



The potential of social dialogue for male and female workers with caring responsibilities

by Chiara Altilio

The current demographic dynamics pose challenges to the resilience of the social and economic systems of the countries in the OECD area. These include the need to set up a social system capable of ensuring personal care services in the light of demographic ageing and the increase in chronic diseases. According to [recent data](#), the average life expectancy at birth in the European Union in 2021 stands at 80.1 years, with the highest values reported in Spain, Sweden and Italy and the lowest in Bulgaria and Romania. In OECD countries, it is estimated that the share of elderly people out of the total population will increase from 17 per cent in 2019 to 27 per cent in 2050 (OECD, 2021) and the growth of the elderly population is linked to the demand for long-term personal care services.

However, data show that despite sustained demand for services, supply is stagnating or declining. This was most recently confirmed by a recent publication by [Global Deal](#), *Unlocking the potential of social dialogue for long-term care*, which highlighted, among other aspects, the general increase in the cost of these services and the dramatic shortage of male and female workers in the care labour market.

In many countries, while the Covid-19 health emergency has on the one hand underlined the importance of professionals employed in the care labour market, it has also made it clear that they are engaged in poor working conditions.

The report points out that although in principle public intervention can be increased to fill certain gaps in the system, it is unlikely to be able to meet the demand for services and benefits in all their complexity. For this reason, social dialogue can play a crucial role in improving the working conditions of those employed in the caring services.

But what are those benefits? Who are the workers concerned? And what are the main characteristics that characterise this specific labour market and on which social dialogue can act?

These benefits are those personal care and assistance services (including medical care), functional to manage the deterioration of health status, related to support in the management of daily activities (personal hygiene, nutrition, grocery). These services may be provided by caregivers or by workers formally or informally employed for this purpose, such as domestic workers and workers providing medical and personal care services. As for the characteristics that distinguish the two groups just mentioned, we can certainly highlight some common features, including:

- a) the gender dimension linked to the provision of these services, given that in all OECD countries women represent the majority of caregivers and operators;
- b) the incidence of foreign male and female workers in the care work market, but in the absence of adequate programmes to recognise the skills of those from non-EU countries, which does not

facilitate the formalisation of care work. This is especially true in countries such as Italy where the incidence of informal work is significant;

As far as caregivers are concerned, caring for a family member with care needs potentially has negative effects on the caregiver's employment status. If the latter is a full-time worker, for example, according to international research, the probability of losing one's job increases if caregiving requires more than 20 hours per week. Moreover, caregiving is one of the main reasons for early retirement if the worker is between 50 and 64 years old.

Notwithstanding the importance associated with a legislative framework that recognises and supports workers with caring responsibilities, social dialogue can act on several fronts, e.g. by promoting the creation of favourable working environments for employees with care responsibilities, so as to reduce turnover and early retirement rates, or by facilitating the dissemination of forms of organisational flexibility tailored to this category of workers, such as the recognition of additional paid and unrecognised leave and/or working arrangements that can ensure a better balance between family responsibilities and professional activity.

With reference to these workers, among the main problems related to working conditions, the lack of regularity of employment relationships comes to the fore. Informal work in the long-term care sector is widespread, especially in those countries where benefits are largely provided at home, as in Italy. In OECD countries, on average, about 40% of these workers in 2021 worked in a private home. Moreover, these workers operate in often inadequate working conditions, which limit the sustainability of long-term care work: average hourly wages in the sector are on average 70% of those recorded in the economy as a whole; risks to their physical and mental health are greater than those recorded for other workers; the high prevalence of informality also leads to the non-recognition of various social protection rights, both from a social security and a welfare point of view.

For this occupational group, too, social dialogue can help to unlock the potential associated with the development of the care work market, e.g. by helping to define a labour market where workers can find appropriate social and economic value for their skills. The social partners could, for example, promote the collective interests of these workers in order to ensure the transition to the formal economy of labour relations over time and, consequently, improve working conditions and wages. The stability of the employment relationship is essential to also ensure adequate measures to protect the safety and health of LTC workers as well as the recognition of social protection rights. In addition, social dialogue could promote the recognition of skills, so as to ensure the portability of a set of skills, facilitating professional career development and access to training.

However, it is clear that the conditions for the social partners to act also partly depend on the relevant legislative framework. This was reiterated by the EU Directive 2019/1158 on work-life balance. As far as family carers are concerned, the legal recognition of caregivers is crucial to ensure access to social rights. As is the case in some EU countries, this might give rise, for example, to access to specific economic treatment, more favourable social security and welfare disciplines, flexible working arrangements or ad hoc leave from work. Similarly, the formalisation of these workers is crucial, also to tackle undeclared work. This can be promoted by granted economic benefits linked to the formalisation of the employment relationship through a contract, as is already the case in France and the Netherlands.

Chiara Altilio
ADAPT Junior Fellow
✉ @chialtilio