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The composition of grandparental childcare: gendered patterns in cross-national perspective

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Introduction

Internationally, grandparents are important providers of childcare while their adult children participate in work and other activities. There is a growing body of literature that explores the characteristics of grandparent childcare providers and the prevalence and intensity of grandparent childcare, that is, how often they provide care and for how long (Timonen and Arber, 2012; Glaser et al, 2013; Craig and Jenkins 2016). It is also recognised that the prevalence and intensity of childcare provision varies by country (Herlofson and Hagestad 2012, Glaser et al. 2013), according to patterns of *employment participation*, *cultural and gender norms and values*, and *policy constellations* (Glaser et al, 2013).

Research suggests that there is a direct relationship between parental *employment participation* and grandparent childcare provision. In developed countries, the main reason parents draw on grandparents for regular childcare is so that they can participate in work (Glaser et al, 2013; Hamilton and Jenkins, 2015). Grandparent childcare provision is also linked to grandparents' own workforce participation. In countries with higher participation rates among older people, the prevalence of regular grandparent childcare is lower (Glaser et al, 2013). *Gender norms and values* about work and familial care provision also shape the extent and intensity of grandparent childcare within countries (Glaser et al, 2013). Patterns in grandparental childcare also differ across policy contexts, such as different constellations of work and family policies (Ghysels 2011, Arber and Timonen 2012, Glaser et al, 2013).

A small literature has also explored grandparents' experiences of providing childcare and the effects that it has on their lives. This research indicates most grandparents enjoy caring for their grandchildren and derive many benefits for their health, wellbeing and family relationships (Goodfellow and Laverty, 2003; Ochiltree, 2006). But there can also be costs for grandparents. Lack of choice over their childcare responsibilities or particularly demanding childcare responsibilities (e.g. long or nonstandard hours, or lack of support from a partner) can have a negative effect on grandparents' wellbeing (Hamilton and Jenkins, 2015). Care responsibilities can also have an impact on grandparents' workforce participation, retirement decisions, and incomes (Hamilton and Jenkins, 2015).

Research is lacking, however, on the *composition* of grandparent childcare time, and whether this varies across countries. Composition is important. If we are to understand grandparents' experience of childcare provision and the effects it has on their lives, we need to look beyond just how much care they are doing and how often, to examine *which care tasks* they are doing. For example, routine physical care such as feeding and bathing, or being responsible for regularly accompanying children to and from school, is likely to be more demanding and time-constraining than other forms of care such as supervising children while they play (Craig 2006). The composition of grandparents' caregiving is likely to affect their enjoyment of childcare, its impact on their health and wellbeing, and the extent to which they can fit these tasks around their work, leisure and other commitments. As

most grandparents who provide childcare are partnered (Glaser et al, 2013), how these tasks are distributed within couples matters.

In this chapter, we explore *how* grandparents spend time with their grandchildren in Australia, Korea, Italy and France. We explore how the distribution of childcare tasks compares across countries, within the context of different patterns of employment participation, gender norms and policy constellations.

Background

Composition of childcare

Childcare consists of a range of different tasks, some of which are more demanding than others. Research consistently shows that fathers spend more of their childcare time talking, reading, teaching, listening and playing with children, than doing physical care tasks such as bathing, dressing, feeding, changing, and putting children to bed (Craig 2006b, Baxter and Smart 2011, Hook and Wolfe 2012). In couple families, this means that mothers generally take more responsibility for the routine activities, centrally physical childcare and delivering children to school and activities on time. While fathers' predominantly talk-based childcare is less time-critical and easier to fit around their other commitments, mothers' mostly routine activities tend to need doing at particular times of day. While fathers are becoming more involved in routine activities, deep divisions persist (Craig, Powell and Smyth 2014).

But do the gender differences in the division of childcare pertain for grandparents?

It may be that gender differences are deeply entrenched in the older generation after decades of gender role separation (Martinengo, Jacob and Hill, 2010). Or, among older couples who have withdrawn or partially withdrawn from the labour market, more-equal time availability may create a more gender-equal distribution of tasks. Retired or semi-retired men whose employment precluded them from being closely involved in caring for their own children may use their time availability in later life to be more involved in the care of their grandchildren (Ghysels 2011, Tarrant 2012, Craig and Jenkins, 2016). While many men may still bring more economic resources into the household (men continue to have higher retirement savings than women), the concept of 'earning power' has shifted once the members of a couple are no longer engaged in the labour market and this may be less influential in shaping household negotiations about distribution of unpaid tasks. Thus it is possible that being at a later stage of the life course could *weaken* gender norms (Emslie, Hunt and O'Brien 2004, Tarrant 2012), and facilitate the more-equal distribution of care activities among grandparents compared with parents.

Gender differences in the distribution of child care tasks could also be narrower for grandparents than for parents because, across the parent-grandparent dyad, mothers continue to do most of the routine care for the child. If mothers continue to take primary responsibility for the routine care tasks, then fathers, grandfathers and grandmothers are likely to spend less of their time on these tasks and more of their time on activities such as talking, listening and play (Craig and Jenkins, 2016). Indeed, a recent study of care composition in Australia found that while gender differences were smaller between grandparents than between parents, this was because grandmothers spent a lower proportion of their time in routine care tasks than mothers did. Grandfathers spent a much lower proportion of their time than grandmothers on routine childcare tasks (Craig and Jenkins, 2016). This chapter seeks to explore whether this pattern is reproduced across country contexts.

Care context

Australia, Italy, France and Korea have different patterns of employment participation, gender norms, and policy constellations.

Australia

Australia is usually classified as a liberal welfare state characterised by a residual role of the state in providing support to parents. Childcare is subsidised by the state but mostly provided by the market, costs are high and coverage is comparatively low. There is a comparatively limited paid parental leave scheme of 18 weeks at the minimum wage and a system of family support payments for mothers who stay at home.

Employment patterns in parent couples suggest a ‘one and a half earner model’ (Gerhard et al, 2005, 136) with high rates of full-time employment and long working hours among men, and high rates of part time employment among women (Craig 2006, Craig and Mullan 2009). The mature age employment rate (that is, the employment rate among those aged 55-64 years old) is relatively high (56.5%), with an effective age of labour market exit of 65 for men and 63 for women in 2014 (OECD, 2015).

Research suggests that Australian families subscribe strongly to the idea that intensive family care for children is essential (Gray, Baxter and Alexander 2008). Australian mothers and fathers spend the most daily time of any OECD country caring for children (Fisher and Robinson 2010). The “normative valorising of family care” means many Australian parents involve grandparents in the regular care of their children (Craig and Jenkins, 2016).

Australian grandparents play what Glaser et al (2013) would describe as a 'middling role' characteristic of liberal welfare states, with moderate levels of participation in both intensive and occasional childcare. As a result, they are likely to be providing routine tasks at varying levels. The high rates of part time work among mothers may mean mothers undertake most of the routine childcare tasks and the demand for grandparents to undertake routine tasks is lower than in countries where women tend to work full time and child care provision by grandparents is intensive. While there is a clear gender disparity in the composition of care among Australian mothers and fathers, fathers devote a lot of time to childcare tasks compared with their OECD counterparts which suggests a commitment to intensive childcare time (Fisher and Robinson 2010; Craig and Mullan 2011). It’s possible that in later life, once time commitments of paid work are reduced, grandfathers may invest more heavily in routine care tasks which could narrow gender gaps in care tasks between grandparents.

Italy

Italy is usually classified as a conservative European model of welfare state characterised by an emphasis on a (male) breadwinner and an adherence to a traditional familialist approach to welfare provision (Esping-Andersen, 2002). Italy has a generous paid parental leave scheme of 22 weeks paid leave at 80% wage replacement, followed by 11 months at a 30% wage replacement (Del Boca, 2015). Italy has well-developed universal early childhood education and care services for children aged 3-6, which are widely used (Glaser et al, 2010). Child care for children under three years old is publicly subsidised and mostly publicly operated but supply is limited and as a result parents of children this age often rely on grandparents (Glaser et al, 2010; Del Boca, 2015).

Employment among Italian women is well below the EU average and part-time work is comparatively rare (Roland Berger et al, 2013a). Employment among older Italians is low and the effective age of labour market exit is low (about 61 for men and women in 2014). There is an emphasis on the role of women in family care (Roland Berger et al, 2013a) and some stigma attached to mothers being employed (Del Boca, 2015). Although this culture is beginning to change, Italian women are more likely than others in the EU to leave work during childbearing years and the division of domestic labour is highly gendered (Del Boca, 2013, 2015).

Grandparents in Italy who provide childcare are likely to play an intensive role - very few provide 'occasional' childcare. Italy has among the highest rates of grandparents providing *regular and intensive* childcare – around 20% of grandparents who look after their grandchildren provide childcare 'almost daily' (Glaser et al, 2013). For this reason, Glaser et al group it with the Southern European countries, where "few part-time jobs, sparse institutional childcare and ungenerous in-kind family benefits, [mean that] more grandmothers provide intensive child care" (Glaser et al, 2013, 71). The high proportion of grandparents providing intensive care is likely to result in grandparents providing a large amount of routine care. The strong maternalist culture in Italy is likely to result in much of the responsibility for these routine tasks falling to grandmothers.

Korea

Korea is classified as a liberal-familialist model of welfare state, as it combines high rates of participation in full-time work with a heavily gendered division of unpaid work. Korea has a strong tradition of relying on family, particularly women, to provide child care (Kwon 2005, Lee 2005, Ochiai 2009). Over the last two decades, Korean governments have invested in improving family policies, particularly access to childcare (Lee and Bauer, 2010). Korea has a publicly-funded and privately-provided system of childcare. Care for children aged 0-5 is entirely subsidised by government (Chin et al, 2014). The Korean maternity leave scheme offers female employees 90 days paid leave, and then a year of parental leave paid at a lower rate (Chin et al, 2014). A child rearing allowance provides a flat-rate benefit for low-income families with young children who do not use childcare (Chin et al, 2014).

Korea has very long full-time working hours (Kwon, 2005; Lee, 2005; Ochiai, 2009). Female participation rates are lower than the OECD average, but among those who do work, the full-time rate is comparatively high. Very few men are employed part-time (OECD, https://www.oecd.org/korea/39696376.pdf). Korea has a high mature age employment participation rate (employment rate of those aged 55-64 years old) and a high effective age of labour market exit (73 for men and 71 for women in 2014).

Despite increasing emphasis on work-family balance, Korea's high rates of full-time work (and low rates of part-time work) mean many mothers who return to work require intensive childcare. Recent research suggests that while the proportion of Korean grandmothers who 'had provided childcare in the last year' was comparatively low (12%), those who did provide care did so for an average of 50 hours per week (Lee and Bauer, 2010). As in Italy, the high proportion of grandparents providing intensive care in Korea is likely to see them doing a large amount of routine care. Also like Italy, the strong maternalist culture in Korea is likely to see much of the responsibility for these routine tasks fall to grandmothers. Given the high average retirement age, grandparents in Korea have less time to develop new patterns of time use, which may lead to higher gender segregation in care tasks.

France

France shares some characteristics of the conservative European and some of the social democratic welfare states (Esping-Andersen, 2002). It has an employment-based system of social protection in which social rights accrue to the male breadwinner but combines this with support for women's paid work (Pfau-Effinger, 2005; Del Boca, 2015). France has a system of highly available and affordable subsidised childcare, both formal centre-based care and care by 'childminders' in the home. There are also generous paid maternity (16 weeks at 100% wage replacement) and parental leave (36 months at just over 40% wage replacement) schemes (Del Boca, 2015) and a generous system of family payments (Glaser et al, 2010).

Women's employment participation is higher than the EU average and their part time employment sits at about the EU average. Men's part time work remains low (Roland Berger et al, 2013b).

Mature age employment is also low: the effective age of labour market exit in 2014 was about 59 for men and 60 for women.

While France's family policies align quite closely with those of the social democratic countries, the social and cultural context differs. In the social democratic countries, there is an "egalitarian cultural image of the family", whereas in France the "dominant model assigns responsibility for informal care work unilaterally to the woman" (Pfau-Effinger, 2005, p 334).

The widely accessible formal childcare, generous parental leave and family payments systems mean grandparents are more likely to provide occasional than intensive care for grandchildren (Glaser et al 2013). The result may be that, overall, grandparents in France do fewer routine care tasks and may mean that the routine care tasks they do undertake are shared more equally between grandmothers and grandfathers.

Data and Method

In order to explore how grandparents spend time with their grandchildren, we used Time Use Surveys (TUS) of Australia (AUSTUS 2006), Korea (KTUS2009), Italy (ITUS2009) and France (TUS2010) conducted by the national statistical agency of each country. Each contains representative samples of the respective country populations. All collected information through a self-completed time diary of activities performed over the full 24 hours of each surveyed day. The Australian, Korean and French TUS collected data over two days and the Italian TUS collected data for one day only.

Several issues arose in harmonising the four countries' data, because demographic detail and activity coding were not identical. In the AUSTUS grandparents were identified through a survey question 'do you have a grandchild under 15?' The Italian, Korean and French TUS had no specific indicator of grandparent status. Therefore, we used childcare behaviour as a proxy to identify grandparents. We selected respondents aged 55-75 who reported doing unpaid childcare on the diary day(s), and were not the child's own parent. This solution had limitations: we cannot accurately identify all grandparents but only those who participate in unpaid childcare. However, our interest is in the gender composition of care, not the amount performed or how many grandparents do it. Our final sample consisted of 1789 grandparents. A sample description is in Table A1.

Our outcome variables are the specific activities which comprise childcare: *physical care*, including feeding, bathing, dressing, putting children to bed; *accompanying* and transporting children, waiting for or meeting children, ensuring their safety and handing them over to substitute carers; *talk-based care* including reading, teaching, talking, listening, and playing games with children; *minding* children, caring for children without active involvement, monitoring children, being an adult presence for children to turn to, supervising. All three surveys differentiate between these four broad activities, but specific coding slightly differs. Due to the sample and coding differences we do not compare countries directly or conduct multivariate analysis, but rather present descriptive summaries of gendered patterns within countries. Grandparents' mean daily minutes spent in each of the four dimensions of childcare are shown in Table A1. Our focus is the proportional composition of care in each country, so we use the amount of childcare only as a basis for calculating the within-country shares. We present figures illustrating how each activity is proportionally distributed in two ways. First, we look at how the *total of each type of care is shared* between grandfathers and grandmothers. This is to show the gender distribution of each care type in each of the four countries. Second, we look at how the total childcare time of grandfathers and grandmothers is proportionally distributed across the four types of childcare. This is to compare, in each country, *the gendered composition of*

care. Our aim is to examine whether and how grandmothers' and grandfathers' relative contribution differs across countries.

This study is subject to several limitations. As noted above we could not directly identify grandparents in Italy, Korea and France, and inferred grandparent status through child care behaviour. There are also small sample sizes, especially for Italy, so we present descriptive analyses and can draw broad inferences only. Our cross-sectional data can only give a snapshot of grandparental childcare at a point in time. We do not know how many grandchildren are cared for and their ages. We also do not know how close the grandparents lived to their grandchildren or whether the grandparents were paternal or maternal, both factors which can affect the intensity of care (Ghysels 2011, Condon *et al* 2013). Notwithstanding these caveats, the study offers new insight into the gendered distribution of care in grandparenthood and how this differs cross nationally.

Results

Figure 1 illustrates the gender balance for grandparents (top panel) within the total amount of each type of childcare. It shows what proportion of the total childcare time within each category is done by grandfathers and what proportion is done by grandmothers. Some activities are more evenly distributed by gender than others. For example, a higher proportion of total physical care is performed by grandmothers than by grandfathers in all four countries, whereas in most of the countries, talk-based care is more evenly divided by gender.

However, gender patterns are not the same in each country. Italy conformed to the pattern noted above in that time spent in talk-based care was relatively equally distributed between grandmothers and grandfathers, whereas physical care was predominantly performed by grandmothers. In Italy, the distribution of time spent on physical tasks was the most unequal of the four countries, with grandmothers providing 90% and grandfathers only 10%. Yet the contribution to time spent in accompanying a child was substantially different for Italian grandmothers and grandfathers. Grandfathers spent about 70% of the total grandparental time allocated to accompanying and transporting children. One possibility is that Italian grandfathers may be delegated responsibility for taking children to and from school or day care, or another is that there may be a disparity in holding a driver's license among older cohorts of Italian men and women, although our small Italian sample means we cannot draw strong conclusions. Grandfathers contributed around 45% of the supervisory or minding childcare time suggesting time spent in this activity is more gender equal than time spent on other activities.

Patterns of childcare time for France were like Italy with some notable exceptions. Physical care in France was more equally distributed, with grandfathers contributing 41% of physical care. As in Italy, talk-based care was approximately evenly distributed between grandmother and grandfathers. In France, grandfathers contributed around 30% of supervisory care, and as in Italy, men contributed a high proportion of the time devoted to accompanying and transporting children.

In Korea, similar to Italy and France, talk-based care was approximately evenly distributed between grandparents. Supervisory care was also fairly equally distributed and, in contrast to Italy and France, Korean grandfathers spent slightly less time accompanying children than did grandmothers. In Korea, the distribution of time spent on physical tasks was the most unequal of the four care tasks, with grandmothers providing 74% and grandfathers 26%. This was distributed more equally than in Italy but less equally than in France.

Australia has the most unequal distribution of care tasks between grandmothers and grandfathers. Australian grandfathers did a considerably lower proportion of talking and accompanying/

transporting than Australian grandmothers. They also did a considerably lower proportion of talking and accompanying than their male counterparts in the three other countries. In Australia, grandfathers contributed around 37% of supervisory care compared with grandmothers' 63%, higher than France but lower than Italy and Korea. In Australia, grandmothers provided 84% and grandfathers 16% of physical care tasks, more equally distributed than in Italy but less equal than France and Korea.

Figure 1: Gender proportion of each form of grandparent care in Italy, Korea, Australia and France

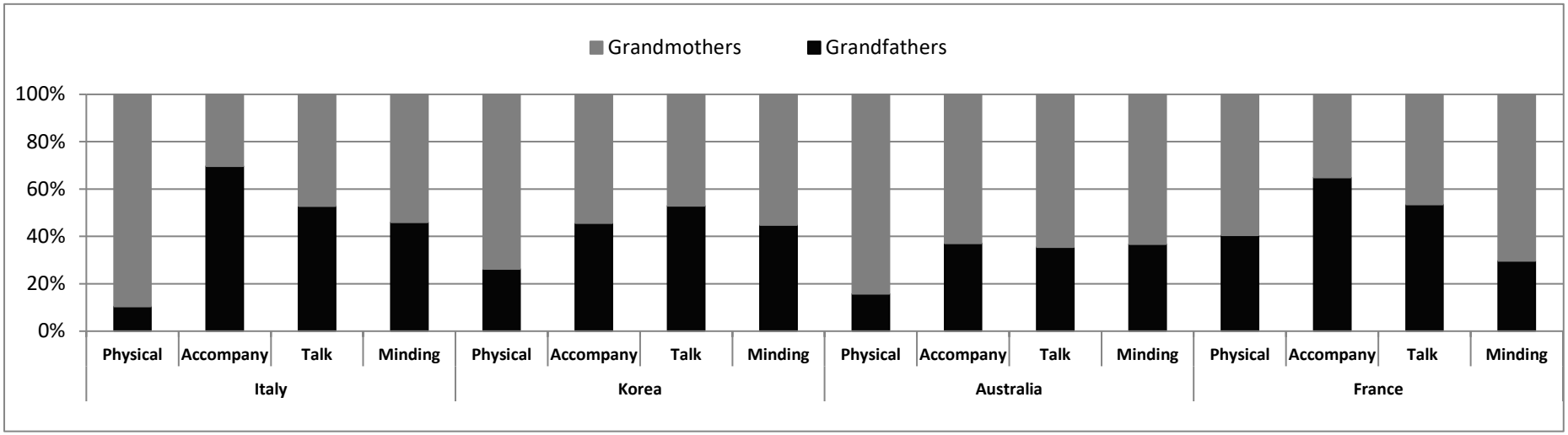

Figure 2: Grandparents' own average care composition by gender in Italy, Korea, Australia and France

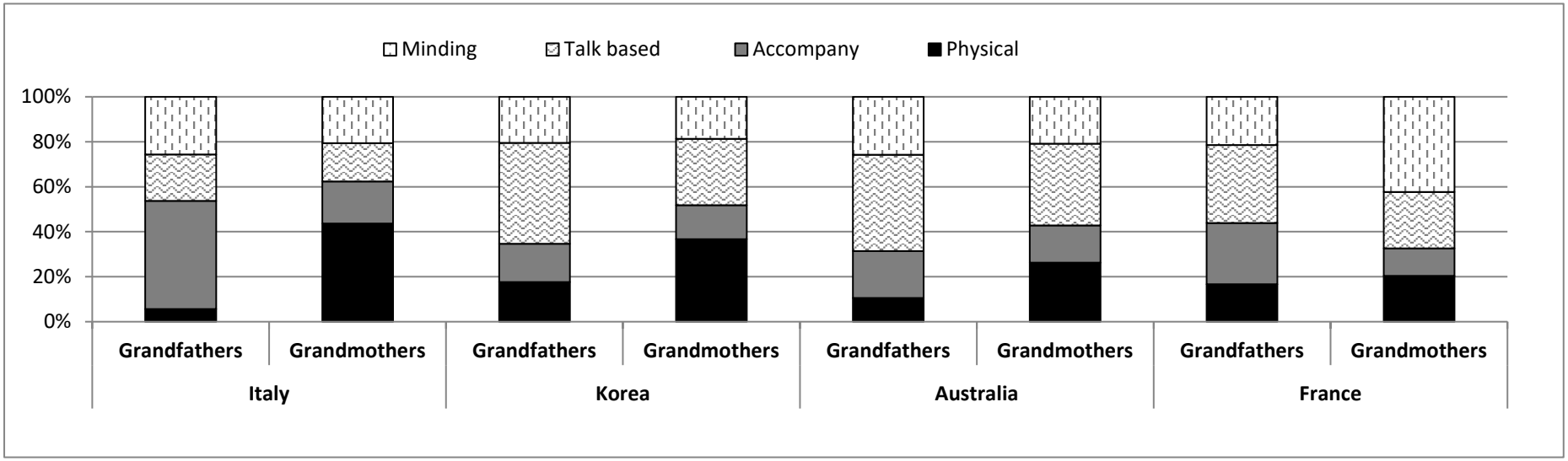

Figure 2 cuts the data differently and presents a gender comparison of grandparents' own average childcare composition in each of the four countries. In Italy, physical care consumed the greatest proportion (around 44%) of grandmothers' care time. Accompanying a child and talk-based tasks consumed around 17-19% of grandmothers' time. In contrast, Italian grandfathers spent less than 6% of their care time in physical tasks, just under 50% of their time accompanying a child, and approximately 20% in talk-based care. Child minding occupied around 20% of both genders' childcare time.

Patterns were different in France. French grandmothers and grandfathers spent a relatively similar proportion of their care time (20% and 17% respectively) on physical care. Grandmothers spent around 42% of their care time supervising children while grandfathers spent considerably less of their care time on this task (21%). Grandfathers spent more of their overall childcare time on talk-based and accompanying tasks than grandmothers did.

In Korea, patterns were like those in Italy. Korean grandmothers spent around 40% of their care time in physical care, 15% accompanying a child, around 30% in talk-based care and just under 20% minding children. Korean grandfathers spent less of their care time in physical care (20%) but talk dominated their care time. Like in Italy, the proportion of total care devoted to childminding in Korea was relatively similar by gender, at 20%. However, unlike in Italy, relative time spent in accompanying a child was consistent (17%) across genders.

In Australia, like Korea, the gender gap in the proportion of physical care was approximately 15%-20%, with grandmothers spending approximately 25% of their care time and grandfathers spending approximately 10% of their care time doing physical care tasks. However, in Australia, grandmothers and grandfathers spent a lower proportion of their overall care time doing physical care tasks than Korean grandparents did. Australian grandfathers spent relatively more time than Australian grandmothers in accompanying, talk-based, and supervisory tasks, though the proportional gender differences in these three care types were not large.

Across all countries men's care included relatively less physical care than women's care. The gender gap in the proportion of physical care was much narrower in France. In all countries except Italy, grandfathers reported that talk-based care took up the greatest proportion of their time. Relative time spent in child minding was the most consistent by gender with the exception that French grandmothers reported a considerably higher proportion of supervisory care than grandmothers and grandfathers in the other three countries. Except for Italian and French grandfathers, who reported higher proportions, the relative time spent accompanying a child was also reasonably consistent (12 to 20%) across both genders.

Discussion and Conclusion

Gender differences in how care activities were distributed were present in all four countries. The descriptive results in Figure 1 suggest that in all countries, grandmothers do considerably more of the physical care tasks than grandfathers. This reflects patterns we see in the distribution of physical care tasks among parents (Craig 2006, Craig, Powell, and Smyth 2014)).

But the *extent* of gender difference in the distribution of physical care varies across countries. France had the most equal apportionment of physical care tasks. This could be for several reasons. France is the only of the four countries in which more grandmothers in the sample are employed than grandfathers. It is also the only country with fairly equal participation in full- and part-time work among grandfathers and grandmothers in the sample (see Table A1), so the time available for routine tasks is more equal.

Physical care tasks are distributed less equally in Korea, Australia and Italy, where grandfathers undertake 18, 11, and 6% of physical care tasks respectively. The Italian grandfathers in the sample have the highest levels of full-time work, followed by Australian and then Korean grandfathers, so it is possible that time availability plays a role. It could also partly be a function of social norms about the gendered distribution of

care. In Korea and Italy, which exhibit familialist-style welfare states and social norms, we could expect a more gender-unequal distribution of care tasks. However, Australia has a liberal welfare model, higher levels of female participation in work, and high time commitment of fathers to childcare compared with the OECD, yet grandparents share physical care tasks less equally than grandparents in Korea.

The distribution of the other three forms of care – accompanying, talking and minding – was more equal by gender. Except for Australia, grandfathers did roughly equal to or more than grandmothers when it came to accompanying grandchildren, for example taking grandchildren to childcare. In Italy and France, grandfathers did considerably more of the accompanying care than grandmothers. This diverges from the patterns we see in the distribution of tasks among *parents*, where mothers tend to do a greater proportion of the accompanying than fathers (Craig and Jenkins 2016, Craig 2006b). This may be a result of grandfathers' greater availability for transporting children in the mornings and afternoons once they are no longer working or working more flexibly.

However, while French grandfathers in the sample have the lowest workforce participation (see Table A1), the grandfathers in the Italian sample (who are younger on average than the grandfathers in the other three countries) report the highest levels of full-time employment and, simultaneously much higher levels of accompanying. This suggests factors other than time availability may be at play, but the small sample size makes it difficult to draw conclusions. Nonetheless, the increased participation of grandfathers in accompanying may contribute to narrower gender gaps in the distribution of care tasks among grandparents than among parents.

In all countries except Australia, grandfathers and grandmothers share talk-based tasks such as playing, reading and teaching close to equally. Minding is shared fairly equally between genders in Italy and Korea but in Australia and France grandmothers do more minding than grandfathers. It is possible that in Australia and France, which have higher rates of part-time work, more of the care that grandmothers do is secondary care while their daughters or daughters-in-law are present or absent for short periods, so minding makes up a greater proportion of their overall care time.

It appears that in Italy and Korea, the two countries in which low rates of part-time work and poor access to childcare are likely to see grandparents play what Glaser et al (2013) describe as a more 'intensive role', grandparents are undertaking more routine care (physical and accompanying) as a proportion of their overall childcare. They are also undertaking more physical care as a proportion of their own overall childcare, compared with grandparents in France, where a strong public childcare system means that grandparents are more likely to provide what Glaser et al (2013) describe as 'occasional' childcare, and Australia, where grandparents play what Glaser et al (2013) would describe as a 'middling role', with moderate levels of participation in both intensive and occasional childcare.

But while some countries see grandparents in general spend a higher proportion of their care in routine tasks, the way it is distributed between grandmothers and grandfathers varies, and is shaped by a range of factors. For grandfathers in Italy, Korea and Australia, more of their childcare consists of time-flexible activities such as talking, reading, listening and play whereas for grandmothers in these countries, more of their time is spent doing routine tasks. In France grandmothers still spend a greater proportion of their care time doing physical care tasks than grandfathers. However, it is the only country in which grandfathers spend a higher proportion of their care time on routine tasks (physical and accompanying care combined) than grandmothers. Routine tasks are likely to be more demanding and time-constraining than supervising or playing (Craig 2006), so it is grandmothers in Italy, Korea and Australia whose caring tasks are more likely to affect their enjoyment of childcare, and impact on their health and wellbeing, work, leisure and other commitments.

In conclusion, this study reveals the way in which gender differences in the distribution of childcare tasks persist across generations in different country contexts. Across all countries, grandmothers do more physical care tasks than grandfathers, suggesting that even when less constrained by time spent at work, gender

norms in the distribution of care tasks persist into grandparenthood. Existing research has found that a country's institutional context can shape the prevalence of grandparent childcare provision and how much care grandparents are providing (Glaser et al, 2013). This study suggests that a country's institutional context also has the potential to shape the *types* of childcare tasks that grandparents undertake, and *the reproduction of gendered patterns of childcare across generations*. In countries with policies or cultures that support *mothers* to combine work and care, such as Australia and France, *grandmothers* do less routine care as a proportion of their overall childcare. Where there is little support for *mothers* to combine work and care, and grandparents are likely to assume more 'intensive' (Glaser et al, 2013) childcare responsibilities, *grandmothers* are spending much more of their childcare time in routine care, especially physical care tasks. This suggests that the care tasks carried out by mothers and by grandmothers are intertwined, as the two generations manage employment and childcare across different institutional contexts.

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Table A1: Sample description and mean time spent in each childcare activity

	Italy		Korea		Australia		France	
	Male	Female	Male	Female	Male	Female	Male	Female
No of diaries	37	45	195	445	197	377	326	644
No of people	37	45	144	303	150	269	295	546
Gender (%)	49.8	50.2	30.8	69.2	33.9	66.1	33.5	66.5
Age (mean (SD))	57.0 (6.3)	58.0 (6.3)	63.9 (5.2)	63.6 (5.6)	61.0 (9.8)	58.2 (9.7)	62.1 (5.0)	62.6 (5.2)
Employment status (%)								
Full-time	54.7	14.8	35.1	13.6	39.3	14.5	15.6	16.0
Part-time	4.6	13.9	15.4	12.7	9.8	29.1	4.3	4.3
Not employed	40.8	71.3	49.5	73.8	50.9	56.4	80.1	79.7
Care type (mean (SD))								
Physical	3.5 (16.6)	30.1 (43.8)	16.2 (39.9)	45.6 (62.7)	9.7 (22.0)	32.4 (61.5)	13.7 (37.4)	20.1 (44.8)
Accompanying	29.6 (26.1)	12.9 (24.4)	15.8 (40.8)	18.8 (37.5)	19.2 (33.1)	20.4 (33.2)	22.5 (42.8)	12.2 (26.3)
Talk-based	13.1 (35.2)	11.7 (26.8)	41.3 (47.4)	36.7 (57.3)	39.4 (49.1)	44.8 51.4)	28.6 (48.9)	24.8 (46.7)
Minding	12.1 (34.5)	14.2 (29.6)	18.9 (36.1)	23.3 (45.0)	23.7 (69.8)	25.6 (54.9)	17.7 (43.7)	41.8 (73.3)
Total	58.3 (52.1)	68.8 (66.2)	92.2 (91.0)	124.4 (117.5)	92.0 (86.7)	123.2 (99.6)	82.5 (71.2)	98.9 (87.2)