarian, but in which routine care for the child and responsibility for nurturing is left to mothers. For some fathers, the introduction of DAPP represented a clear message that they should be supported to prioritise spending time with their newborn, and taking time away from work to do so. In effect, some fathers clearly felt that the very existence of DAPP promoted the importance of early bonding with their infants. They felt supported to insist on their right to take leave after a birth, even in the face of resistance from managers, workmates or employers. On the employer side, the evaluation found strong indications that DAPP supported employers in assisting new fathers to take leave following a birth, even when this was not something that might have been expected in the past. In some cases, DAPP seemed to allow employers to put into practice views they already held about the importance of involved fatherhood and the need for fathers to take leave after a birth. In other cases, DAPP appears to have prompted employers to rethink their views about fathers taking leave after a birth, and come to a new view that it is appropriate and worthy of support. In short, for both fathers and employers, it appears that some of DAPP's effects arose because it supported fathers in adopting the less traditional roles of close involvement in caring for and nurturing the new child.

There was less direct evidence that the introduction of PPL in its initial form (with just PLP) had much effect on attitudes and expectations. The initial introduction of PPL did not produce any change in the household division of labour, or in indicators of mothers' treatment at work while pregnant. Moreover, in-depth interviews with mothers provided little evidence that the commencement of PPL was associated with any change in the attitudes and responses of their managers, supervisors or employers to their pregnancies, leave taking or return to work. Since almost all recipients of PLP were mothers, the initial form of the PPL scheme readily conformed with widespread expectations about the appropriate roles for mothers in caring and nurturing their newborns. As described above, the main effects of this component of the PPL scheme arose because it removed or reduced financial barriers to mothers being able to care for and nurture their new babies as they wished, and as they were widely expected to do. This required no significant change in attitudes or expectations about the respective roles of men and women in caring for babies. Some overseas experience suggested that increasing mothers' time away from paid work might raise the share of household work they undertake (Schober 2013, 2014). However, the evaluation found no evidence that this occurred, even though the introduction of PPL did lead to more mothers returning to paid work by the time their babies were 12 months old.

12.3 Supporting and encouraging mothers to return to work

The evaluation found that PPL has encouraged mothers to return to work by the time their babies are 12 months old, contributing to the policy objective of increasing women's workforce participation. It has also increased the likelihood that mothers will return to the same job they held before the birth. The evaluation did not assess the reasons for these effects. They may occur partly because of the incentives PLP created for mothers to recommence work in time to ensure that they would be eligible for PLP again if they have a subsequent child. It is also possible that mothers' improved health and reduced stress made them feel better equipped to return to work by 12 months after the birth. The effects, particularly increased likelihood of returning to the same job, may also arise because mothers themselves have become somewhat more likely to feel attached to their jobs as a result of PPL, and/or their employers have become more likely to see value in retaining them after the birth. This could occur because of the availability of PLP, or because it was largely provided through employers, or because the Keeping in Touch (KIT) provisions of the scheme helped maintain connections between mothers and their employers while mothers were on leave.

12.4 Concluding words

As this report has shown, there can be little question that the introduction of Australia's first national paid parental leave scheme has made very significant progress in achieving its objectives. Both of the payments available under the scheme, PLP and DAPP, have contributed to reducing financial barriers to parents taking leave following a birth. In both cases, the payments have had the largest impact on parents who previously had least access to paid leave following a birth and who faced the largest challenges to financial security if they took leave following a birth. PLP has been important in providing financial security almost exclusively through payments to mothers, allowing many to take significantly more time away from work than they previously would have and removing or reducing financial stress for some. Although DAPP is a much smaller net payment, it has allowed some fathers to take significantly more time away from work after a birth to be with their newborn and support the mother than they otherwise would have.

The evaluation also found solid evidence that the PPL scheme has impacted on the attitudes and expectations of parents and employers towards pregnancy, leave taking following a birth, and mothers' return to work. The components of the scheme introduced initially, without DAPP, may have had some effect in bringing to employers' attention the circumstances and needs of their female employees who have babies, and in supporting connections between mothers and employers while mothers were on leave. However, its effect on attitudes and expectations appears to have been very limited. On the other hand, DAPP, though a much smaller payment, appears to have supported employers and families in rethinking their attitudes and expectations about the involvement fathers should have with newborns, and how workplaces can accommodate and support them.

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