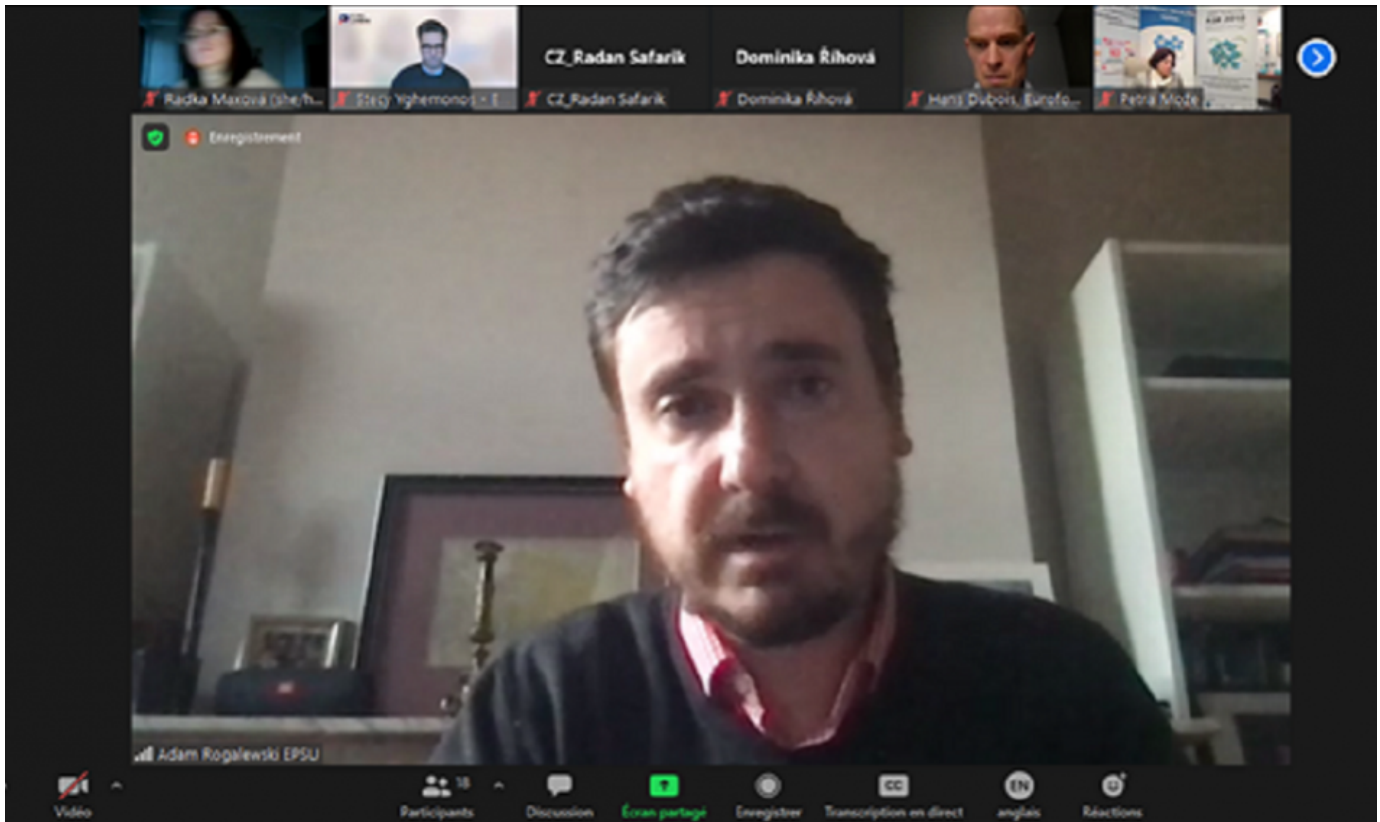


## EPSU participated at the conference on Long-Term Care of the European Parliament



(8 December 2021) On the 2 December 2021 EPSU representatives participated at the conference on Long-Term Care organized by MEPs Radka Maxova from Czech Republic, and Milan Brglez, Slovenia, from the EU S&D party. The conference focused on ensuring a quality of long-term care in Europe and was attended by representatives of the EU Commission (DG Employment), Eurofound, the European Institute for Gender Equality, Eurocarers. Speakers represented also the various universities, the European Association of Service providers for Persons with Disabilities, the AGE platform, Slovenian association from the civil society for the elderly care and Slovenian association for dementia care.[\[NC1\]](#) [\[NC2\]](#) [\[NC3\]](#) [\[ar4\]](#)

The first panel focused on rising demand for long-term care and the need to ensure quality care that is in line with gender equality and social fairness. Dana Carmen Bachman, representative of the Commission, (DG Employment, the Social Protection Unit), presented five key conclusions from the 2021 Long-Term Care Report (see here [the comments of EPSU](#) on the report). First, the demand for high-quality long-term care is set to rise. This is an opportunity to improve gender-equality. Second, key issues such as access to, affordability, and quality of long-term care must be addressed. The working conditions in the sector are very precarious and the sector already faces significant labour shortages, which are confirmed the statistics gathered by EPSU in the recent report – see below. Fourth, the costs of family care are mostly neglected and ignored.

Dana Carmen Bachman added that EU funding is available to support long-term care systems in Member States. Through the multi-annual financial framework (Recovery and Resilience Facility) – and in particular the European Social Fund Plus (ESF+) – funding is available for Member States (MS) to support long-term care provision and address challenges in the field of long-term care. So far 17 MS have used money from the Recovery and Resilience Facility fund for investment in the sector.

The second panel was dedicated to carers including nonprofessional (family carers sometimes called informal carers) and professional ones. Adam Rogalewski thanked MEPs for organising the conference on such important topic. He stressed that the conference is very timely and should contribute to developing the EU care strategy proposed by the Commission in September this year. In relation to the strategy, he mentioned the report of EPSU ([Resilience of the Long-Term Care Sector: early key lessons learned from the Covid-19 pandemic](#)) launched in October at the occasion of the Global Day for Care Workers, which provides important recommendations at the EU and national level. Those among others included:

1. The European Care Strategy must go hand-in-hand with a review and reform of European economic governance rules to ensure **that funding** is available for social services and is seen as an investment rather than a cost.

2. Increased funding is necessary to tackle the workforce crisis in care services. Even before the COVID-19 outbreak, almost all EU countries were reporting a **shortage of care workers**. This situation worsened throughout the pandemic, as many care workers reached a point of exhaustion and burnout. [Our figures](#) show that between 2019 and 2020, over 421,000 care workers have left the sector.
3. There are several ways in which EU level policies can help to improve the **attractiveness of the sector**, and the Care Strategy must address this. Higher wages, more social protection and better working conditions are crucial to tackle low recruitment and retention rates. The Care Strategy must also address the issue of forced part time, fixed term, and agency work, which have detrimental impact on workers and care delivery.
4. Not only **do inadequate staffing levels** put an unmanageable pressure on care workers, but they are also simply unsafe for care recipients. In this sense, staff shortages undermine Principle 18 of the European Pillar of Social Rights which states that everyone should have the right to affordable long-term care services of good quality, in particular homecare and community-based services. The Care Strategy should include mandatory measures for adequate, needs based staffing levels.
5. **Improved occupational health and safety** (an EU competence) can help to halt the workforce exodus. This can be achieved through proper risk assessments, the 2021-2027 EU OSH Strategy and a dedicated Directive on Psychosocial Risk and Stress.
6. The care sector is growing rapidly. **Collective bargaining and social dialogue are necessary to ensure that the interests of** care workers are protected as the sector continues to develop. To that end, EPSU is working with the Social Employers to establish a European Sectoral Social Dialogue Committee, with the aim to cover 12 million care workers in Europe.
7. Workplace democracy through collective bargaining goes hand in hand with **reform of public procurement** (an EU competence). Contracts should not be given to companies that do not respect workers' rights, do not pay their fair share of taxes, or do not reduce their CO2 emissions.
8. Recent research of the European Network of Corporate Observatories and Investigate Europe has shown companies seek **to maximise profits from care extracting value from workers and care users**. That trends should be reversed.

9. Care work is overwhelmingly carried out by women, and there is a strong gender dimension to why this work is so undervalued; a significant proportion **of Europe's gender pay gap is a result of segregation in the labour market.** EU policy also has a role to play in the revaluing of care work, closing the gender pay gap and ending pay secrecy.
10. **Finally, it must be made absolutely clear in the Care Strategy is that there cannot be a return to austerity.** There has been increasing talk amongst finance ministers of going back to balanced budgets and reduced state debts. But these are dangerous arguments to be making. Austerity policies are the reason our public services were so ill equipped to absorb the shock of the pandemic.

- [Log in](#) to post comments

- [Printer-friendly version](#)

Policies

[Health](#)

[Social Services](#)

Sectors

[Health and Social Services](#)

Other organizations

[EP](#)