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**Family-Related Policies  
in Southern African Countries:  
Are Working Parents Reaping Any Benefits?**

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**Family-Related Policies in  
Southern African Countries:  
Are Working Parents Reaping Any Benefits?**

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## ABSTRACT

### **Family-Related Policies in Southern African Countries: Are Working Parents Reaping Any Benefits?**

The continuous rise in the labour market participation rate of women; the emphasis on gender equality in the workplace; and the debate around equitable parenting responsibilities when it comes to child care, are some of the factors that shed light on the importance of family-related policies that address work/family life issues. This article focuses specifically on policies that give *working parents* more choices in reconciling vocational and familial responsibilities. The attention falls in particular on the policies of the fifteen member states in the Southern African Development Community (SADC). The discussion starts by scrutinising maternity health protection policies, followed by an overview of parenthood-related leave policies, such as maternity, paternity and parental leave. Policies relating to child care also receive attention. The article concludes by making recommendation regarding matters that need attention in drafting policies that may facilitate the work/family life integration of working parents with young children in the SADC region.

## INTRODUCTION

In a developing world context, combating poverty and improving the quality of human life are constant items on the social development agenda. Far from being model welfare states, some African countries have, however, made modest strides towards improving the social security and empowerment of their citizens. Family-related policy has proved to be one of the avenues followed in the social development endeavours of some African countries. These family-related policies often relate to a multitude of features of family life and are seldom combined to constitute a single overarching family policy. Instead, in many countries, as is also the case of those on the African continent, policies which impact family life form part of several different legislation documents. This is one of the reasons why many social scientists have indicated that it is all but a simple task to conceptualise and assess family-related policies (cf. Hantrais, 1994; Anttonen and Sipilä, 1996; Neyer, 2003). This article concerns itself more specifically with family-related policies which provide *working parents* with choices and options in reconciling responsibilities associated with employment and family life. In this regard, the attention will fall in particular on the different Southern African Development Community (SADC) member states.<sup>1</sup>

As is the case in most countries across the globe, socio-economic as well as demographic changes and transformation in the SADC region continue to impact the complex and dynamic relationship between paid work and family life. Dancaster and Baird (2008: 22) rightly argue that this has "...contributed to the emergence of work and family integration as an issue of serious concern for individuals, societies, organizations and governments." The question thus arises as to how governments in the SADC region have responded in terms of policy documents and legislation in order to aid working parents to reconcile employment and family life. This article attempts to give an answer to this question. The discussion is structured in the following way: As point of departure, a brief introduction is given of the Southern African Development Community. This is followed by a conceptual and theoretical overview of the key policy indicators, i.e. maternity health protection; parenthood-related leave (such as maternity, paternity and parental leave); and child care services. Thereafter, the different SADC countries are compared based on an analysis of

the family-related policies in these countries. Finally, recommendations are made with regard to matters that need attention in drafting policies that may enhance the work/family life integration of working parents with young children.

### **SADC: WHO, WHAT, AND WHY?**

The Southern African Development Community (SADC) is an inter-government organisation consisting of fifteen member states in the Southern African region. These member states are Angola, Botswana, the Democratic Republic of Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, the Seychelles, South Africa, Swaziland, Tanzania, Zambia, and Zimbabwe. Although SADC came into being on August 17, 1992 – its history can be traced back to its forerunner namely the Southern African Development Coordination Conference (SADCC) which was established in April 1980. The primary goals of SADC are to advance socio-economic integration and political collaboration among its members (SADC, 2009). Yet, in the past, collaboration on all levels has proved to be a challenge in light of the socio-economic diversity among the SADC members states. Although poverty is an undeniable reality in all fifteen of the SADC countries, some of these countries are worse off than others. The GDP per capita in Zimbabwe and the Democratic Republic of Congo is, for example, US\$200 and US\$300 respectively, while the average annual per capita income is US\$10,100 in South Africa; US\$13,900 in Botswana and US\$19,800 in the Seychelles. The SADC countries also vary considerably in terms of their gross domestic product (GDP), which ranges from US\$1.9 billion (Zimbabwe) to US\$491.0 billion (South Africa). Nonetheless, according to a recent United Nations report SADC has been successful in establishing intra-African macro-economic convergence; developing regional tourism and making progress in developmental collaboration with regard to, for example, energy generation (United Nations, 2009).

Although SADC has various protocols on matters such as firearms, health and education, there is, however, little effort to address policy matters which may support working parents. A single reference is made to the importance of promoting work/family life balance in SADC's *Charter of Fundamental Social Rights*. Article 6 of this document states that

“member states shall create an enabling environment consistent with ILO Conventions on discrimination and equality...so that...reasonable measures are developed to enable men and women to reconcile their occupational and family obligations” (SADC, 2008). Yet, no clear guidelines or directives are given to assist member states in achieving this objective nor are there any mechanisms in place to assess whether member states are indeed making progress in terms of policy formulation and implementation. This is of particular concern in as far as only one of the SADC member states (Mauritius) has to date ratified the International Labour Organisation’s *Workers with Family Responsibilities Convention* (no. 156 of 1981) (ILO, 2008).

In sub-Saharan Africa, the reality of trying to reconcile work and family is not foreign to women. According to Hein (2005: 4) women’s active involvement “...in economic activity has always been high” in this region. During the past three decades the female labour market participation rate (FLMPR) has remained above 60 per cent (Hein, 2005; ILO, 2007). This trend also prevails in the SADC countries in particular. The average labour force participation rate of women in the SADC region was 66 per cent in 2008 (Hausmann, Zahidi and Tyson, 2008; ILO, 2009a). In some of the countries, such as Madagascar, Mozambique and Tanzania, the 2008 FLMPR was above 80 per cent (ILO, 2009a)<sup>ii</sup>. Furthermore, the SADC region still has a relative high average fertility rate, estimated at 3.9 in 2008. Although countries such as South Africa and the two island populations of the Seychelles and Mauritius have fertility rates of 2.3; 1.9 and 1.8 respectively, the fertility rate remains high in most of the other SADC countries. In both Angola and the Democratic Republic of Congo the fertility rate is, for example, 6.2 (CIA, 2009). Against the background of the FLMPR and fertility rate in this region it is clear that many women may therefore be confronted with the challenge of balancing work and family responsibilities. In order to encourage Southern African countries to formulate and implement family-related policies, one can argue that SADC can play a more active role in setting minimum standards for parenthood-related leave policies by using its existing agendas and platforms for discussion of social issues and rights.

The following section gives a conceptual and theoretical overview of the key policy indicators which were used in assessing family-related policy in the SADC countries.

## **POLICIES THAT IMPACT THE LIVES OF WORKING PARENTS WITH YOUNG CHILDREN: CONCEPTUALISATION AND THEORETICAL MODELS**

In discussing policies that may impact working parents with young children, the attention falls in the first place on policies dealing with *maternity health protection*. According to the stipulations of both the European Union Council Directive (92/85/EEC) (EUR-Lex, 2009) and the ILO's Maternity Protection Convention of 2000 (ILO, 2006) maternity health protection policies must make specific provision for measures to protect women during and directly after pregnancy against the exposure to possible harmful substances and dangerous conditions in their working environments. It is thus assumed that legislation will prevent employers from expecting pregnant women to perform arduous work (such as strenuous physical work) and being exposed to hazardous working conditions (e.g. high levels of vibration, heat, cold, noise, radiation). In addition, according to the EU Council Directive (92/85/EEC), measures must be in place "...to ensure that the workers concerned are not obligated to perform night work during their pregnancy and for a period following childbirth, subject to submission of a medical certificate, by transferring them to daytime work...". Furthermore, Article 10 of the ILO Convention of 2000 (ILO, 2006) stipulates that women have the right to breastfeed their children during working hours. Granted that national specificity exists, all the countries in the European Union have maternity health protection legislation (ILO, 2009b). Yet, of the 183 ILO member countries<sup>iii</sup> only 17 have to date ratified the Convention of 2000 - none of which are members of the Southern African Development Community.

A second set of family-related policies, which are associated with parenthood, includes three types of leave available to employed parents. The first of these parenthood-related leave policies, which has been a core component of family policies for a long time – at least in Europe - is maternity leave (Neyer, 2003). *Maternity leave* grants women leave of absence before and after child birth (and in some cases adoption of a child). This social

right is considered job-protected leave in as far as women are guaranteed the right to resume work at the same workplace at the end of the period of maternity leave. *Paternity leave* is short-term job-protected leave available to fathers in the time immediately after the birth/adoption of a child, making it possible for them to spend more time with their families (Evans, 2007; Haas, 2003). *Parental leave* refers, according to the International Labour Organisation (ILO) Recommendation, to “...the leave granted to fathers and mothers...to enable parents in employment to look after their newborn children for a certain time, whilst giving them some degree of security in respect of employment, social security, and remuneration” (Moss and Deven, 1999: 3, quoted by Lammi-Taskula, 2008: 134). More specifically, parental leave is job-protected, gender-neutral leave of absence that spans a longer period of time (after maternity/paternity leave) which aims to aid employed parents’ home-based care of small children during the first few years of their children’s lives (Evans, 2007; Haas, 2003; Neyer, 2003). Parental leave has been viewed by a number of theorists as a possible mechanism that may not only facilitate work/family life integration of employed parents, but also emphasises the ideological stance that *both* fathers and mothers are responsible for the care of their young children (Haas, 2003; Wall, 2008; Wilkinson, 1997).

Turning the attention to parenthood-related leave policies in the developing regions of the world it is clear, according to Van der Meulen-Rodgers (1999: 18), that “[m]aternity leave provisions are just as prevalent among developing countries” as is the case in the developed world. In Latin America the duration of job-protected maternity leave varies from 10 weeks (Honduras) to 18 weeks (Chile, Cuba and Venezuela) (ILO, 2009b). The norm for paid maternity leave is 12 to 14 weeks and income replacement is in most cases financed by national social security funds (Kammerman and Gabel, 2006; Van der Meulen-Rodgers, 1999). Most East and South East Asian countries make provision for at least 12 weeks paid maternity leave. Furthermore, while legislation in Vietnam stipulates 16 to 24 weeks paid leave, only 8 weeks of maternity leave is granted in Singapore (ILO, 2009b; Van der Meulen-Rodgers, 1999). In Africa, maternity leave benefits are also relatively widespread, with durations varying from 4 weeks in Tunisia to 16 weeks in South Africa. Although some African countries provide income replacement during maternity leave which is

funded by central social security funds, employers in many countries in this region are, however, called upon to provide income benefits (ILO, 2009b; Van der Meulen-Rodgers, 1999).

Few countries in the developing world provide paternity leave, with only five countries in Africa and six countries in Latin America having legislation which calls for job-protected paid paternity leave. In South East Asia, Indonesia and the Philippines are the only two countries which make legal provision for paternity leave (ILO, 2009b). According to the ILO's databases (ILO, 2009b) very few developing countries have legislation granting parental leave. These include Cuba (unpaid leave of up to nine months), the Republic of Korea (unpaid leave granted only to those with children under the age of one), and Mongolia (leave with some financial benefits for mothers and single fathers with children under the age of three).

Closely associated with parenthood-related leave as a factor that may assist parents in reconciling work and family responsibilities is policies relating to government sponsored or subsidised *child care* for young children (Neyer, 2003; Waldfogel, 2001). Adema and Whiteford (2008: 11) are, for example, of the opinion that "...[a]ccess to child care arrangements is crucial for parents with very young children, especially mothers, as this allows parents to engage in paid employment". Affordable child care services can therefore aid working parents in establishing a better work/family balance. Public support of child care may entail either or a combination of child care facilities directly provided by government, the subsidisation of child care provided by private or public organisations, or the reimbursement of costs incurred by parents for child care services (Waldfogel, 2001).

Variations regarding child care policies and practical options vary among different European countries. In some countries belonging to the European Union, such as the Nordic countries, child care is considered a public responsibility. The state is therefore a major provider of child care through subsidising public and private child care services (Neyer, 2003; Waldfogel, 2001). Other countries, such as the UK, also rely on non-profit organisations and NGOs as providers of child care services, while employers in the

Netherlands have become an important role player in making child care available as part of a family-friendly working environment. In many countries private (or ‘marketised’) child care institutions provide a valuable service (Neyer, 2003). Yet, due to the high cost of privatised child care in some countries, such as the UK and Ireland, many lower income parents find that it makes financially more sense for one of the parents to exit the labour market in order to take care of their children, instead of relying on (expensive) formal child care services (Adema and Whiteford, 2008).

In the developing world, especially in Africa, “[t]he limited financial resources, fragile infrastructures, challenged governments, and competing needs of children and families, have often left ECEC [early childhood education and care] programmes under-funded, not fully implemented, and in limited supply.” (Kamerman and Gabel, 2006:23). However, in the developing region of East Asia, where economic growth has been evident in the last decade or two, countries such as China, Korea, and Vietnam have paid much more attention to state-funded/subsidised early childhood education and care programmes (Kamerman and Gabel, 2006).

In reviewing typologies of policy models with reference to parenthood-related leave as well as provisions for child care, it soon becomes evident that no such typologies have been published, to my knowledge, based on the comparative data for the developing regions of the world in general and for Southern Africa in particular. I therefore turned to two recent typologies, drawing on the data for European countries, as a point of departure when looking for an analytical tool. The first of these typologies is that of Linda Haas (2003)<sup>iv</sup> who uses the concept of “valued care” to identify different types of welfare states in terms of the extent to which care is privatised (i.e. the responsibility of the family) or collectivised. Haas (2003: 96) defines ‘valued care’ as “...a joined private-public responsibility, offering families financial compensation for parental leave and access to affordable, high-quality dependent-care services provided by individuals in well-paying jobs.” The second typology is based on Karin Wall’s (2008) analysis of the policies of 19 European countries. Although Wall identifies six types of so-called leave policy models, while Haas’ typology consists of only four care models, the two typologies speak to the

same issues. For the purposes of this article, Haas' typology will be taken as point of departure with appropriate references to the typology presented by Wall.

The first model, the so-called "privatised (noninterventionist) care model", considers the care of young children to be the responsibility of the family (in particular the mother) (Haas, 2003: 96). Countries such as Spain, Italy, Greece and Portugal are listed as proponents of this model where a clear ideological separation exists between the public and the private spheres with an emphasis on traditional gender roles (Haas, 2003). Similarly, Wall (2008: 10) refers to Spain, Italy, and Greece<sup>v</sup> as examples of states that manifest a "short leave male breadwinner model". In these countries the emphasis is placed on short term well compensated maternity and paternity leave. In addition, provision is made for parental leave with some income replacement provided (Tanaka, 2005). Public funded/subsidised child care for children between the ages of 3 to 6 is considered comparable with that of the Nordic countries (Flaquer, 2000).

The second model is "family-centered care"<sup>vi</sup>, where the emphasis is placed on maintaining traditional family life (Haas, 2003: 100). Although women's right to labour force participation is acknowledged (and women are indeed active in the labour market), family leave policies are structured in such a way that it does not promote high levels of gender equality (Wall, 2008). Accent is placed on the male breadwinner model particularly in families with small children. After an initial well compensated maternity leave, provision is made for a fairly long period of parental leave but at a low remuneration rate which provides moderate measures for especially women to integrate work and family life. In addition, child care services are not always readily available. Countries that fall in this category include Germany, Austria, Belgium, Luxembourg, France, and Hungary (Haas, 2003; Wall, 2008).

Haas (2003: 102) refers to the third model as the "market-oriented care model". Although women are guaranteed well-paid maternity leave, establishing and/or extending paternal and parental leave has not received a lot of attention on the policymaking agenda in countries such as the United Kingdom, Ireland and the Netherlands. In all three of these

countries, parental leave is considered unpaid leave of absence (Haas, 2003). Instead of developing government policies to facilitate work/family life integration of employed parents, these three countries have rather opted for encouraging employers to develop company specific family-friendly policies (Haas, 2003). In the Netherlands, Dutch law makes provision for employed parents to request their employers to reduce their working hours. As a consequence 53% of couples with small children are one-and-a-half earner families, where women are mostly the ones who opt for part-time work. For this reason, Wall (2008:10) refers to this model as the “short leave part-time mother policy model”.

Finally, Nordic countries such as Denmark, Finland and Sweden fall in the category that Haas (2003: 104) has labelled the “valued care model”. Employed parents in these countries are offered a comprehensive assortment of measures which gives support to working parents, such as the provision of high-quality subsidised day care for children. Furthermore, maternity and paternity leave are followed by a long period of well compensated parental leave<sup>vii</sup> of which a certain portion is a so-called non-transferable father’s quota. According to Wall (2008) this has not only encouraged fathers to become more actively involved in the day-to-day care of their children, but has also contributed to the waning of the male breadwinner model in favour of a dual-earner way of life. Haas (2003) is of the opinion that Sweden in particular has advanced towards becoming a welfare state that manifests a ‘valued care model’. Here, family policies are focused on trying to bring about “...equal sharing by men and women of paid and unpaid work” (Haas, 2003: 105).

## **POLICIES THAT IMPACT THE LIVES OF WORKING PARENTS WITH YOUNG CHILDREN: THE STATE OF AFFAIRS IN THE SADC COUNTRIES**

Recognising national specificity when it comes to the socio-economic and political factors that may influence policies that address issues related to the interplay between paid work and family life, one can however argue for the importance of a comparative analysis insofar as identifying possible patterns or trends among the different SADC member states. The

first of the policy indicators to receive attention in this comparative analysis is maternity health protection.

### **Maternity Health Protection Policies**

In countries such as Zambia, Lesotho and Mozambique, where economies still rely heavily on the agricultural industry (CIA, 2009), many employed women may be expected to perform manual work. Policies regarding maternity health protection is therefore of pertinent importance. Yet, it is alarming that only five of the fifteen SADC member states have specific policies protecting women during and directly after pregnancy. Of these five countries, South Africa has the most extensive and detailed policy protecting not only women during pregnancy (and six months after giving birth) but also lactating women for the duration of breastfeeding their children (South Africa, 1997). Legislation in the Seychelles also provides detailed measures to protect women from arduous work and dangerous working conditions during pregnancy and up to three months after confinement (Seychelles, 1991). Similar policies exist in Madagascar and Tanzania (Madagascar, 1962; Madagascar, 2003; Tanzania, 2004). In Mauritius, maternity health protection policies focus, however, only on female factory workers, women in the salt manufacturing industry and those working in so-called ‘export enterprises’ (Mauritius, 1975).

Apart from the Seychelles (1991), South Africa and four of its bordering countries, Lesotho (1992), Mozambique (2007), Namibia (2004) and Swaziland (1980), also have legislation protecting pregnant women from being required to work at night. The policy in South Africa stipulates that an employer must make provision for “suitable alternative employment” during an employee’s pregnancy as well as up to six months after giving birth (South Africa, 1997).

In addition, eight of the SADC countries have policies which focus on the health of newborn and young children by providing women with the right to breastfeed their children whilst at work. In most cases women have the right to take nursing breaks up to a maximum of one hour per day during working hours. (Tanzanian legislation allows nursing

breaks up to two hours). These nursing breaks are seen as official working hours for which women are entitled to receive full remuneration. These eight countries are Angola (1981), Botswana (1982), Lesotho (1992), Madagascar (2003), Mauritius (1975), Mozambique (2007), Tanzania (2004), and Zimbabwe (1984). Although women in these countries have the right to nursing breaks, many may not be able to take up this right because of the fact that most employers do not provide child care facilities close to places of work, and therefore infants may not be readily accessible to be nursed during working hours.

In addition to using maternity health protection as an indicator in assessing family-related policies, the nature of parenthood-related leave must also be scrutinised.

### **Parenthood-Related Leave Policies**

In this section an overview is given of parenthood-related leave policies in the different SADC member states. First, the attention turns to maternity leave policies, where-after paternity and parental leave will be discussed.

#### *Maternity Leave*

In all fifteen SADC member states maternity leave is considered a social right. Unlike countries such as Finland and Norway, which considers maternity leave to be a universal right (Neyer, 2003), maternity leave in the SADC countries is only available to employed mothers. A few of these countries even have more specific qualifying conditions. As a result some women, even though they are active in the formal labour market, may be excluded from asserting this right. Zambian legislation (1965), for example, restricts paid maternity leave to those women who have been in the service of a particular employer for at least two consecutive years. In the case of Zimbabwe (1984), women (who have at least 12 months of uninterrupted service), qualify for paid maternity leave only once every two years. In addition, a woman is not entitled to paid maternity leave in the case where a particular employer has already granted her maternity leave three times in the past. Legislation in Mauritius (1975) and Tanzania (2004) place more or less a similar restriction on women's eligibility for maternity leave. This is in as far as employed women, who have

already taken maternity leave on three previous occasions, in the case of Mauritius, and four previous occasions, in the case of Tanzania, may only take *unpaid* maternity leave.

The duration of maternity leave in the SADC region ranges from 8 weeks (Malawi) to 16 weeks (South Africa), with the norm being 12 to 13 weeks. This is on par with the average duration of maternity leave in countries across the African continent (ILO, 2009b). The SADC member states clearly do not only lag behind some countries belonging to the European Union, such as the Czech Republic (28 weeks) and Hungary (24 weeks) (Hausmann et al., 2008), but most of the countries in the region also fail to comply with the minimum of 14 weeks paid maternity leave as stipulated by the ILO's Maternity Protection Convention of 2000 (ILO, 2006). Six of the SADC countries [Botswana (1982), Lesotho (1992), Madagascar (2003), the Seychelles (1991), Swaziland (1980) and Zambia (1965)] do, however, make provision for the extension of postnatal leave in cases where illness arise as a result of pregnancy and/or confinement. This is in accordance with Article 5 of the ILO's Maternity Protection Convention of 2000 (ILO, 2006).

It is alarming to note that employers in Lesotho are under no legal obligation to provide financial compensation to women during maternity leave (Hausmann et al, 2008: 104)<sup>viii</sup>. Seeing that the Lesotho government does not make provision for women to receive maternity leave benefits from a central social security fund, many women in this country are faced with the reality of *unpaid* maternity leave. A similar situation prevails for women in Swaziland, where only women in certain industries (mining and quarrying) are entitled to limited paid maternity leave. Domestic workers also receive limited compensation in as far as being entitled to only 30 working days paid maternity leave. All other women, whose employers do not provide paid maternity leave of their own accord, have no other alternative than taking unpaid leave (Swaziland, 1980; 1996; 2001).

In contrast to the above, maternity leave policy in the remaining thirteen SADC countries make provision for *paid* leave. Two categories of countries can be identified in this regard. The first category represents countries that place the responsibility on the employer to provide cash benefits to women on maternity leave. Except for the Democratic Republic of Congo (2002) and Botswana (1982), where employers are only obligated to pay 67 per cent

and not less than 25 per cent of the beneficiary's basic salary respectively, six other countries (Malawi; Mauritius; Mozambique; Tanzania; Zambia; and Zimbabwe) stipulate that employers are compelled to pay 100 per cent of the employee's basic salary (ILO, 2009b). Instead of providing financial compensation to women on maternity leave from state social security funds, these governments place the full burden on the employer not only in terms of providing full remuneration but also to carry the costs associated with the temporarily replacement of the particular employee. Whether all employers in these developing countries do indeed pay the stipulated percentage of the employee's basic salary can be questioned, especially in a country such as Zimbabwe where the economy is in a state of turmoil, with a hyperinflation rate of 231 million per cent (July 2009) (Banya, 2009; The Citizen, 2009).

The second category represents countries where the state takes (some) responsibility in paying cash benefits to women on maternity leave. In the case of Madagascar (2003), 50 per cent of an employee's basic salary is paid from the central Social Insurance Fund (CNAPS) for the duration of maternity leave, while employers need to pay the balance. Legislation in the Seychelles (1987) makes provision for the payment of a monthly flat rate<sup>ix</sup> to women on maternity leave for a period of three months which is financed by the central Social Security Fund. In Namibia, all employees are registered members of the Social Security Commission (SSC) – a parastatal organisation responsible for inter alia providing financial assistance to women during maternity leave. The SSC pays 100 per cent of a woman's basic salary for a period of three months up to a maximum of N\$6000 (about US\$593) per month. According to the United Nations Statistics Division (2009) female employees in Angola receive income replacement from a central social security fund which can be supplemented by funds provided by the employer. In South Africa, legislation makes provision for the payment (according to a sliding scale) of up to 60 per cent of an employee's basic remuneration from the Unemployment Insurance Fund. This payment comes into effect in cases where employers are not contractually bound to pay maternity leave benefits (South Africa, 2001). In order to be a beneficiary of the Unemployment Insurance Fund, an employee must also have been a contributor to the fund (Department of Labour, 2009). Since 2003 all domestic workers in South Africa, employed for more than

24 hours per month, need to be registered for this fund (Cape Gateway, 2006). Access to some income replacement for pregnant women employed as domestic workers is significant in light of the fact that 850000 people (mostly women) were involved in the service sector as domestic workers in South Africa in 2006/2007 (South African Institute of Race Relations, 2007: 166).

Although policies in all fifteen SADC member states make provision for maternity leave, legislation in only eleven of the countries clearly stipulates that women are protected against discriminatory dismissal on account of pregnancy and that they are guaranteed the right to return to their places of work at the end of their maternity leave. These countries are Angola (1981), Botswana (1982), Lesotho (1992), Madagascar (2003), Mozambique (2007), Namibia (2004), the Seychelles (1987), South Africa (1998), Swaziland (1980), Zambia (1965), and Zimbabwe (1984). The fact that not all the SADC countries make specific mention of secured employment may be indicative of a discourse dominated by the ideology of motherhood and an emphasis on the health and needs of children, rather than promoting, on the one hand, gender equality in the labour market and, on the other hand, facilitating women's reconciliation of employment and family responsibilities. In addition, although some of the SADC countries stipulate in their maternity leave policies that the six week period after confinement is considered *compulsory* leave, this stipulation is mostly grounded on the protection of the health of the mother (and child), rather than enhancing women's social rights.

#### *Paternity Leave*

When compared to policies regarding paternity leave in some of the countries belonging to the European Union, the SADC countries lag far behind welfare states such as Slovenia (90 days), Finland (7-21 days), and Denmark (14 days) (Wall, 2008; Lammi-Taskula, 2008). According to Burnett (2004) and the International Labour Organisation (2004; 2009b) Tanzania, the Democratic Republic of Congo and Mozambique<sup>x</sup> are the only SADC member states which have legislation granting men short-term job-protected paternity leave. In Mozambique, fathers have the right to take one day paid leave following the birth of a child, while men in the DRC and Tanzania are granted three days paternity leave. It is

interesting to note that only three other countries on the African continent make provision for paid paternity leave, i.e. Algeria; Rwanda; and Tunisia (ILO, 2009b; 2009c).

The Labour Code (Act No. 2003-044) in Madagascar grants all employees 10 days family leave per year, which could potentially be utilised by fathers as paternity leave. Strictly speaking, however, family leave that can be used to attend to a broader range of family related eventualities, such as a funeral or tending to an ill family member, cannot be labelled paternity leave (cf. Haas, 2003). Nonetheless, men in the Seychelles (1991) may take advantage of the four days paid leave granted to employees for compassionate reasons to spend time with their newborn children. Similarly, fathers in South Africa have the right to three days paid leave after the birth of their children as part of their family responsibility leave (South Africa, 1997; Dancaster and Baird, 2008).

Although civil society organisations and trade unions in both South Africa and Namibia have tried to push paternity leave higher up on the policy making agenda, major strides are yet to be made in this regard (Burnett, 2004; Hosking, 2006; News24, 2009). Commenting on the reasons why fatherhood has not yet emerged as a ‘policy issue’ in South Africa, Morrell and Richter (2006: 3, 4) are of the opinion that fatherhood-related policy matters must ‘compete’ with “many other claims made upon the over-stretched social agenda of the state”. This along with the continued prevalence of patriarchal power and the traditional view that caring lies primarily in the hands of women (Morrell and Richter, 2006; Mokomane, 2009), may be seen as reasons why paternity leave has yet to become a matter of serious concern to policy makers not only in South Africa, but also in the other SADC member states.

### *Parental Leave*

The debate around parental leave among policy makers in the SADC region is nothing more than a deafening silence. In scrutinising available legislation and policy documents as well as consulting the International Labour Organisation’s database (ILO, 2009b), it is evident that none of the SADC countries make provision for parental leave.

In contemplating parental leave policies in general and Canada's generous leave policy in particular (i.e. 35 weeks paid leave to either parent), Evans (2007) mentions that these policies can in some cases lessen gender and class imbalances, while exacerbating it in other instances. Although an extended period of parental leave clearly has its benefits, long periods of parental leave may also "...reinforce, rather than redress, the gender division of time spent in paid work and unpaid work caring for children" (Evans, 2007: 124). This argument is echoed in the evidence of the gender gap that exists in many countries in terms of the rates of uptake of parental leave – with mothers being by far more likely to take leave of absence (The Economist, 2004; Neyer, 2003; Waldfogel, 2001). Parental leave options with no or low income replacement rates, may, according to Evans (2007), aggravate class imbalances. When compared to upper-middle class employed parents, mothers and fathers falling in a lower income category may not be able to afford taking parental leave.

In a developing world context, as in the case of the SADC region, the above two arguments may be of particular relevance, should parental leave policies be implemented. A gender ideology that views women as the primary caregivers of children, which prevails to a more or lesser extent in the different SADC countries (cf. Morrell and Richter, 2006; Mokomane, 2009), may bring about a situation where women will be more likely than men to be the ones who opt for parental leave. Yet, studies, such as those conducted in South Africa which found that some men are embracing the culture of 'new fatherhood' and have become more active nurturant fathers (cf. Smit, 2008; Rothmann, 2009), indicate that some men may welcome the option of taking parental leave.

In light of the high poverty rate in some of the SADC countries (for example, 86 per cent of the Zambian population lives under the poverty line) and the existence of a high gini coefficient (as high as 70.7 in Namibia) (CIA, 2009), many parents may, due to financial reasons, not be able to take unpaid or low income replacement parental leave. Nevertheless, although the choices of parents who fall in a low income category may be more constrained than that of their more affluent counterparts, the mere choice of having the option to take parental leave will enhance parents' social rights.

Parental leave is not the only family-related policy that may, on the one hand, have benefits for early childhood development and, on the other hand, advance gender equality. The availability of high quality affordable child care is also of significant importance (Waldfogel, 2001).

### **Child Care Services: Where Do the SADC Countries Stand?**

According to a UNESCO report (2007a), governments in the broader sub-Saharan African region consider care and education of children younger than three years the responsibility of parents, NGOs and private institutions. It is therefore not surprising to find that most of the SADC countries do not make provision for state funded child care for infants and toddlers. In contrast to some European countries, such as the Nordic states and the Netherlands, where child care policies have been strongly influenced by the attempt to promote labour market participation of parents – mothers in particular - (Adema and Whiteford, 2008; Neyer, 2003), policies and/or practices in the SADC countries regarding child care (especially for children older than three years) have primarily been shaped by pedagogical considerations. Family policy regarding child care is largely lacking in the SADC region and information (where available) stems mostly from documents pertaining to early childhood development and education.

In the larger sub-Saharan African region, the average pre-primary gross enrolment ratio (GER)<sup>xi</sup>, with reference to children between the ages of three and six, was 14 per cent in 2006. This is much lower than the GER in other global regions (e.g. East Asia: 44%; Latin America: 64%; North America and Western Europe: 81%) (UNESCO, 2009a). Yet, according to UNESCO (2009b) pre-primary education and development in terms of GERs have shown a gradual increase from 1999 to 2006 in the SADC countries<sup>xii</sup> (see Table 1). There are, however, regional disparities in pre-primary GERs among these countries. The GER in Madagascar was as low as 8 per cent in 2006, 38 per cent in South Africa and as high as 100 per cent in Mauritius and the Seychelles (UNESCO, 2009b).

**Table 1: Pre-Primary Education Gross Enrolment Ratio: SADC Countries**

Country	Pre-primary GER 1999	Pre-primary GER 2006
Angola	–	–
Botswana	–	15
Democratic Rep. of Congo	2	9
Lesotho	21	18
Madagascar	3	8
Malawi	–	–
Mauritius	96	100
Mozambique	–	–
Namibia	21	22
Seychelles	109	109
South Africa	21	38
Swaziland	–	17
Tanzania	–	32
Zambia	–	–
Zimbabwe	41	–

- No information available

(Source: UNESCO, 2009b)

What role do governments in the SADC region play in funding early childhood care programmes? The answer: virtually none. UNESCO (2007b: 2) reports that "...in almost all the few countries with data available in the [sub-Saharan African] region, the share of pre-primary education in the total current expenditure on education is lower than 2%." It has even been cited that the share of pre-primary education in the total expenditure on education may be as low as 0.5 per cent in South Africa and Swaziland (UNESCO, 2007a). Countries such as Malawi and Lesotho rely, for example, heavily on funding from donor agencies (such as UNICEF) to run public pre-school centres in light of government budget constraints (UNESCO, 2000; 2006a)

In most of the SADC countries (with data available) pre-school programmes are primarily run and/or funded by private organizations/individuals; NGOs; religious organisations; and voluntary agencies. In some countries, such as South Africa, child care is provided by both public and private early education development institutions. Public child care is subsidised by provincial departments of education, while the comparatively larger number of private child care centres operate with little or no government funding (UNESCO, 2006b). Private child care centres in the SADC countries are more prevalent in urban areas and are usually considered expensive – which hinders the access to child care in poor and/or rural communities (UNESCO, 2000; 2007b).

Although exposed to similar constraints faced by other SADC members states, the island countries of Mauritius and the Seychelles are interesting cases worth mentioning. Despite the fact that only 2 per cent of the total public expenditure on education in Mauritius is directed towards pre-primary education, the pre-primary gross enrolment ratio is 100 per cent. One of the reasons for the high GER in this country is the fact that village and municipal councils run free pre-primary classes making use of volunteers from the community (UNESCO, 2000). In comparison, the government of the Seychelles has played a much larger role in making pre-primary education accessible to all children between the ages of three and six. The fact that pre-primary education is free of cost and is considered part of the formal educational system (although not compulsory), contributes to the pre-primary gross enrolment ratio of more than 100 per cent in this country (UNESCO, 2000). This makes the Seychelles, in the context of the SADC region, an exception. One could however argue that socio-economic and demographic factors may play a role in the high pre-primary GER of these two countries. In comparison to the other SADC countries, Mauritius and the Seychelles have the smallest populations (1.2 million and 0.87 million respectively) and the lowest fertility rates (1.8 and 1.9). In addition, the average annual per capita income in these two countries (US\$12,000 in Mauritius; US\$19,800 in the Seychelles) is much higher than that of most of the other SADC countries (CIA, 2009).

It seems that the main objective in providing child care for young children in the SADC countries is to enhance the early development and education of children, rather than facilitating working parents' reconciliation of employment and family responsibilities. Although the latter may not be the driving force behind child care service delivery, parents may nonetheless benefit from existing child care programmes. The high costs associated with private child care, on the one hand, and the sometimes inadequate availability of state funded or subsidised child care facilities, on the other hand, are obstacles in the way of less affluent working parents trying to balance work and family life.

## **CONCLUSIONS AND RECOMMENDATIONS**

When parenthood-related leave policies and policies regarding child care in the SADC countries are scrutinised, it is clear that the policies in these countries do not measure up to the principle of “valued care” as defined by Haas (2003: 96). Although the parenthood-related leave policy models, developed based on the data from European countries, are useful as a point of departure in analysing family policy, it soon became evident that the developing countries belonging to the Southern African Development Community do not fit into the typologies identified by authors such as Haas (2003) and Wall (2008). In the absence of a family policy typology for developing countries in general and African countries in particular, it became even more important to use the analysis of family-related policy which impact working parents' choices in reconciling work and family life in the SADC countries, to develop a typology which may be useful for the analysis of policy in other African countries.

In comparing the family-related policies in the different SADC countries, three policy indicators relevant to working mothers in particular yielded sufficient data for the development of a possible typology, i.e. maternity health protection measures; maternity leave, and other leave entitlements to care for family members (see Table 2). Based on the analysis, the fifteen SADC countries can be grouped into five different clusters.

**[Table 2 about here]**

The first cluster represents countries with policies that entitle women to paid, employment-protected maternity leave which ranges from 14 to 16 weeks. Central social security funds provide cash benefits to women while they are on maternity leave. None of the countries in this cluster have policies with any qualifying conditions placing restrictions on female employees' eligibility for maternity leave. In addition, policies provide well-defined measures to ensure extensive maternity health protection. Women in these countries are also entitled to a few days family leave per year (available to all employees), which could be used to attend to a broad range of family eventualities. The countries that fall into this cluster are South Africa, Madagascar and the Seychelles.

The second cluster of countries has policies that provide paid, state-funded employment-protected maternity leave. Yet, the length of maternity leave only ranges from 12 to 13 weeks, which is less than the minimum standard of 14 weeks stipulated in Article 2 of the ILO's Maternity Protection Convention of 2000 (ILO, 2006). Furthermore, *no* provision is made for policies that protect women from arduous work and dangerous working conditions during pregnancy and for a period after taking up employment again. Moreover, apart from maternity leave, women do not have any other annual leave entitlements to care for family members. Angola and Namibia fall into this cluster.

The third cluster represents countries with policies that entitle women to paid, employment-protected maternity leave. In contrast to the first two clusters of countries where women on maternity leave receive cash benefits from a central social security fund, policies in this cluster place the responsibility on the employer to provide remuneration during maternity leave. The length of maternity leave granted in these countries is less than the ILO stipulated 14 weeks. In addition, none of the countries in this cluster have any maternity health protection policies. The four SADC countries that make up this cluster are Botswana, Mozambique, Zambia, and Zimbabwe.

The fourth cluster shares similar elements with the third cluster insofar as provision is made for short-term (ranging from 8 to 12 weeks) paid maternity leave, with employers bearing the full brunt of providing income replacement during this period. The differential element in

this fourth cluster is the fact that maternity leave policies in these countries do not have any stipulations protecting women against discriminatory dismissal on account of pregnancy. Neither are women guaranteed the right to return to their original places of work at the end of the period of maternity leave. The Democratic Republic of Congo, Malawi, Mauritius, and Tanzania form part of this cluster.

The fifth and final cluster groups together countries with policies that only make provision for *unpaid* maternity leave. Although women utilising unpaid maternity leave are ensured of job protection in these countries, policies provide little maternity health protection in the workplace and no other forms of annual family responsibility leave are available. Both Lesotho and Swaziland, which fall into this cluster, grant women only 12 weeks maternity leave.

In summary, looking at family-related policies that impact the lives of working mothers, it is clear that only three countries (South Africa, Madagascar and the Seychelles) have moved toward the concept of a relatively well-paid employment-protected maternity leave shouldered by state funding, as well as entitlement to a few extra days annual family responsibility leave to care for family members. In order to improve the existing maternity-related policies of the SADC countries, the following recommendations are made: Where possible, the income replacement benefits for women on maternity leave must improve especially in those countries where maternity leave is either unpaid or where women receive a low percentage of their basic salary. In cases where countries have a central social security fund, the state must provide at least a certain percentage of a female employee's basic income during maternity leave, instead of placing the full responsibility on employers. In countries where employers are mandated by law to provide cash benefits to women on maternity leave, a system needs to be in place in order to monitor whether employers are indeed complying with policy stipulations. Furthermore, it is recommended that all women, regardless of the number of times they have been on maternity leave in the past, must be granted subsequent paid maternity leave. Lastly, it is important that SADC member states must ensure that detailed policies exist to protect pregnant women against arduous work and hazardous working conditions.

Paternity leave and parental leave were not included as policy indicators in formulating the above typology in light of the fact that little difference exist among the SADC countries in this regard. Although the SADC countries provide statutory short term maternity leave, paternity leave is by and large (with the exception of the DRC, Mozambique, and Tanzania) nonexistent. In countries where no policy provisions are made for paid paternity leave, but where employees are entitled to annual family responsibility leave, men can opt to use the latter to spend time with their newborn children. It is interesting to note that the three countries where men have the right to take up this kind of general family responsibility leave (i.e. South Africa, Madagascar and the Seychelles), are also the three countries which have the best maternity leave policies. Although it is commendable that civil society organisations in some of the SADC countries are lobbying for paternity leave (cf. Burnett, 2004; Hosking, 2006; News24, 2009), little progress has however thus far been made in many of these countries with regard to granting fathers the right to short-term job-protected paid leave in the time immediately after the birth/adoption of a child.

None of the countries in the SADC region have any policies regarding parental leave. Although the granting of parental leave may not be considered as important as other social development issues in the SADC region, the provision of job-protected parental leave must, nonetheless, start to receive some attention on the policy making agenda. Against the background of the low per capita income in most of the SADC countries, instead of suggesting long periods of unpaid parental leave, leave of absence of a shorter span but with some financial benefits may be a more viable option for parents in a developing world context. Even in cases where shorter term parental leave are implemented, a degree of flexibility should be allowed – for example, making it possible for parents to stagger blocks of leave time during a child’s early childhood (e.g. up to the age of 8 years).

With the exception of the Seychelles, SADC countries do not make adequate provision for government subsidised/funded child care. In most of these countries care of young children is still seen as the responsibility of the family (and that of the mother in particular) (cf. Morrell and Richter, 2006; UNESCO, 2007a; Mokomane, 2009). It is therefore suggested that, where

possible, governments must direct a larger percentage of the total public expenditure on education towards pre-primary education in order to make early childhood education and care more affordable. Furthermore, in order to enhance the possibility for employed parents to reconcile work and family responsibilities, employers must be encouraged to make provision for child care facilities as part of a family-friendly work environment.

In analysing family-related policies in the SADC countries as well as making recommendations regarding matters that need attention, one should however not lose sight of the possible reasons why SADC member states pay less attention to family-related policies which impact employed parents in particular. In a developing world context, governments such as those of Southern African countries are confronted with a plethora of social development and welfare issues. Parenthood-related policy matters must therefore 'compete' with other policy issues such as universal healthcare, housing shortages and the payment of child support grants to primary caregivers of children in need. In addition, nine of the SADC countries have some of the highest HIV prevalence rates in the world. Swaziland has for example a prevalence rate of 26.1% - the highest in the world (UNAIDS, 2008; CIA, 2009). The importance of debates around the state's role in enhancing working parents' choices in establishing a better work/family life balance, may pale in comparison to policy issues dealing with the alleviation of severe poverty among citizens. Seven of the SADC countries have, for example, more than 50 per cent of the population living under the poverty line (CIA, 2009).

Yet, despite the current global economic crisis and the fact that many other social issues demand the financial and policy making 'attention' of the state, governments in the SADC region need to take heed of the importance of policies that support working parents. Although parents – more specifically working mothers – are reaping some benefits from the existing parenthood-related leave policies and child care facilities, there is, however, little doubt that countries in the SADC region lag far behind other countries when it comes to policies and practices that facilitate working parents' integration of work and family life. The Southern African Development Community, with its existing protocols, charters and discussion forums, can play a much more dominant role in stimulating debate around work/family life

issues and setting minimum standards for parenthood-related leave policies. If this is done, SADC can be instrumental in expanding the choices available to working parents with young children in the Southern African region with regard to reconciling paid work and family responsibilities.

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**Table 2: Family-Related Policies which Impact Working Mothers: SADC Countries**

Cluster	Country	Maternity protection against hazardous working conditions	Maternity protection against night work	Maternity leave	Qualifications on maternity leave	Secured employment for women	General family responsibility leave
1	Madagascar	Yes	No	14 weeks; 100% (50% employer + 50% Social Insurance)	No	Yes	10 days as part of family leave
	Seychelles	Yes	Yes	14 weeks; A monthly flat rate for twelve weeks (Social Security Fund)	No	Yes	4 days paid leave as part of compassionate leave
	South Africa	Yes	Yes	16 weeks; 60% (Unemployed Insurance Fund)	No	Yes	3 days paid leave as part of family responsibility leave
2	Angola	No	No	90 days ( $\pm$ 13 weeks); (Social Security Fund; if necessary, the employer adds up to the full wage)	No	Yes	None
	Namibia	No	Yes	12 weeks; 100% (to a maximum of N\$6000 (Social Security Commission)	No	Yes	None
3	Botswana	No	No	12 weeks; no less than 25% (employer)	No	Yes	None
	Mozambique	No	Yes	60 days ( $\pm$ 8.5 weeks); 100% (employer)	No	Yes	None
	Zambia	No	No	12 weeks; 100% (employer)	Yes	Yes	None
	Zimbabwe	No	No	96 days ( $\pm$ 13.7 weeks); 100% (employer)	Yes	Yes	None
4	Democratic Rep. of Congo	No	No	14 weeks; 67% (employer)	No	No	None
	Malawi	No	No	8 weeks; 100% (employer)	No	No	None
	Mauritius	Yes	No	12 weeks; 100% (employer)	Yes	No	None
	Tanzania	Yes	No	12 weeks; 100% (employer)	Yes	No	None
5	Lesotho	No	Yes	12 weeks <b>unpaid</b> leave	No	Yes	None
	Swaziland	No	Yes	12 weeks <b>unpaid</b> leave [but limited paid leave for women in mining & quarrying industry; domestic workers].	No	Yes	None

## Notes

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<sup>i</sup> As far as possible, the legislation documents of the different SADC countries were analysed and other data sources (such as those of the ILO and UNESCO) were consulted, yet the records and legislation of a country such as Angola are not readily available.

<sup>ii</sup> In 2008 the female labour market participation rate was 82.2% in Madagascar, 88.1% in Mozambique, and 87.0% in Tanzania.

<sup>iii</sup> All fifteen countries in the SADC region are members of the International Labour Organisation.

<sup>iv</sup> Haas (2003) focused specifically on the 15 nations in the European Union.

<sup>v</sup> Wall (2008: 11) makes out a case for Portugal representing a separate leave policy model (i.e. the “early return to full-time work” leave policy model). Yet, this distinction is not pertinent for the discussion at hand and therefore I prefer to revert to Haas’ analysis which clusters Portugal with Greece, Spain and Italy.

<sup>vi</sup> Wall (2008: 7) refers to this leave policy model as “the ‘long leave’ mother home-centered policy model”.

<sup>vii</sup> In Sweden parents have the option to take 450 days paid leave of which thirteen months are paid at 80% of their basic salary and the remaining months at a lower flat rate (Haas, 2003; Wall, 2008).

<sup>viii</sup> See also Lesotho Labour Code Order 1992, No. 24.

<sup>ix</sup> Information on the current flat rate is, however, not readily available.

<sup>x</sup> See also Mozambique Labour Law of 2007.

<sup>xi</sup> Pre-primary education for children between the ages of three and six refers to Level 0 of the International Standard Classification of Education (ISCED) (UNESCO, 2009a).

<sup>xii</sup> Lesotho is an exception, insofar as dropping three percentage points from 21% in 1999 to 18% in 2006.