

## PHS Social Partner statement on the European Care Strategy

### Preamble

The COVID-19 pandemic underlined the structural weakness of EU Member States' care systems as well as the essential status of care workers. Despite policymakers' efforts to address these weaknesses and recognise care work, many challenges persist. Most distinctively, women remain overrepresented in both paid and unpaid care work. While there has been a notable cultural shift on care since the COVID-19 pandemic, the care workforce remains undervalued, underpaid, and faces difficulties sustaining their families from their wages. **These issues are particularly heightened for workers delivering direct and indirect care services in persons' homes.**

For that reason, the Social Partners in the Personal and Household Services (PHS sectors) – EFFAT, EFFE, EFSI and UNI Europa –re-affirm their engagement towards the EU Care Strategy. As stated in the PHS Social Partner Work Programme 2022-2023, the European Care Strategy remains a top priority. As Social Partners committed to create high-road employment for all categories of the care workforce, we jointly strive for strong social dialogue and collective bargaining structures irrespective of workplace setting, as well as person-centered quality, accessible and affordable services. We will work constructively with Member States, the European Commission, European Parliament, and other stakeholders to ensure that this Strategy is implemented in the best interest of all care users and workers.

### Addressing the EU Care Strategy

It is quintessential for the European Union to address both the differences and overlaps between direct care and indirect care services. While the European Parliament's INI Report paved the way towards recognition of PHS workers in Europe, **the European Commission needs to follow suit and recognise the PHS Sectors** to ensure their objectives of availability and affordability of childcare services, long-term care services or services for persons with disabilities, as well as decent working conditions for all care workers. As part of this, the Commission should feature domestic workers in the scope of the Framework Directive on Health and Safety and its individual directives. The Commission should also issue guidelines so that Member States and social partners are able to address the specific challenges of working time arrangements in the PHS sector to protect workers in line with the spirit of the Working Time Directive (2003/88/EC)

**The strategy needs to recognise the different professional and skills' profiles of the care workforce in its entirety.** This should reflect the type of care that requires professional qualifications, as much as it should acknowledge the reality that in many home care arrangements, people are providing a combination of direct and indirect care and services. Moreover, the Strategy's current analytical separation between domestic long-term care workers from other long-term care workers bears the danger of creating a two-class care workforce, where those that are providing care in persons' homes end up being undervalued and underrecognised compared to their counterparts working in residential care facilities. Concomitantly, a real recognition of home care work can only take place if governments and policymakers do not instrumentalise PHS services to solely save costs and much-needed investment. Thus, PHS need to be considered on an equal footing compared with other existing provision models when it comes to working conditions, quality requirements, and investment.

Hence, the Social Partners call on the European Commission to follow the ILO's suit and acknowledge that "*care provision includes not only personal care but also non-relational, indirect care work*". In this sense, both direct personal domestic care work as well as many

other forms of domestic work play a pivotal role in “[providing] *the necessary preconditions for personal caregiving*”<sup>1</sup>. With that in mind, we would propose a revision of the definitions of “domestic long-term care workers” and “live-in carers” stated in paragraph 3 of the Council Recommendation on LTC.

**What is more, we welcome the European Commission’s commitment to call on Member States to ratify and implement ILO Convention 189.** This should be complemented with a Council Recommendation on ratification and implementation of ILO Convention 189. As our activities with the [ILO C189 Alliance](#) last year underlined, many EU Member States still have a long way to go to ensure domestic workers’ rights. Such a Council Recommendation could provide new impetus for Member States to ratify the Convention, and for those who did, to implement it and monitor its progress closely.

We also greet the European Commission’s commitment to “*address the specific challenges of vulnerable groups of workers, such as domestic long-term care workers, live-in carers and migrant care workers*”. This ought to be among the top priorities of the European Union, as the care systems’ dependence on migrant workers is one of the key features of long-term care provision. In the previous statement with our coalition partners<sup>2</sup>, we pointed out that the essential role and contributions of both intra-EU mobile workers and non-EU migrant workers, including undocumented workers, in providing direct and indirect care to millions of households across the European Union. For that reason, **we would urge the European Commission to develop a plan for the regularisation of undocumented migrants** so that they can fully participate in the labour market, amongst other measures. We also want to ensure that any labour migration facilitated by the European Union promotes secure, decent work and social inclusion of migrant care workers, and promote improved access to work permits and labour, social and family rights for migrant care workers under national general work permit schemes. Moreover, we also note that the Commission will launch a study mapping the current admission conditions and rights of long-term care workers from non-EU countries in the Member States at the end of 2022. We will be happy to contribute to its development by providing our expertise. As Social Partners, we fully agree that “[e]ffective social dialogue and collective bargaining, including at EU level, can help address workforce challenges in the care sector”. This especially applies to the PHS sectors with its various working arrangements (including live-in care) and its specificity of the home being the workplace. At present, PHS stakeholders are insufficiently organised and recognised. This hinders the development of a collaborative approach towards the aim of raising qualifications, training requirements, wages as well as health and safety at work.

The cost-of-living crisis and high levels of inflation across the European Union are one of the major challenges for both care receivers and care givers. For care receivers, their out-of-pocket payments are increasing. For care givers, it remains difficult for them to sustain a family from working in the long-term care sector, and PHS sectors. We urge Member States to promote capacity building of national social partners in the PHS sector with the aim of strengthening sectoral collective bargaining and improve working conditions in the sector, also in the spirit of the upcoming EU minimum wage directive. To achieve this, we propose that Member States have a designated contact point for expanding unionisation in the care sector at national level. For the PHS sectors, the European Commission should provide specially earmarked funds to fostering the structure of PHS stakeholders towards the establishment of social dialogue at

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<sup>1</sup> International Labour Office (2018), Care work and care jobs for the future of decent work. International Labour Organisation (ILO), Geneva, p.168.

<sup>2</sup> For more information and a full analysis, please consult the previous published statement <https://www.uni-europa.org/news/european-care-strategy-migrants/>

national level. These measures in combination with sectoral collective bargaining would allow for a real recognition of care work and attract the staff needed to turn the tide on the care crisis.

EFFAT, EFFE, EFSI and UNI Europa underline that there is a need to design a policy package to **tackle undeclared work in the PHS sector**. While having recourse to PHS, users meet a need for support in their everyday life (be they dependent or not). Their choice to recourse to undeclared provision is driven first and foremost by the affordability of formal PHS. Countries who have developed effective PHS supporting policies – including measures to make PHS more affordable to the vast majority of the population – have witnessed a sharp decrease in undeclared work in the sector. Whereas the sector is expected to expand in the coming years due to higher demand for such services (due to population ageing and an increased participation of women to the labour market), PHS Social Partners consider that in the current state, this expansion will lead to development of undeclared work rather than formal work. Therefore, to successfully counter this trend, EFFAT, EFFE, EFSI and UNI Europa agreed on a set of recommendations.

### **The PHS Social Partners Recommend that:**

- The European Commission **recognises the PHS sectors** to ensure their objectives of availability and affordability of childcare services, long-term care services or services for persons with disabilities, as well as decent working conditions for all care workers.
- The European Commission recognises **the different professional and skills' profiles of the care workforce** in its entirety. This, also to avoid the risk that the current analytical separation between domestic long-term care workers from other long-term care workers create a two-class care workforce.
- The European Commission adopts the ILO's definition following which "*care provision includes not only personal care but also non-relational, indirect care work*": we would thus propose **a revision of the definitions of "domestic long-term workers" and "live-in carers"** stated in paragraph 3 of the Council Recommendation on LTC.
- The European Commission issues **a Council Recommendation on ratification and implementation of ILO Convention 189**.
- The European Commission develops **a plan for the regularisation of undocumented migrants** so that they can fully participate in the labour market.
- The European Commission provides specially earmarked funds to fostering the structure of PHS stakeholders towards the establishment of social dialogue at national level. **Member States promote capacity building of national Social Partners in the PHS sectors with the aim of strengthening sectoral collective bargaining and improve working conditions** in the sector, also in the spirit of the EU Directive on Adequate Minimum Wages and Collective Bargaining.
- The Member States have a designated contact point for expanding unionisation in the care sector at national level.

- The European Commission **designs a policy package to tackle undeclared work in the PHS sector.**

## Glossary – PHS Social partners statement – September 2022

**Personal and household services (PHS):** “PHS covers a broad range of activities that contribute the wellbeing at home of families and individuals: childcare (CC), long term care (LTC) for the elderly and for persons with disabilities, cleaning, remedial classes, home repairs, gardening, ICT support, etc”<sup>3</sup>. Therefore, PHS include a mix of direct and indirect care as well as household-related services. Their distinctive feature is that another person’s household becomes a workplace.

**Domestic workers:** “are those workers who perform work in or for a private household or households. They provide direct and indirect care services, and as such are key members of the care economy. Their work may include tasks such [as taking care of children, or elderly or sick members of a family], cleaning the house, cooking, washing, and ironing clothes, [...] gardening, guarding the house, driving for the family, and even taking care of household pets. A domestic worker may work on full-time or part-time basis; may be employed by a single household or through or by a service provider; may be residing in the household of the employer (live-in worker) or may be living in his or her own residence (live-out). A domestic worker may be working in a country of which she/he is not a national, thus referred to as a migrant domestic worker”<sup>4</sup>.

**Home care worker:** a domestic worker (as per the ILO definition) which exclusively provides services towards dependent people.

**Care work:** consists of two kinds of activities: direct, personal, and relational care activities, such as feeding a baby or nursing an ill partner; and indirect care activities, such as cooking and cleaning. These activities are not mutually exclusive and are usually overlapping on the ground. The boundaries between direct and indirect care work are blurry as a person might wash a dependent person and then bring out their garbage or mop their floor after a shower.

**Direct care work:** care support directly provided to the person in need of care.

**Indirect care work:** support provided to the environment of the person in need of care (such as cleaning and cooking) which provide the necessary preconditions for personal caregiving.

**Undeclared work:** any paid activities that are lawful as regards their nature but not declared to public authorities, taking account of differences in the regulatory systems of the Member States. Member States have adopted a variety of different definitions focusing upon non-compliance with either labour, tax and/or social security legislation or regulations. If there are additional forms of non-compliance, it is not undeclared work. If the goods and services provided are unlawful (e.g., the production or trafficking of drugs, firearms, persons or money laundering forbidden by law), it is part of the wider criminal economy i.e., the shadow economy (often defined as including both the undeclared economy and the criminal economy), and if there is no monetary payment, it is part of the unpaid sphere<sup>5</sup>.

<sup>3</sup> European Commission, SWD (2012) 95 final

<sup>4</sup> International Labour Organisation website, <https://www.ilo.org/global/topics/domestic-workers/who/lang--en/index.htm> (last accessed 20 September 2022)

<sup>5</sup> European Commission (2018): Glossary of Terms. European Platform tackling undeclared work. URL: <https://ec.europa.eu/social/BlobServlet?docId=20304&langId=en> (last accessed 16 September 2022).

**Undocumented worker:** any third-country national whose residence and work is not currently recognised and authorised in the country they live in, even if they have been living and working in the country for many years, due to restrictive migration and residence policies. Many undocumented workers have had a residence permission, for example, a work permit that has expired because they lost their job or their employer didn't renew it.

**Informal care:** any unpaid direct or indirect care provided to someone with a chronic illness, disability or other long-lasting health or care need outside of an employment relationship.

**Unpaid care work:** refers to all unpaid services provided within a household for its members, including direct or indirect care of persons. Theoretically, these activities can be considered work, because one could pay a third person to perform them (OECD). The individual (mostly women) performing this activity is not in an employment relationship, nor self-employed and thus not remunerated for these activities. The activity provides what is necessary for the health, well-being, maintenance, and protection of someone or something. And the activity involves mental or physical effort and is costly in terms of time resources. Within Europe, unpaid care work continues to play an important role in meeting people's care needs, especially within the nuclear family, as well as within larger family structures, neighbourhoods and even communities-at-large.

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**EFFAT** is the **European Federation of Food, Agriculture and Tourism Trade Unions**. As a European Trade Union Federation representing 120 national trade unions from 35 European countries, EFFAT defends the interests of more than 22 million workers employed along the food chain. EFFAT is a member of the ETUC and the European regional organisation of the IUF.

**EFFE**, the **European Federation for Family Employment & Homecare**, represents the interests of national stakeholders including social partners organisations operating in the field of direct employment. This model is characterised by a contractual work relationship between two private individuals, without any trading or profit-making objective.

**EFSI**, the **European Federation for Services to Individuals**, is the voice of the Personal and Household Services industry at European level, representing national associations, employers' organisations, PHS providers and companies involved in the development of personal and household services, and currently operating in 21 EU Member States.

**UNI-Europa** is the **European Trade Union Federation for 7 million service workers**. It speaks for the sectors that constitute the backbone of economic and social life in Europe. Headquartered in the heart of Brussels, UNI Europa represents 272 national trade unions in 50 countries, including: Commerce, Banking Insurance and Central Banks, Gaming, Graphical and Packaging, Hair and Beauty, Information and Communication Technology Services, Media, Entertainment and Arts, Postal Services and Logistics, Private Care and Social Insurance, Industrial Cleaning and Private Security, Professional Sport and Leisure, Professionals/Managers and Temporary Agency Workers.

