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Artículo

Unravelling the Political Economy of Social Policy Formation: The Spanish
Compulsory Maternity Leave, 1900-1936

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Maternity leave developed as part of the health insurance systems during the formation of most European welfare states, emerging as the first work-family policy. Although its expansion benefited from an ideological enhancement of maternity's societal role, cross-country differences arose depending on distributive conflicts between social groups. Nevertheless, the political economy of such a policy has not been fully explored yet. This paper focuses on the Spanish case. Implemented in 1931 after more than thirty years of debates, compulsory maternity leave became the second Spanish compulsory social insurance. Throughout this process, controversies between the labour movement, employers, doctors and women's movements were determinant in shaping and delaying the scheme's development. The study analyses the debates between those groups during the first third of the twentieth century and finds evidence of the different models in place, as well as significant intra-group cleavages based on ideology, class composition and sectorial and regional variance.

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La economía política de la formación de políticas sociales: el seguro obligatorio
de maternidad en España, 1900-1936

R E S U M E N

El seguro de maternidad se desarrolló como parte de los seguros de salud durante la formación de los Estados de bienestar europeos, siendo la primera política familiar. Aunque el fortalecimiento del rol social de la maternidad benefició su expansión, surgieron diferencias entre países debido a conflictos distributivos entre grupos sociales. Sin embargo, la economía política de esta política aún no se ha explorado por completo. Este artículo se centra en el caso español. Implementado en 1931 tras más de treinta años de debates, el seguro de maternidad se convirtió en el segundo seguro social obligatorio del país. Durante este proceso, las controversias entre sindicatos, patronal, médicos y movimientos de mujeres determinaron la formación y demora del seguro. El artículo analiza los debates entre estos grupos durante el primer tercio del siglo xx, presentando evidencia de sus preferencias, así como significativas divisiones internas basadas en ideología, composición de clase y variaciones sectoriales y regionales.

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1. Introduction

Income support for families with children was a constitutive part of the development of welfare states. From 1880, most Western European countries introduced compensatory provisions in their health insurance schemes guaranteeing working mothers the right to rest before and after childbirth (Gauthier 1996). By doing so, maternity leaves emerged as the first relevant family policy of European welfare states (Bock and Thane 1996). In explaining such a generalisation, several comparative and case studies have emphasised the pivotal role of political elites, liberal professions and social reformers, driven by demographic concerns over declining birth rates and high infant mortality, to protect working mothers and their children (Bock and Thane, 1996; Buttafuoco, 1996; Cova, 1996; Gauthier, 1996; Koven and Michel, 1993; McDougall, 1983; Mouton, 2007; Ohlander, 1996; Pedersen, 1995; Peterson, 2018; Stoehr, 1996). However, most analyses focus on the general relationship between women, families and the State rather than investigating how distributive conflicts vis-à-vis ideology and demography shaped different policy models in different countries.

Yet, as part of health insurance, significant cross-country differences emerged between maternity leave models depending on whether they were compulsory or voluntary, contributory or non-contributory, or provided flat rate or wage-proportional benefits (Murray, 2007; Pons, 2010). Understanding such differences requires focusing on the active role of political parties, ideological factions and interest groups in shaping the emergence of public services and social policies (Ansell and Lindvall, 2021). Nevertheless, despite intersecting the social insurance investigation and the gendered dimension of the welfare state, the political economy of maternity leave has been frequently overlooked. In other words, did the different pressure groups advocate for different maternity leave models? Was ideology a divisive factor among them? How did their opinions compare with policy outcomes?

This paper addresses these issues by analysing the development of Spanish maternity leave. Emerging as the second compulsory social insurance, it became central to social reformers and policymakers (Pons, 2010). As in other countries, Spanish literature has emphasised the leading role of social reformers, Catholics, doctors and hygienists who conceived maternity leave as a population policy to reduce infant mortality rates by reinforcing the male breadwinner family model (Blasco, 2016; Cenarro, 2016). As argued by Cuesta (2012a, 2012b), working women were passive in this process, as the primary objective of maternity leave was to enhance their social role as mothers rather than active citizens. However, although unpaid leave was introduced in 1900, Spain introduced maternity benefits in 1923, later than most European countries, and the compulsory scheme was not implemented until 1931. Even then, the Spanish maternity leave became the only European program that performed independently from any general health insurance scheme until 1944. As several studies have emphasised, the opposition from insurance companies, the medical sector, employers, landowners, and even the labour movement—including many working women—was crucial in explaining such timing and outcome (Espuelas, 2022; Pons and Vilar, 2014; Cuesta, 1988; Samaniego, 1988). Furthermore, Spanish exceptionalism allows for studying public opinion towards maternity leave inde-

pendently from health insurance and throughout different political regimes.¹

Nevertheless, a comprehensive examination of how social groups' controversies influenced the development of compulsory maternity leave is still lacking. This paper investigates the political debates between interest groups—social reformers, the labour and women's movement, employers, doctors—and ideological factions—socialists, communists, anarchists, Catholics, reformist liberals, and feminists—from 1900 to 1936. It does so by focusing on the three key policy reforms that took place during the period: the frustrated development of health, maternity and invalidity insurance in 1922–1923; the controversies that preceded the approval of the Compulsory Maternity Insurance Law (1929); and the reactions to the Law's implementation after 1931.

To that end, the study relies on several sources. For the first period, the proceedings and reports of the National Conference on Sickness, Invalidity and Maternity Insurance in Barcelona (hereafter, Barcelona Conference, 1922), are particularly relevant. They contain the debates between several social groups about the shape of a health insurance project proposed by the National Welfare Institute (INP, for Instituto Nacional de Previsión). As for the subsequent period, the study predominantly relies on the Public Information on the Maternity Leave Draft Bill. It resulted from an open call launched by the INP to collect the opinions of several organisations and prominent figures from the labour, women's and catholic movements, employers and doctors about the project they had developed. As a result, the Institute collected several reports sent by 168 respondents, with their opinions about the Bill's different articles. Despite the scarcity of respondents in absolute terms, the report collected a diverse sample of the Spanish associative world and has been used by several qualitative studies, either as a central (see Cuesta, 1988, 2012a, 2012b) or complementary source (see Blasco, 2016; Pons and Vilar, 2014; Samaniego, 1988). In the most profound qualitative inquiry to date, Cuesta (2012a, 2012b) used this source to analyse the construction of maternity as a multifaceted social role. It highlights the plurality of social actors' opinions regarding maternity leave coverage (age, income and sector) and benefits (duration of the leave, breastfeeding period, and cash benefits and services).

This paper builds on these previous contributions. First, it systematically explains social groups' controversies by codifying the preferences and controversies between social groups about alternative maternity leave models—i.e., the benefits, coverage and financial resources the scheme should have. Second, it also isolates and examines Catholics and women's attitudes towards the maternity leave project. Moreover, connecting the results of the new codification with European historical debates and historical social policy literature allows for a better comparison with other case and comparative studies. Finally, the paper mainly relies on several reports about the social reaction to the scheme's implementation between 1931 and 1936. All these sources are complemented with information from trade unions, political manifestos, Party press, and other public forums and Parliamentary debates. Therefore, although most of these sources are well-known in the litera-

¹ One could argue, in Lindert's (2004) terms, between 1900 and 1936, Spain oscillated between elite democracy (Bourbonic Restoration, 1874–1923), non-democracy (Primo the Rivera's dictatorship 1923–1931), and full democracy (Spanish Second Republic, 1931–1936).

ture, this paper is, to my knowledge, the first to use them to systematically establish social groups' opinions over different maternity leave models and throughout the whole period.

This study provides some interesting findings. First, it shows that the Spanish labour movement was ideologically divided. Therefore, Catholic workers —particularly their feminine sections— advocated for a generous and quasi-universal maternity leave scheme funded by contributions from female workers, employers and the State. Conversely, socialists rejected workers' contributions until 1927 —and only supported them after 1932. However, they envisioned a far less generous and universal model than their Catholic counterparts. The shift in socialist stance during the 1930s was contingent upon their pivotal role within the Republican regime, recognising the need for worker contributions to develop a comprehensive social insurance system in a context of limited fiscal capacity. Nevertheless, the labour movement remained divided as anarchists, communists, and left-wing republicans persistently opposed workers' contributions. Second, women's movements were also divided along ideological lines, as they proved unable to build cross-partisan platforms and campaigns.

A third suggestive pattern is the regional division of employers' opinions, as employers' associations led by labour-intensive, often feminised industries —like Catalonia— and agricultural employers opposed tripartite contributions and the compulsory scheme. However, their role in developing a comparatively generous maternity leave in Catalonia after 1931, following the dramatic expansion of workers' mobilisation, suggests many employers finally accepted it. Conversely, in regions with a higher prevalence of capital-intensive firms and lower female em-

ployment, they showed greater receptivity towards tripartite contributions. Finally, although doctors supported developing a generous maternity leave system for all working women, their reluctance to accept public agreements on health services, infrastructure and fees suggests that such support was contingent on their ability to avoid public regulation.

The paper is organised as follows: The next section examines the development of European maternity leave schemes. The third, fourth and fifth sections analyse the abovementioned Spanish policy debates. The paper ends with some concluding remarks.

2. The development of Spanish maternity leaves in the European context

The decades between the turn of the century and the inter-war period envisioned a growing concern about the demographic trends in most Western European countries. Declining fertility rates and high infant mortality compelled national Governments to implement maternity protection policies (Bock and Thane, 1996; Gauthier, 1996). In particular, as the late 19th Century protective legislation (i.e., unpaid maternity leaves) proved ineffective in improving the health conditions of working mothers and their children, international conferences progressively recommended implementing paid maternity leave schemes (Gauthier, 1996). However, this expansion entailed significant cross-country differences in maternity leaves' timing (see Table 1) and model, according to national contexts and the relative strength of alternative social groups.

Table 1.

First maternity leave legislation (unpaid, allowance and statutory leave schemes)

Country	Unpaid leave	Maternity benefit	Statutory paid leave
Southern Europe			
Spain	1900	1923	1931
Italy	1902	X	1910
Portugal	1891	ns	X
Western Europe			
Austria	1884	1888	1911
Belgium	1899	1894	ns
France	1909	1913	1927
Germany	1878	X	1883
Luxembourg	ns	X	1901
Netherlands	1910	X	1913
Northern Europe			
Denmark	1913	1915	1933
Finland	1917	1937	1950
Norway	1892	X	1909
Sweden	1900	1912	1931
United Kingdom	1891	1911	X
Ireland	1901	1911	X

Source: Own elaboration based on Harris (1919), ILO (1933) and Gauthier (1996).

Therefore, most of the first countries to implement health insurance systems—Austria, Germany, Luxembourg, and the Netherlands—introduced statutory paid maternity leaves before World War I. They combined replacement benefits linked to previous earnings with free medical services and became funded by employers and workers—with variable public subsidies (see Harris, 1919; Gauthier, 1996). Although initially confined to the industrial workforce, those models progressively expanded to entitle most of the working class and the wives of insured male workers. In these countries, such policies were part of Bismarck-inspired programs to countervail socialist activity (Hicks, 1999), even if contributory social insurance was assumed—even preceded—by high-risk, large, capital-intensive companies to benefit their high-skilled workers (Mares, 2003). Conversely, although German maternalist feminism contributed to the development of maternity leave schemes (Koven and Michel, 1993), their influence was undermined by the division of the women's movement and the lack of a consistent family policy strategy, in particular during the Weimar Republic (Mouton, 2007; Stoehr, 1996).

By contrast, in Norway, the only Scandinavian country to implement a compulsory health insurance system before the interwar period, feminists, midwives, and working mothers successfully expanded the scheme coverage and generosity, influencing a higher State involvement (Peterson, 2018). The remaining Scandinavian countries developed maternity leave out of voluntary schemes dependent on sickness funds, implementing statutory leaves well after World War I (see ILO, 1933). Even then, their maternity leaves remained shorter than their European counterparts, and their benefits flat-rate. Nevertheless, these schemes reached universal, citizen-based coverage, especially in the entitlement to health benefits. In such a process, the influence of social democrats—particularly social democratic women—and a politically influential export-led agribusiness sector were decisive in advancing universal family policies (Baldwin, 1990; Ohlander, 1996).

In France, the prominence of subsidised, voluntary social insurance, employers' opposition to compulsory schemes and the reluctance of workers' mutualism to lose autonomy delayed the implementation of health insurance until 1927 (Dutton, 2002). However, a powerful pronatalist movement supported by social reformers and maternalist feminists contributed to developing a tax-funded, means-tested, flat-rate maternity leave scheme, a special benefit at 100% of previous income under medical prescription and a 12-week breastfeeding allowance for nursing mothers (Cova, 1996; McDougall, 1983). By contrast, although British health insurance introduced flat-rate benefits for industrial working mothers and the wives of insured male workers, the scheme hardly developed afterwards. Neither trade unions nor the Labour Party showed a significant interest in developing family policies, and despite the presence of grassroots, independent feminism, its focus on political issues and the division caused by World War I prevented them from exercising a decisive influence on social policy formation (Pedersen, 1995).

Among Southern European countries, only Italy implemented some income support for working mothers before World War I. Italian maternity leave was passed before health insurance, developing a compulsory system funded by employers, female workers and the State, and providing flat-rate benefits to industrial working women (Quine, 2002). As Buttafuoco (1996) has documented, women's movements preceded the

Government by establishing many maternity funds. However, internal divisions prevented them from exercising a more significant influence in the 1910 Law, and even socialists and liberals failed to overcome employers' resistance and advance a more ambitious sickness scheme providing proportional replacement benefits and including agricultural workers (Quine, 2002; Buttafuoco, 1996). As a result, the Law found opposition from women workers and could not reach a significant proportion of their potential recipients (Buttafuoco, 1996). On the other hand, although the Portuguese Government tried to develop a health insurance project that included maternity benefits after World War I, these were not successfully implemented until 1962 (Carolo and Pereirinha, 2008).

Compared with most of their European counterparts, the developing process of Spanish maternity leave was particularly long, taking 31 years since the implementation of the unpaid scheme in 1900. Throughout this period, many legislative attempts came out (which can be found in Appendix, Table A1). As in Italy, Spanish social reformers failed to advance German-style comprehensive health insurance in 1923 and were forced to develop an isolated maternity leave scheme passed in 1929 and implemented in 1931. In the meantime, tax-funded maternity insurance was introduced in 1923. Moreover, 1931 was not the end of the story, as the last attempt to develop a comprehensive health insurance system before the Civil War failed in 1936 (Samaniego, 1988). Throughout this period, alternative models advocated by different social groups competed to materialise.

3. From protective legislation to compulsory maternity leave: The debates over social insurance during the Spanish Restoration regime (1900-1923)

Spanish fertility rates were higher than in other European countries, and the country's neutrality in World War I avoided massive human losses. As a result, Spain lacked the powerful pronatalist movements that shaped social policies in countries like France. Nonetheless, from the late 19th Century, Spanish social reformers became increasingly concerned by persistently high infant mortality rates and found compulsory maternity leave a crucial policy in improving the health conditions of working mothers and their children (Blasco, 2016). The 1900 unpaid maternity leave had proven ineffective, as employers sought to avoid workforce replacements while working women could not afford to leave paid work without income compensation (Leal, 1923). Moreover, the insufficient saving capacity of the Spanish working class and the scarce State support hindered the success of voluntary insurance schemes (Espuelas, 2013). Bottom-up initiatives also failed to relieve working mothers, as the Spanish friendly societies were weaker than in other countries such as Britain or France (Largo, 2016), and their provision of maternity benefits was negligible (Pons and Vilar, 2014). Neither did the Spanish women's movements establish maternity funds as their Italian counterparts (Leal, 1923), and private social insurance companies' low scale and limited capital hindered commercial insurance scope (Pons and Vilar, 2012).

In that context, social reformers within the Institute for Social Reform (IRS, for Instituto de Reformas Sociales, 1903) and the INP (1908) became increasingly aware that developing a compulsory maternity leave scheme was necessary (see Aznar, 1923). Both Institutes were managed by middle and up-

per-class professionals and academics influenced by social Catholicism and Progressive liberalism, inclined towards German-style, contributory social insurance (Martínez, 1988). Providing maternity benefits was also gaining momentum among socialists and Catholics. In 1906, the socialist General Union of Workers (UGT, for Unión General de Trabajadores) asked the IRS to modify the 1900 unpaid leave and compensate income losses by creating German-style Assistance Funds (IRS, 1909). The proposal, advanced by Virginia González, illuminates the active role of working-class women in campaigning for social policies (Bizcarrondo, 2008). On the other hand, in 1917, Catholic Action for Women—a leading cultural and political apostolic organisation—required the Government to implement a paid maternity leave covering married working women and funded by working women, employers, and the State (Cuesta, 1988). As in other countries, Spanish social Catholicism actively demanded social policies, particularly family policies, as they attempted to countervail class conflict (Montero, 2004; Van Kersbergen, 1995). To that end, they successfully mobilised an increasing number of middle-class and upper-class women—the so-called *damas*—, increasing their political influence by emphasising their social role as wives and mothers (Blasco, 2003).

However, compulsory social insurance did not jump into the public debate until the destabilising consequences of World War I became apparent. The rising inflation rates during the conflict and the industrial crises once it concluded dramatically increased social unrest and boosted working-class organisation, starting the so-called crisis of the Restoration Regime (1917–1923). International commitments also pushed Spanish governments into action as the Washington Convention urged them to establish a paid maternity leave scheme (Cuesta 1988).

In this context, the Spanish last governments of the Restoration implemented some reforms, such as the 1919 compulsory old-age insurance (ROO, for Retiro Obrero Obligatorio). In 1922, the INP promoted, with representation of most Spanish social groups, the Barcelona Conference to discuss the compulsory health, maternity, and invalidity insurance project, prepared by them (Cuesta, 1988). Compulsion sought to broaden coverage beyond skilled workers and to improve cost-effectiveness by managing a larger pool of premiums. As in the case of sickness, maternity leave would provide a flat rate cash benefits of 2.5 daily *pesetas*, since the absence of a professional census prevented to determine a proportional compensation, although voluntary contributions could supplement benefits up to 75% of the worker's income (INP 1925, p. 127).² Replacement benefits would be completed with a 100 *pesetas* lump-sum bonus to afford childbirth expenses and health services.³

The scheme should cover all wage earners but not the self-employed—tenants, artisans, small landowners, and retailers. Their unknown numbers could substantially increase administrative costs, and the INP feared that their inclusion, having to pay both personal and employer premiums, might escalate opposition to the scheme (INP, 1925, p. 12). By con-

trast, they explicitly included domestic and home-based workers. Although occupying 31% of the female workforce (Núñez, 1989), domestic workers had traditionally been excluded from labour regulations and social policies (Borrell-Cairol, 2020), so their inclusion would represent a landmark in the Spanish social policy history. However, except for the speaker Graciano Silván's assessment of the numeric relevance of domestic workers among female employment (INP 1925, p. 112), no other argument favouring their inclusion has been found. Entitling home-based workers was also significant. As some Catholic women and doctors argued, although home-based employment represented a high proportion of the Spanish female workforce, they had traditionally been excluded from social insurance and labour legislation (INP, 1925, p. 302–303). The proposal also included agricultural workers, 24% of the female labour force—even more, considering the informality of this sector (Núñez, 1989). Unlike other more industrialised countries, such as Germany, social reforms in Spain were not intended only to appease the urban working class but also the high levels of social unrest in the countryside (Espuelas, 2022).

Unlike ROO—funded by employers and the State—the future health insurance should also be financed by workers. Severino Aznar, a strong man of Spanish social Catholicism, the INP and a Conference promoter, argued that worker support was necessary to pay for the insurance health services, to guarantee the representation of workers in its administration, and to turn its benefits into a social right (INP, 1925, p. 268–269). As for the State involvement, the organisers specified that the municipalities and provincial administrations should fund part of health services out of charity budgets, but central Government expenditure remained ambiguously established “according to the common good” (INP, 1925, p. 126). Spanish governments had been persistently unable or unwilling to increase tax revenues, and, as a result, their support for social policy initiatives had been negligible (Espuelas, 2013). Therefore, conference organisers conceived a scheme funded by compulsory contributions of employers and workers, relying residually on public support.

Socialists agreed with all issues except coverage and funding. As socialist Manuel Vigil argued, as with the ROO, workers could not afford the costs of contributions, so they should be exempted from paying them (INP, 1925, p. 267). Regarding coverage, the scheme should also cover the wives of insured workers. No socialist women spoke at the conference, but as the following sections will show, they probably shared their comrades' concerns. Catholics—including Catholic women—also argued for covering insured workers' wives. However, representatives from Catholic Action for Women advocated for excluding unmarried women from compulsory entitlement. On the other hand, they accepted the need for workers' contributions, as it was compatible with social-Catholic corporatism (Montero, 2004; Van Kersbergen, 1995). Moreover, they also advocated for including a breastfeeding allowance, conceived as a step towards “what in Christian sociology is known as the family wage” (i.e., a sufficient wage for male workers to sustain their needs and those of their families) (INP, 1925, p. 300).

Representatives from insurance companies and doctors explicitly disagreed with Catholic women over excluding non-married women from the compulsory scheme (INP, 1925, p. 310). Since many working women left the labour market when married (Samaniego, 1988), excluding single women

² According to the data provided by the Spanish Statistical Yearbook (1946) for 1927, this amount represented 84% of the textile working women's average daily wage. This suggests that the 75% limitation was conceived for a male's wage.

³ This sum represented 33.6 times a textile working women's average daily wage (see footnote 2).

would significantly undermine the scheme's scope and financial resources. Nevertheless, they showed concern about the scheme's generosity, arguing that a costly leave could "close the factory gates to married women" (INP, 1925, p. 304). Moreover, they argued that future insurance should only provide cash benefits. As in other countries (see Ansell and Lindvall, 2021; Companje *et al.*, 2009), Spanish doctors were hostile to the public regulation of fees and services (Pons and Vilar, 2014; Espuelas, 2022). Finally, although employers' representatives refused to speak at the Conference (see INP, 1925, p. 371), they strongly opposed the Draft once sent to the Government (Pons and Vilar, 2014).

Finally, the document was submitted to the Government without significant changes. However, it was rejected, commanding the Institute to develop an isolated compulsory maternity leave instead. Spain lacked the necessary infrastructure, had a negligible fiscal capacity, and employers and workers refused to fund the scheme (Pons and Vilar, 2014; Espuelas, 2022). Following the ratification of the Washington Convention (1922), in August 1923, the Government introduced a non-contributory maternity allowance of 50 *pesetas* per childbirth for all women insured by the ROO. Nevertheless, its implementation was negligible (Pons, 2010), and although conceived as a provisional policy whilst the INP developed the compulsory system, the collapse of the political regime in September 1923 delayed that development.

4. Contending schemes of compulsory maternity leave: The dictatorship of Primo de Rivera (1923-1931)

After Primo de Rivera's successful coup d'état, the new regime promoted Catholic organisations and Catholic women, employers and medical associations and tolerated socialist activity, but persecuted the anarchist and communist labour movements (Martín, 2008; Pons and Vilar, 2014; Zoffmann and Marinello, 2021). It also changed the orientation of social reforms, as its authoritarian corporatism challenged INP's activities by persistently shrinking financial support, delaying the development of compulsory maternity leave until 1929 (Cuesta, 1988, 2012a, 2012b).⁴ In 1927, the INP sent to several organisations and public figures a draft Bill on maternity leave to collect their opinions on the project's articles. Replies from the 168 respondents were published the same year in a report—the public information on the maternity leave Draft Bill. As responding to the INP was voluntary, the opinions collected were numerically scarce and constituted a sample with many potential biases—for instance, those who replied were more sympathetic to the INP/maternity leave. However, as Cuesta (2012a, 2012b) argues, it did collect a significantly varied and representative source of the Spanish pressure groups. Furthermore, this paper has complemented this report with many other sources to enhance the evidence's representativeness and introduce a diachronic perspective.

As in Cuesta (2012a, 2012b), I focus on the working class (trade unions and individual representatives), employers (companies, chambers of commerce and employers' mutual benefit societies) and doctors (medical associations and

schools, and individual doctors) preferences. On the other hand, this paper also isolates and examines Catholics and women's attitudes. I coded their opinions on benefits, coverage and funding to disentangle the different models endorsed by social groups vis-à-vis the Draft proposed by the INP. See the online appendix for more information about this source.

An aggregated approach shows that, as at the Barcelona Conference, different models were in place, particularly regarding coverage and funding. Table 2 shows the distribution of preferences about cash benefits expressed as a proportion of a textile working woman's daily wage. Since the respondents gave their opinions in total amounts, as a proportion of workers' wages, or in *pesetas* per day, I have harmonised their preferences by taking a textile worker's daily wage as a reference. When respondents gave cash compensation in total amounts, I have divided these sums by the weeks of leave they proposed, assuming a 6-day working week. In the few cases when the respondents proposed cash benefits without specifying the leave extension, I assumed they agreed with the INP proposal of twelve weeks. Finally, these estimates *are not* replacement rates since they merge regular compensation to replace working women's wages with lump sum allowances to support childbirth expenses. However, they help clarify each proposal's relative generosity. Therefore, the INP promoted a twelve-week leave, covered by a flat rate payment representing 90%-100% of the average wage of textile working women. Quite surprisingly, non-Catholic workers were the less ambitious group in the sample, as some of their proponents—such as socialist leader Santiago Ramos—advocated for the lowest benefit—a lump sum of 50 *pesetas*, the same as maternity allowance (INP, 1927, p. 70). Conversely, Catholics—particularly Catholic workers—were the most ambitious group, as they mostly defended that maternity leave should replace 100% or more of working women's previous earnings.

Moreover, the report shows minimum support towards excluding nonmarried women, as even representatives from Catholic Action for Women, which defended such a position in former debates, abstained from making such a claim (*ibid.*, p. 34). On the other hand, the Bill did not include any breastfeeding allowance, but women and Catholics demanded some provision for nursing mothers, whether in kind or cash. Most women's representatives—such as feminist Clara Campoamor or Doctor Elisa Soriano—referred to the right to rest during worktime or to use workplace nurseries (*ibid.*, pp. 66, 68). As at the Barcelona Conference, monetary benefits were popular among Catholics, a common social policy preference among European social Catholics (Van Kersbergen, 1995). Some were ambitious, as the Pamplona Union of Catholic Workers' Associations recommended 2.5 daily *pesetas* for 75 days and 2 daily *pesetas* for the following two months (INP 1927, p. 124).

Figures 1 and 2 disaggregate coverage preferences per family status and sector. Notably, all respondents accepted the inclusion of agricultural workers, except for the Federation of *Libres* Trade Unions of Vitoria, which defended that maternity leave should only cover industry and commerce. However, no agricultural employers or landowners answered the survey. As the next section shows, in many cases, they opposed the INP's plans by ignoring them and avoiding compliance rather than with direct confrontation. Therefore, entitling domestic female workers and the wives of insured male workers became the major cleavage. Unlike at the Barcelona Conference, the INP was reluctant to include domestic workers because "bureau-

⁴ The Ministry of Labour, held by Eduardo Aunós, shut down the IRS because of the employers' pressure, hostile to the regulation of labour relations (Cuesta, 1988).

Table 2.
Explicit preferences of social groups on compulsory maternity leave

Group	Benefits					Coverage			
	Leave (max weeks)		Compensation (% of wage)*		Breastfeeding allowance	Sector	Insured's wives	Single women	Funding
	Average	Mode	Average	Mode					
INP Bill Proposal	12	12	90%	90%	No	Except domestic	No	Yes	Tripartite
Non-Catholic workers	9.41	12	79%	90%	No	Except domestic	Yes	Yes	Employers + State
Catholic workers	10	12	118%	100%	Yes	All wage earners	Yes	Yes	Tripartite
Catholic	10.9	12	103%	100%	Yes	Except domestic	Yes	Yes	Tripartite
Medical sector	10.3	12	101%	90%	No	All wage earners	No	Yes	Tripartite
Women	10.5	12	105%	90%	Yes	All wage earners	No	Yes	Tripartite
Employers	10.9	12	106%	90%	No	Except domestic	No	Yes	Tripartite

* This proportion refers to the average wage of female textile workers as provided by the Spanish Statistical Yearbooks.

Source: own elaboration based on INP (1927).

cratic inspection at the household level always has frightened states away” (INP, 1929, p. 24). Consequently, they feared that “efforts of including domestic workers [...] could cause resistances against the maternity leave that complicate its performance” (*ibid.*).

Like in 1922, Catholics (mainly Catholic unions) advocated including the spouses of insured male workers. The report suggests that they were also generally favourable to including domestic workers. This is consistent with catholic unions’ ef-

forts to enrol a growing portion of the working class, particularly among home-based, domestic, and retail workers (Blasco, 2003; Zoffmann and Marinello, 2021). Non-catholic workers generally advocated for a scheme covering wives of the insured workers, but without including the domestic sector. Meeting all the family’s childbirth expenses was essential for a working class with little saving capacity. On the other hand, the lack of support for including the domestic sector is consistent with the weak unionisation of these workers and their marginali-

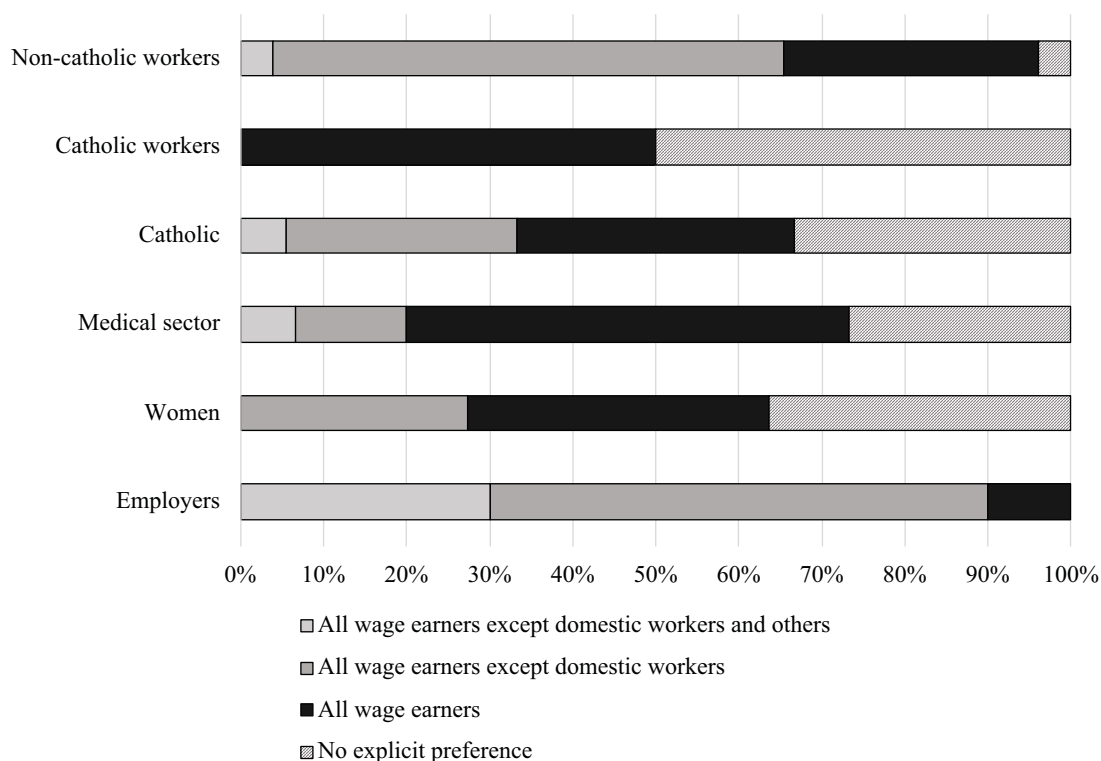


Figure 1. Distribution of explicit preferences regarding coverage rate by sectors.

Source: Own elaboration based on INP (1927).

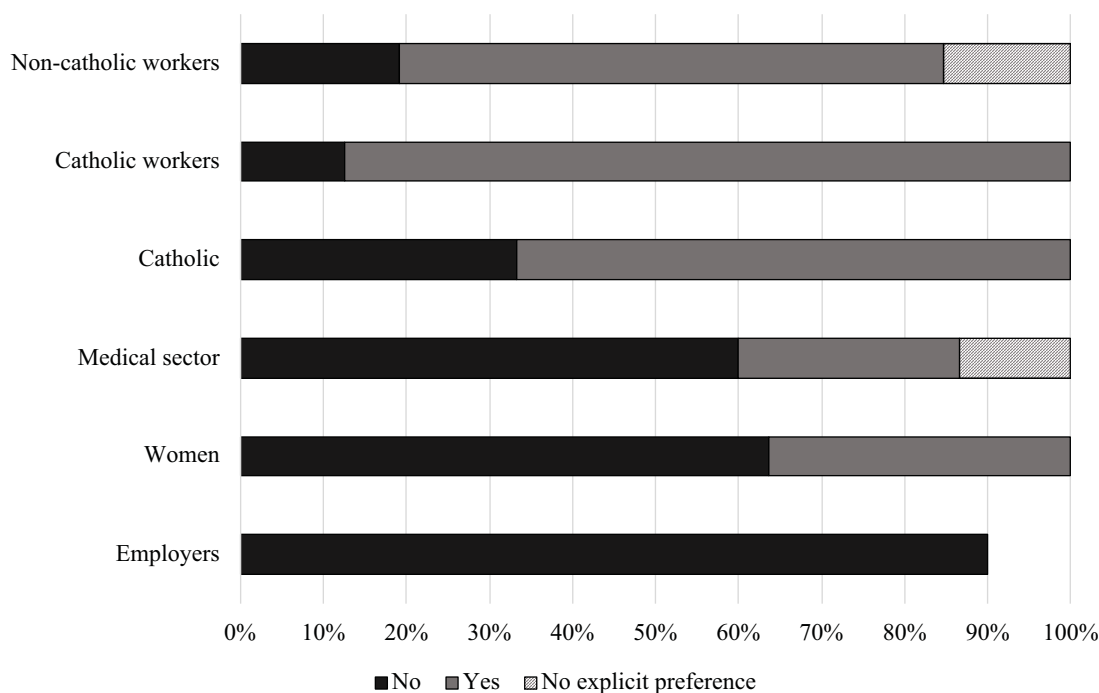


Figure 2. Distribution of explicit preferences regarding coverage (entitling wives of the insured workers to medical services)

Source: Own elaboration based on INP (1927).

sation as “non-workers” in Spain and other countries (Borrell-Cairol, 2020; Todd, 2009). Among socialists, however, it is worth noting that the three provincial UGT branches and Lucio Martínez did support their inclusion, illustrating an interest that would increase in the future.

The medical sector and women generally advocated for a professional-based maternity leave covering all sectors but not the wives of the insured male workers. On the other hand, the survey suggests a cleavage between middle-class and working women. Women’s unions overwhelmingly argued for entitling insured wives but did not support covering domestic workers. By contrast, most middle-class women rejected including male workers’ wives in the scheme and were divided about insuring domestic working women. Such a division emerged even across ideological lines, as liberal Clara Campoamor and Catholic Juana Salas proposed entitling them (INP, 1927, pp. 29, 41), while republican Victoria Kent and Catholic Rosa Urraca opposed that (*ibid.*, pp. 21, 34). Employers generally favoured excluding the wives of the insured and the domestic sector. Some of them, like the Federation of Manufacturers of Spinning and Textile Industries of Catalonia, also advocated excluding home-based workers. Although difficult to estimate, this type of work, highly feminised and informal, was particularly spread in the textile sector (Núñez, 1989).

As Figure 3 shows, funding divided non-Catholic workers, who strongly opposed their contribution, and all other respondents—even Catholic workers—who overwhelmingly supported a tripartite scheme. Moreover, evidence from non-Catholic workers suggests a sharp division within socialist unions. First, although socialist leaders Lucio Martínez and Santiago Ramos rejected female workers’ contributions (INP, 1927, pp. 145, 163), regional UGT federations from Cáceres and Biscay accepted them (*ibid.*, pp. 152, 160). Second, although some divisions arose between high-skilled and low-skilled

workers, finding a linear division explaining the degree of support for the tripartite contribution is still challenging⁵. Third, religious divisions also influenced women’s unions, as even Catholic women’s unions advocated for the tripartite scheme. Only the Catholic Union of Working Women of Santiago refused the workers’ share, probably because they came from a region with many labour-intensive firms and highly temporary employment rates (Samaniego, 1988). On the other hand, the socialist union, Female Awakening, refused tripartite contributions by arguing that female wages were insufficient to afford their shares (INP, 1927, pp. 167).

Opinions of employers’ representatives also present interesting patterns. All individual companies accepted a tripartite contribution—almost all from the industrial region of Guipúzcoa. Moreover, 12 out of 21 already provided maternity allowances to their workers. This suggests that the companies whose opinions were collected by the INP’s report were the most sympathetic to compulsory maternity leave. The Chambers of Commerce also supported tripartite contributions. This is consistent with research that shows that the dictatorship was able to subordinate them to Government purposes (Del Rey, 2007). Employers’ mutual associations also agreed with the INP Draft. Amongst employer’s associations, the Employer’s Federation of Guipúzcoa accepted the tripartite contribution and even argued for reducing the workers’ share (INP, 1927, p. 162). This region had many large-scale, capital-inten-

⁵ For example, some unions from agricultural and textile workers and waiters, refused to pay contributions (INP, 1927, pp. 156, 159, 165) while office and printing workers accepted it (*ibid.*, pp. 19, 163). However, one can find also some chemical workers opposing workers’ contribution (*ibid.*, p. 156) and agricultural workers accepting the tripartite scheme (*ibid.*, p. 21). Unfortunately, the collected answers are not large, representative, and detailed enough to find more systematic patterns.

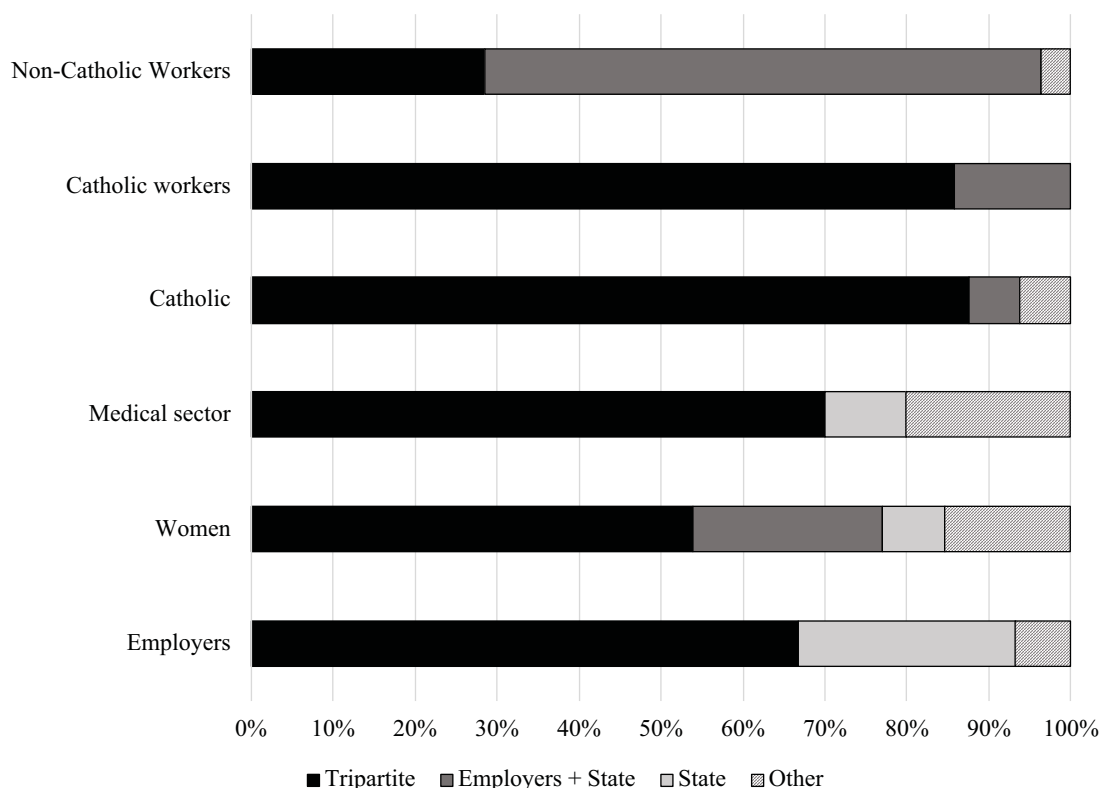


Figure 3. Distribution of explicit preferences regarding funding.

Note: Category “other” may refer to just the State, workers and the State, or just employers and workers.

Source: Own elaboration based on INP (1927).

sive firms, a feature associated with a more positive attitude from employers regarding social insurance (Mares, 2004). Moreover, female labour force participation was weaker in this region, making maternity leave a relatively cheap social policy. Finally, social Catholicism was particularly strong, and the most influential right-wing political party, the Nationalist Basque Party, maintained close ties with the Catholic labour movement (Ansel, 2011).

By contrast, the Employer Commercial Defence and the Federation of Manufacturers of Spinning and Textile Industries of Catalonia advocated for an entirely State-funded scheme. The former rejected even the compulsory scheme “because it imposes a new burden on production in crisis and overburdened with taxes” (1927, p. 19), an over-taxation that would eventually reduce women’s employment (INP, 1927, p. 162). The Federation proposed a scheme funded by “a percentage of the inheritance tax allocated to the workers’ retirement fund, a portion of the fines levied by the Labour Inspectors, and a share of the amount allocated by the Town Councils and County Councils to the Charity Service in their budgets” (*ibid.*, p. 147). Therefore, raising taxes or introducing new ones was not part of their proposal. As a lobby from a sector dominated by labour-intensive firms, they had incentives to avoid increasing labour costs (Espuelas, 2022). Furthermore, some companies already provided this service to their workers and feared that they would transfer the cost of their contributions to the employers via wage increases (AIPS, 1929, p. 34).

In the end, the INP managers overcame resistance from employers and workers. In a session of the National Consultative Commission for Employers and Workers held in March

1927, employers’ representatives conceded that “compulsory insurance must be supported by the co-participation of the employers and workers” (CANPO, 1927, p. 42). Workers’ representatives also accepted their share in the scheme, conceding that it “will be more than compensated by the extent of the insurance” (*ibid.*, p. 43–44). However, they also warned of the extreme difficulty of their decision since there were “various elements in the working class whose mission is to ensure that the cost of this, like other social insurances, should be paid entirely by the employer’s class or by the State” (*ibid.*, 1927, p. 43). These oppositions would still prove challenging in the future.

5. Maternity leave implementation between democracy and dictatorship: the Spanish Second Republic and early Francoism (1931-1944)

In the end, INP’s Bill was passed in March 1929. It established a compulsory leave of six weeks after and up to six weeks before childbirth by providing a flat-rate benefit of 90 to 180 *pesetas* and health services to all female workers who earned less than 4,000 yearly *pesetas*, except the domestic ones. Unlike most European flat rate benefits, which provided a fixed sum, the Spanish compensation depended on the number of quarterly premiums paid—15 *pesetas* per trimester funded by workers and employers at 50%, being the minimum six and the maximum twelve premiums. In addition, the State provided a bonus of 50 *pesetas* per childbirth and, during the first triennium, the difference needed to complete the mini-

mum premiums for all pregnant workers. The previous debates inspired some modifications in the final Law, introducing a breastfeeding allowance of 5 *pesetas* per week and child for a maximum of 10 weeks.

Nonetheless, the dictatorship fell before implementing the scheme. Such a task was carried out in October 1931 by the newly established Second Republic. Therefore, compulsory maternity leave became part of a reformist program designed by a Republican–Socialist coalition and executed by the socialist Francisco Largo Caballero as a Labour Minister in the context of rapid trade union growth and the upsurge of mass politics (Cuesta, 2021). Moreover, achieving women's suffrage compelled political organisations across the political spectrum to channel female political mobilisation (Aguado, 2014; Blasco, 2003). Therefore, maternity leave became a crucial policy, developing steadily throughout the Republican period, thus becoming central among Spanish social policies (Samaniego, 1988). As Figure 4 shows, by 1935, it accounted for 35% of public social insurance spending, only outperformed by the ROO. By the end of 1933, it covered 591,243 female workers. Considering data provided by Nuñez (1989, pp. 164, 176), this represented 78% of potential recipients –working women outside domestic service– and 54% of the women's labour force.

The scheme's rapid expansion owed much to the strong support of socialists, who perceived social and labour policies as the cornerstone of their growing influence among the Spanish working class (Casanova, 2010). Moreover, the failure of the Republican–Socialist Government to implement ambitious tax reforms left contributory schemes as the only way to implement social policies (Espuelas, 2022). Consequently, after intense debates, the UGT General Congress held in 1932 officialised their support towards tripartite contributions to develop

a comprehensive health insurance system (UGT, 1933, pp. 288–90). Socialists Manuel Vigil and José Torre justified this position by considering the high cost of social insurance, that contributions from workers distinguished poor relief from social entitlements, and because it was the most common scheme in neighbouring countries (Vigil and Torre 1932, pp. 12–13). Moreover, in March 1931, an assembly of domestic workers chaired by UGT member Claudina García demanded their entitlement to social policies and labour regulations (*El Socialista*, 03/03/1931, p. 3). Socialist demands were based on domestic workers' numerical importance among the female labour force (*El Socialista*, 08/03/1931, p. 5).

Like in 1927, some feminists supported covering domestic workers, as Clara Campoamor urged the Labour Commission in the Spanish Parliament to amend the scheme to entitle them (Labour Commission, 1/9/1931, p. 14). This claim was finally accepted by the INP and included in the health insurance Bill (*Gaceta*, 28/05/1936, pp. 1787–1792). In a document approved by its Corporate Commission, they argued that the domestic service was becoming increasingly similar to the general labour force, so it should no longer be excluded from the labour legislation (CANPO, 1931, pp. 72–74).

However, the new scheme also faced opposition and resistance from different sides. First, as socialist Enrique Santiago (1935, p. 720) complained, a persistent cleavage among workers impeded a faster implementation of the scheme. From the beginning, many working women mobilised against its contributory character, advocating for a scheme funded only by employers and the State (Vega, 2007). Protests were particularly significant where the anarchist labour movement was stronger (INP, 1932, p. 9), as the National Confederation of Labour (CNT, for Confederación Nacional del Trabajo) competed with the UGT to increase their influence over the working

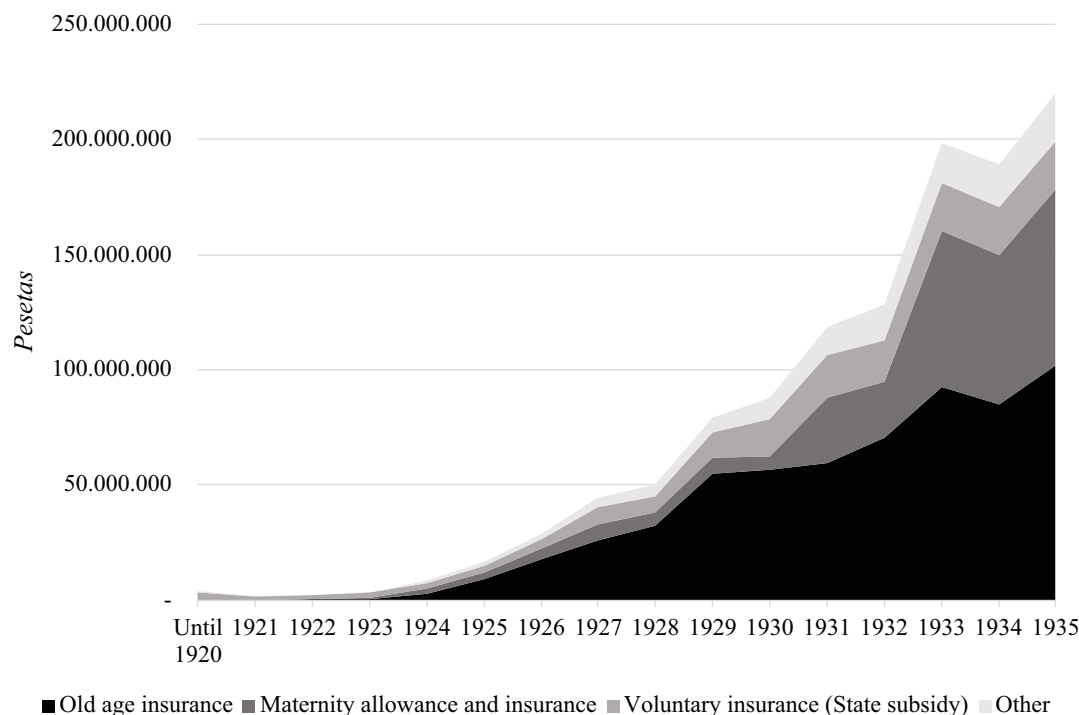


Figure 4. Social spending of Spanish social insurance schemes in 1958 *pesetas*, 1920–1933.

Source: Own elaboration based on INP (1936, p. 166). Spending data has been deflated using Prados de la Escosura (2003, p. 365).

class and was opposed to State social reforms and the republican regime (Casanova, 2010).

In regions such as Galicia, Pamplona, Zaragoza and Alcoy, striking married women argued that, as they withdrew from waged work after having children, they would never benefit from the insurance they paid for (Samaniego, 1988). Moreover, in regions like Catalonia, many working women already received maternity benefits funded by employers (Vega, 2007). Therefore, after engaging in collective bargaining, the CNT achieved some modifications at the local level. In Mataró—an important textile city in the Province of Barcelona—employers agreed to pay their employees' contributions and complement the maternity leave until 180 *pesetas* (INP, 1932, p. 149). Together with the substantial increase in real wages during the republican period (Martín, 2008), this suggests that unlike in other countries (Gruber, 1994), employers were not able to transfer the scheme's cost to their employee's wages.

Communists and leftist republicans also continued to oppose workers' contributions. In their Manifesto for the 1933 general election, the Spanish Communist Party advocated establishing a social insurance scheme funded by employers and the State (reproduced in Artola, 1977, p. 477). Suspicion towards social insurance funded by workers was shared by other Communist parties like the French one (Dutton, 2002, p. 78) and was probably influenced by the Soviet health model, funded by the companies and the State (Kaufmann, 2013), and their hostility to the Republican regime and the socialists (Artola, 1977). Similarly, the Republican Left of Catalonia—the leading party in the Catalan Parliament—also advocated in 1933 for a universal and regional-based social insurance scheme funded by a “tax on employee's wages, from 8% to 10%, paid by the employers” (Macià, 1933, p. 5).⁶ Throughout the republican period, Catalan leftist republicans appealing to working-class voters had to address some of the demands of the CNT, as it was the region's larger trade union (Artola, 1977).

Implementing maternity leave also faced the evasion of many Spanish employers. A report on social insurance performance showed that the inspection's judicial action collected 1,490 million *pesetas* from 16,004 defaulting employers (INP, 1936a, p. 73). Moreover, a report of the Insurance Inspection for the year 1935 argued that the inspection was challenging “in agricultural labour and related sectors, because of their extraordinary eventuality; in the fishing and canning industries; in piecework, [...] and especially in home-based work” (*ibid.*, p. 44). According to Inspector José de Posse (1935, p. 9), the number of defaulting employers was higher among small-scale businesses. Although I have not found systematic evidence of defaulting employers on maternity leave, these figures are consistent with the difficulties denounced by the INP (1932, p. 11) in consolidating the scheme, particularly in agriculture, home-based, piecework and temporary workers. In fact, by 1933, temporary workers accounted for 34% of insured workers and agricultural workers for 24% (Núñez, 1989, p. 176). These accounts suggest that employers' opposition was persistent in Spain, particularly among agricultural employers and labour-intensive, small-scale companies.

The last crucial constraint to developing the scheme was the opposition from doctors. As an INP (1933, p. 9) report com-

plained during the negotiation of maternity leave's health services, the medical associations rejected any public interference in regulating fees, services, and staff management and showed little commitment to the Institute's Insurance Inspection. This suggests that the medical class welcomed maternity cash benefits as a public subsidy for their self-regulated activities. They also advocated excluding midwives from facultative examination, as they considered them insufficiently qualified (*ibid.*, p. 5). As Ansell and Lindvall (2021) argue, the professionalisation of maternity services led doctors to displace midwives in most European countries except the Scandinavian ones, where midwifery had already become a public service in the early nineteenth century. Therefore, the defiance of medical associations delayed the development of clinics and other vital health services (INP, 1936b, p. 34). Consequently, the scheme spent primarily on cash benefits, whereas direct childbirth assistance and health care services could not catch up (see Figure 5).

Social insurance disputes intensified during the Spanish Civil War. The conflict paralysed the development of the republican social insurance projects and renewed the opposition from employees in collectivised companies to pay insurance contributions by arguing that “since the employer has disappeared, they have nothing to pay” (Santiago, 1936, p. 753). In Catalonia, such opposition forced the regional Government—which from September included republicans, anarchists, and communists—to release women workers from paying their contribution, which would be fully collected from employers and the State (Vega, 2007). After Franco's victory in 1939, Spanish debates over social insurance would be undertaken, again, under an authoritarian regime.

6. Conclusion

From the late nineteenth century, particularly during the last years of the Restoration regime, persistent high infant mortality rates, rising social unrest and international commitments compelled the Spanish social reformers to develop maternity leave as a part of a top-down reformist agenda (Blasco 2016; Cuesta, 1988; 2012a; 2012b; Espuelas, 2013). Under the umbrella of the IRS and the INP, they developed a comprehensive health, maternity and invalidity scheme following a German-style contributory model rather than launching a Scandinavian or French, tax-funded maternity benefits system. Their ideological background as social Catholics and progressive liberals, German influence, and Spanish historically low fiscal capacity made such a model a compelling alternative to increasing working-class women's and their children's living standards and fostering demographic growth (Martínez, 1988; Pons and Vilar, 2014).

Nevertheless, implementing this policy required a compromise amongst different social groups and ideological leanings, and the failure to reach it scaled down the maternity leave scheme in 1923. This paper shows that, although most social groups agreed with a social insurance contributory scheme, significant differences on its model complicated its development. Moreover, it finds significant intra-group cleavages resulting from ideology, economic sector and class differences. The research suggests a religious cleavage between Catholic, socialist, and anarchist/communist workers. First, Spanish socialists appear halfway between Swedish social democrats, who actively defended tax-funded benefits administered by their organi-

⁶ The Second Republic recognised Catalonia as an autonomous region, with their own Parliament and a regional Government.

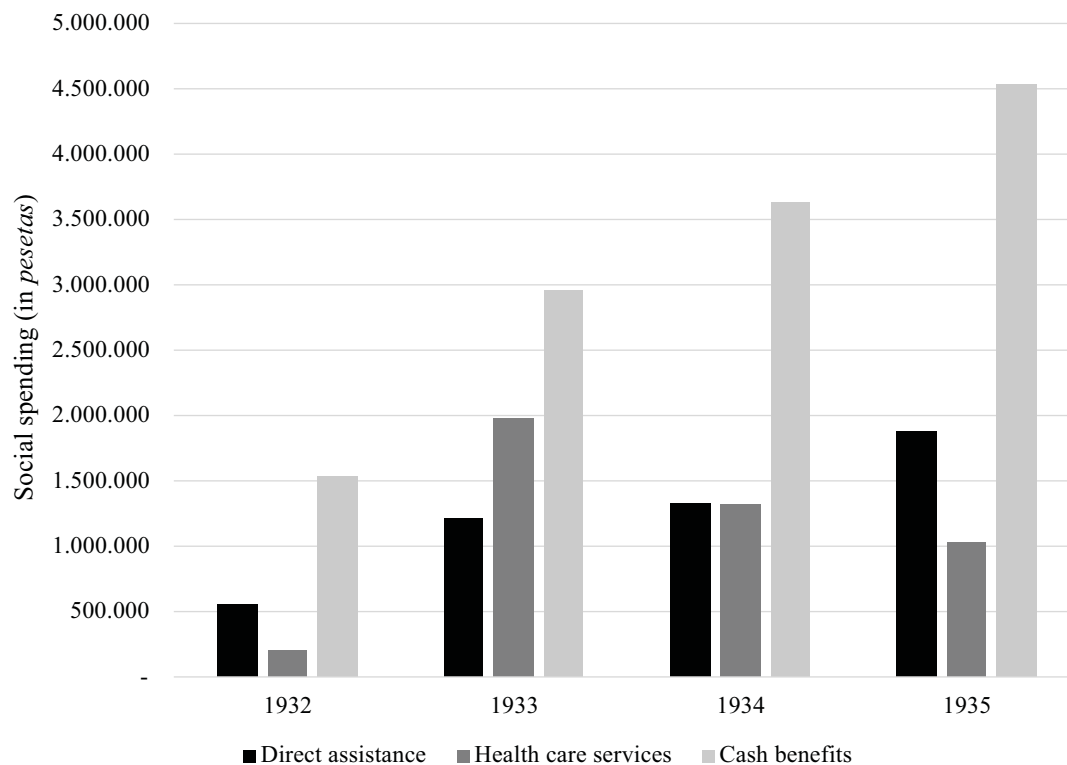


Figure 5. Composition of compulsory maternity leave spending in current pesetas, 1932-1935.

Source: Own elaboration based on INP (1936b, p. 164).

sations, and the German ones, who accepted—and later further developed—contributory tripartite schemes (Esping-Andersen, 1985; Ohlander, 1996; Stoehr, 1996). Until 1932, they advocated for implementing compulsory, contributory maternity leave entirely funded by employers and the State, even if that meant sacrificing much of its coverage and benefits. Relatively low wage levels of the Spanish working class, the underdevelopment of friendly societies and a long-lasting reluctance towards state reformism may explain such a particular position (Martínez, 1988; Pons and Vilar, 2012). However, their support to the Republican regime, their commitment with reformism, and Spanish limited fiscal capacity made socialists more supportive of workers' contributions after 1932.

By contrast, the Spanish Catholic labour movement always supported the contributory tripartite scheme to develop an ambitious, quasi-universal maternity leave. As in other countries, social Catholicism advocated appeasing class conflict while reinforcing family as an institution (Montero, 2004; Van Kersbergen, 1995). On the other hand, the anarchist and communist labour movements remained hostile to the contributory scheme even during the Republic, as they competed against socialists and opposed such a regime as a bourgeois democracy (Artola, 1977; Casanova, 2000). Instead, they lobbied to remove women workers from paying their share, succeeding (regionally) after the outbreak of the Spanish Civil War.

Overall, these findings suggest that working-class policy preferences may happen across ideological lines besides economic ones, complementing both power resource theories, class-centered analyses (Esping-Andersen, 1985; Hicks, 1999) and cross-class coalition perspectives (Baldwin, 1990; Mares, 2003). Moreover, it contributes to further exploring the mechanisms underlying the positive impact of democracy on social

spending (see Espuelas, 2017; Lindert, 2004). In Spain, democracy not only increased socialist bargaining influence over policymaking but also made them more supportive towards commitment. By contrast, although Primo de Rivera—and Franco's—dictatorships increased the political and cultural influence of social Catholicism, the regime's ties with the political factions hostile to social reforms hindered policy development, even if it was consistent with prevailing ideology.

The research also suggests that a cleavage existed among employers and manifested sectorally and regionally. Therefore, as in Catalan and Madrid's case, employers' associations dominated by medium-sized and labour-intensive firms tried to avoid further increases in production costs, sharing this concern with agricultural employers (Espuelas, 2022). Furthermore, female labour force participation was particularly significant in those sectors and regions, and Spanish employers feared workers could transfer their insurance costs via wage increases. On the other hand, their long-standing opposition to increasing tax burdens and fiscal fraud (Comín, 1996) made the Scandinavian alternative impossible (Espuelas, 2022). Moreover, Spain lacked the constraints—i.e., trade openness—to develop contributory systems, as in their Scandinavian counterparts (see Baldwin, 1990). By contrast, the INP's survey suggests that employers from some regions did accept tripartite contributions, as in the case of the Basque country, probably related to the regional importance of capital-intensive firms, low female labour force participation, and the influence of social Catholicism (Ansel, 2011; Mares, 2004).

This research suggests that women's preferences differentiated both across ideological—Catholic, socialist, anarchist, republican women—and class—workers, middle and high-class—lines. Therefore, most middle-class women sided with the INP,

while women's unions shared the opinions of male trade unions. Unlike their Anglo-Saxon counterparts, Spanish feminism lacked massive, transversal organisations (Blasco, 2003). Moreover, unlike their French counterparts, demographic concerns have not fuelled a hegemonic pronatalist front. Therefore, although this paper's conclusions are more optimistic than Cuesta's (2012a; 2012b) regarding the influence of women – particularly Catholic and middle-class women – on maternity leave development, the evidence suggests that such a division prevented them from advancing a common maternity leave scheme. Finally, doctors advocated for a generous maternity leave covering all working women, but during the Republican period, the resistance to regulated fees and services delayed the scheme's implementation, especially its health services. Although they welcomed cash benefits as a subsidy for their activities, their opposition to such regulation and their ambitions to displace midwives from facultative services hampered the scheme's implementation. Combining the analysis of the conflicts between doctors and midwives and between the State and medical associations can have powerful implications for the international historical literature on health service (see Ansell and Lindvall, 2021; Companje *et al.*, 2009). Unfortunately, such a task is out of the scope of this paper.

Finally, this paper has some limitations that call for group-specific research to confirm or refute the patterns found. First, more research is needed to systematically explore the connection between trade union composition and social

policy preferences vis-à-vis ideology to clarify working-class attitudes towards social reforms. Second, further investigation is warranted to confirm the regional and sectorial patterns between employers' preferences suggested here. Third, a systematic exploration of women groups' attitudes towards the social policy model is required to explore the evolution of such differences in a crucial period for feminist vindications.

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Appendix

Table A1.

Alternative maternity leave schemes discussed in Spain, 1900–1936

Initiative	Year	Benefits				Coverage		
		Leave extension (max weeks)	Cash benefit	Health services	Breastfeeding allowance	Sector	Wives of insured	Funding
Unpaid maternity leave (<i>Ley Dato</i>)	1900	3	No	No	No	Industry and Commerce	No	No
Reform of the <i>Ley Dato</i>	1907	10	No	No	No	Industry and Commerce	No	No
Barcelona Conference health insurance proposal	1922	12	2.5 daily <i>pesetas</i> + 100 <i>pesetas</i> (lump sum)	Yes	50 <i>pesetas</i> (lump sum) per 8 months	All wage earners	No	Tripartite
Maternity allowance Decree	1923	10	50 <i>pesetas</i> (lump sum)	No	No	ROO insurees	No	State
Compulsory maternity leave Draft Bill	1927	12	150 <i>pesetas</i> (by instalments)	Yes	No	Except domestic workers	No	Tripartite
Compulsory maternity leave implementation Law	1931	12	90–180 <i>pesetas</i> (daily instalments)	Yes	5 weekly <i>pesetas</i> per 10 weeks	Except domestic workers	No	Tripartite
Health Insurance proposal	1936	12	50% wage + 50 <i>pesetas</i> (lump sum)	Yes	5 weekly <i>pesetas</i> per 10 weeks	All wage earners	Yes	Tripartite

Source: Own elaboration based on *Gaceta* (15/11/1900; 10/01/1907; 23/08/1923, 01/02/1930, 25/05/1931 and 25/05/1936) and INP (1925, 1927).

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