Care Platforms: Impacts and challenges from a trade union perspective.

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PLATFORMISATION OF WORK

# CARE PLATFORMS

Impacts and challenges from a trade union perspective

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Report commissioned by the Friedrich-Ebert-Stiftung & the European Federation of Public Service Unions

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## **Abbreviations**

- ACV Algemeen Christelijk Vakverbond (The Confederation of Christian Trade Union)
- ACLI Associazioni Cristiane Lavoratori Italiani (Christian Associations of Italian Workers)
- CDHC Consumer-directed home care
- CGIL Confederazione Generale Italiana del Lavoro (Italian General Confederation of Labour)
- CISL Confederazione Italiana Sindacati Lavoratori (talian Workers' Trade Unions Confederation)
- CSC Confédération des syndicats chrétiens (The Confederation of Christian Trade Union)
- DGB Deutscher Gewerkschaftsbund (German Trade Union Confederation)
- DIRV Deutscher Industrie-Reinigungs Verband (German Industrial Cleaning Association)
- EFFAT European Federation of Food, Agriculture and Tourism Trade Unions
- EIGE European Institute for Gender Equality
- EPSU European Federation of Public Services Union
- ETUI European Trade Union Institute
- EU European Union
- FES Friedrich-Ebert-Stiftung
- HCD Home Care Direct
- HIQA Health Information and Quality Authority
- HSA Health and Saftey Authority
- HSE Health Service Executive
- ILO International Labour Organisation
- LTC Long-term care
- MEAT Most Economically Advantageous Tender
- MRCI Migrant Rights Centre of Ireland
- SIPTU Services Industrial Professional and Technical Union
- VAT Value Added Tax
- WHO World Health Organisation
- WRC Workplace Relations Commission

## Summary

Increasing demand for long-term care (LTC) is a critical issue for the European Union (EU). According to the European Care Strategy, currently around 6 million people work in LTC in the EU. The value attached to independent living and aging in place approaches have contributed to the provision of home care becoming preferred over residential care. Consequently, the provision of home care and personal services is a growing segment of the labour market. Conditions applying to care workers continue to be characterised by low pay, precarious working arrangements and limited development opportunities, however. Despite the increased attention devoted to the sector during the Covid-19 pandemic, these conditions have not significantly improved, and the societal contribution made by care work remains undervalued.

The European Institute for Gender Equality (2021) estimates that about 3 out of 4 paid care workers are women, with one in four having a migrant background. A high level of informality prevails in the sector. According to the European Labour Authority (2022), about half of care workers in domestic settings are undeclared workers. Funding models relying on poorly regulated use of cash transfers can encourage the employment of workers under informal contractual arrangements.

Government policies aimed at addressing quality care provision have failed to ensure decent working conditions. The general decline in the provision of public services has gone hand in hand with increased privatisation of care services and a growing dominance of market actors in the sector. Care is labour-intensive, and the nature of the work is not conducive to productivity-enhancing technologies. New challenges are emerging – notably digital labour platforms connecting workers and clients in need of care.

For unions, organising workers in the sector has always been challenging, given the invisible nature of work performed in private homes. It is evident that in the digitalised, postpandemic world of work a new approach to organising workers is required. The precarity of employment is on the rise for care workers, who are taking on additional forms of responsibility in coordinating their work, while having inadequate access to sickness benefits or social protection. A substantial part of the European labour force is engaged in platform work. While it is hoped that the Platform Work Directive will address issues such as bogus self-employment, its impact is yet to be seen. Recruiting and organising care workers in trade unions helps them cope with the many challenges they face in the effort to attain quality employment, ensuring their rights are satisfied, and strengthens the voice of care workers. Unions need to find new ways to boost their visibility and interact with platform workers.

A change in policy is needed to support well-funded, directly provided public services. In the absence of such, however, an expansion of collective bargaining in the sector is needed to address differences in standards between providers and ensure quality jobs that are positive for both workers and those in need of care.

This research outlines different approaches unions can take to address employment conditions in the care sector, including specific action in relation to platform work, to ensure workers have a voice. It discusses options for unions in recruiting and organising care workers as well as strategies at the political level. The report concludes with observations and issues for further discussion.

## DOMESTIC CARE WORK IN THE PLATFORM ECONOMY: COMPOUNDING CHALLENGES FOR TRADE UNIONS

>We have been in a state of emergency for a year and a half, but we are running out of air. The good care that is given comes at the expense of our health. Many of my colleagues are giving up, many are reducing their working hours, it's just not worth it. We don't have super powers; we are only human. We also have our own families, and we only have one back.<1

(Ilka Steck, care worker and ver.di member)

## **1.1 INTRODUCTION**

Provision of quality long-term care (LTC) for an increasingly aging population is a challenge that has taken on acute dimensions in Europe. Health and social care experts emphasise the value of >aging in place< approaches, meaning domestic care provision is preferable to residential care wherever this is practical, with policy reflecting this. Across Europe, commonalities can be seen in the challenges facing national social protection systems when it comes to providing care. These can be subsumed under four areas: ensuring access to an adequate supply of care, quality of care provided, financial sustainability of care models, and the employment of carers (Spasova et al, 2018). Despite extensive rhetoric regarding the value of care in society, conditions for care workers are characterised by low pay, precarious working arrangements and limited development opportunities. At national level, policy by most European governments has broadly speaking sought to outsource care provision to private providers. Continued growth in this segment of the >silver economy<<sup>2</sup> has attracted increased interest from platforms, making care provision an expanding segment of the gig economy. The aim of this report is to review the growing phenomenon of digital platforms in the provision of care in terms of the impact it has, and challenges it creates for trade unions. The report is structured as follows: In section one we review the literature on care work and, more specifically, digital care platforms, examining challenges for trade unions. Section two outlines findings from case studies of digital platform activity in two countries to illustrate how unions are seeking to

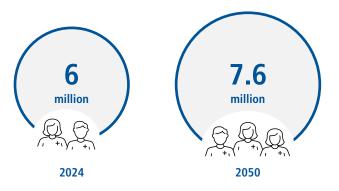
create and maintain positive employment conditions as the sector changes. Section three concludes the report with an exploration of possible strategies for unions to take, regarding the growing pervasiveness of platforms for care, drawing on policy and legislative tools, including the European Care Strategy and EU Directive on Platform Work.

## **1.2 THE CARE SECTOR**

## AN EXPANDING AREA OF EMPLOYMENT

LTC forms part of the broader health and social care sector, encompassing a range of services for older persons and persons with a disability, dependent on help with the basic activities of daily living, including assistance with basic medical care and personal care, and can also include some housework/domestic tasks (Colombo et al, 2011, Hussein et al., 2016).

As defined by the Council of the European Union (2022), a **long-term domestic care worker refers to any person engaged in domestic work who provides longterm care and has employed status.** In contrast, a >live-in care worker



Currently around 6 million people work in LTC in the EU; this is expected to grow by a further 1.6 million by 2050 (European Care Strategy) (see section 1.5). The European Institute for Gender Equality (EIGE) (2021) estimates that about 3 out of 4 paid care workers are women,

<sup>1</sup> Excerpt from a 2021 speech which can be found on the European Public Services Union site: https://www.epsu.org/sites/default/files/ article/files/llka\_Speech%2029%20October.pdf

<sup>2</sup> This denotes the market developing around the needs of the aging populations

with 1 in 4 having a migrant background. Employees in the care sector earn less than employees with comparable qualifications and work experience in other sectors (Budig and Misra 2010). Cost-containment underpins the system (MacDonald and Charlesworth, 2016), and an absence of regulation has been linked to stimulation of private sector provision and informal arrangements (Murphy and Turner, 2014).



3 out of 4 paid care workers are women.



1 out of 4 paid care workers has a migrant background.

## CHALLENGES FACING REGULATION AND FOR-MALISATION OF WORKING ARRANGEMENTS

Domestic care is performed in the private sphere, which is precisely where regulation and formalisation of working arrangements face greater challenges. **This is a highly feminised sector, with** 

- low rates of unionisation,
- poor pay,
- high levels of informality and
- ad hoc working arrangements.

(MacDonald and Charlesworth, 2021; Murphy and Turner, 2017). The risk of exploitation increases with live-in arrangements, particularly for migrant workers (Rogalewski and Florek, 2020). The relational aspect of care work has also recently received attention in the context of platform-mediated care work (Khan et al, 2023). The perceived quality of care provided is closely linked with workers' capacity to develop caring relationships with service users, often while under pressure in their work environments to meet competing demands (Cramm et al, 2013). A distinctive feature of domestic care work is that it is comprised of tasks classified as both family work and market work, performed in both private and public spaces, and can take place in both the formal and informal economy (Fudge 2012). The invisibility of work in private settings poses challenges for supervisory inspection agencies and has contributed to a lack of professionalisation in the sector (Cox, 2006). While professionalisation of domestic care has not progressed despite calls for this, Charlesworth and Malone (2017) contend that wherever public funding has been provided for care, working conditions for domestic care workers have become more formalised over time, particularly where the state acts as the direct employer. Aggressive cost-cutting, outsourcing and privatisation of care have left workers vulnerable to labour market changes, however, the most recent of which is the emergence of platform work in the sector (MacDonald and Charlesworth, 2021). Intermediaries have entered the care market, creating digital marketplaces where clients and care workers can arrange the provision of care services at the client's home. Trojanksy (2020) argues that it is reasonable to assume that such intermediaries will follow the trend set by other platforms in areas, such as transport or domestic services, and increasingly become more pervasive in the market. For this reason alone, their development is worthy of investigation from a trade union perspective.

## **1.3 TRADE UNIONS AND CARE WORK**

### **UNION CONCERNS**

Trade unions have actively organised the care sector, precipitated by similar issues (lack of collective agreements, wage rates, overtime and travel time) in a number of countries including Switzerland, Ireland and Sweden (Rogalewski, 2018; Murphy and Turner, 2014; Thörnquist, 2021). Unions have argued that the privatisation of care has wrought havoc, as the payment of public funds to private providers has widened geographic and socioeconomic disparities in terms of accessibility to care provision (Pelling, 2021; Bell, 2023). Migrant workers make up a sizeable portion of the care workforce, and organising this cohort can be additionally challenging for unions due to isolation, language barriers or fear that union membership may be negatively perceived by employers. The European Labour Authority (2022) has found that about half of care workers in domestic settings are undeclared workers.<sup>3</sup> As such, the potential for working conditions to be exploitative is cause for concern. There is a need for EU-level coordination in the care sector to address migration between Member States. The current situation disincentivises receiving countries from improving employment conditions to attract a local workforce, and can furthermore contribute to a care shortage or brain-drain in sending countries (Sowa-Kofta et al, 2019).

## **FUNDING**

Funding the cost of care poses a challenge for many governments, and although demand for LTC is increasing, a study published by the European Federation of Public Service Unions (EPSU) found that on average **>the ratio of long-term care workers per 100 people aged 65+ declined from 4.2 to 3.8 between 2011 and 2016 across the EU** (Florek, 2021).



care worker

per 100 people aged 65+

3.8

2016

care worker per 100 people aged 65+

Care is highly labour-intensive, often requiring hands-on contact incompatible with productivity-enhancing technologies. As a result, bargaining in the sector is more complex. As

<sup>3</sup> European Labour Authority (2022) Tackling undeclared work in the personal and household services sector UDW\_Study\_report\_on\_ PHS\_2022.pdf (europa.eu)

King-Dejardin (2019) contends, rising care costs often translate into fewer care hours. In addition, attempts to influence policy around wages and conditions can be viewed as pitting the quality of employment against the quality of care, when in fact research indicates a positive relationship between high-quality care and high-quality employment standards. Dowling (2022) argues that profitability and economies of scale have driven standardisation and time constraints in care delivery. While this may be portrayed as creating efficiencies in the system, it also replaces a relational approach to care with repetitive, standardised tasks needing completion as quickly as possible. King-Dejardin (2019) points out that poorly regulated use of cash transfers (i.e. beneficiaries using allowances at their discretion), together with low levels of public care expenditure can encourage the employment of workers under informal contractual arrangements.

#### BARGAINING

Collective bargaining coverage in the sector is minimal, with wages generally only being in line with national minimum rates.<sup>4</sup> The EU Directive on Adequate Minimum Wages and Collective Bargaining has the potential to extend bargaining coverage to encompass more workers, which is to be welcomed. The implications of the Directive for those bogusly deemed to be self-employed remains vague, however. Therefore, the benefit to care workers offered by the EU Directive on improving working conditions in platform work may be more salient in that regard if it is effective in addressing bogus self-employment. In tandem with this, both directives have the potential to facilitate expediting improvements in terms and conditions of employment in the sector.

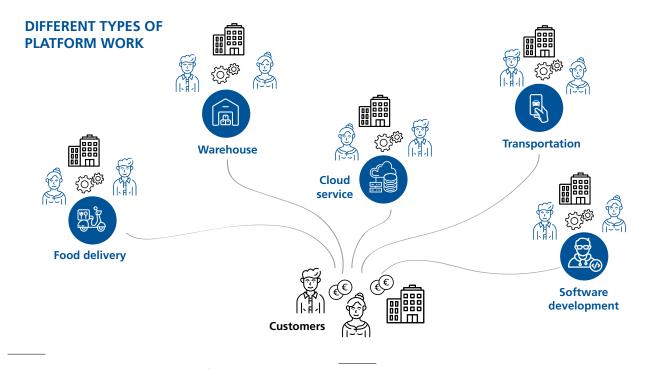
## **1.4 DIGITAL PLATFORMS IN CARE**

#### **PLATFORM WORK**

Digital platform work is a relatively new way of working, in which an online platform, such as a website or an app, matches a request for a service from a client with the supply of paid work by an individual.<sup>5</sup>

The European Council defines platform work as a form of employment in which organisations or individuals use an online platform to access other organisations or individuals to solve specific problems, or to provide specific services in exchange for payment.<sup>6</sup> (See illustration below.)

Piasna et al (2022) state that digital labour platforms provide a set of tools and services that enable the delivery of work in exchange for compensation-setting rules, enabling one-off transactions and self-employment rather than creating an employer-employee relationship. Platforms generally make jobs more casual, pay less predictable and limit social protection (Pulignano et al, 2023: 12). Furthermore, platforms introduce new forms of control - for example through reputational mechanisms that can impact workers' potential to find work (Sedacca, 2022). Such mechanisms tend to disadvantage workers who have more caring responsibilities, for example through penalties for cancellations (Van Doorn, 2020). This has an impact on the price charged by platform workers (Hunt and Samman 2020). Molitor et al's (2021) study of care and domestic workers (in Australia, Germany, Denmark, Spain and the United Kingdom) found that workers believe reputational mechanisms do not help them to find better jobs.

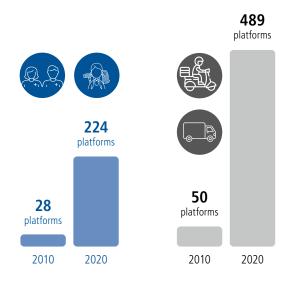


4 The European Parliament and the Council of the European Union (2022), Directive 2022/2041 on adequate minimum wages in the European Union<, EUR-Lex – 32022L2041 – EN, available at: https:// eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32022L 2041

- 5 https://www.consilium.europa.eu/en/infographics/digital-platformworkers/
- 6 European Council 2022, https://www.consilium.europa.eu/en/ policies/platform-work-eu/ (3/1/23).

#### PARTICIPATION IN PLATFORM WORK

Platform work now accounts for a substantial part of the European labour force, with 28 million people working on platforms in 2022 and the number expected to reach 43 million in 2025)7. Typical platform workers are young, male and use platforms as a secondary source of income, though 3 million of which do platform work as their main source of income<sup>8</sup>. While much of the work is considered low-skill, many workers are overqualified for the work they perform (International Labour Organisation, 2021). While transport and delivery services make up the majority of the platform economy, platform enterprises are increasingly gaining importance in the provision of domestic and care work, growing from 28 platforms in 2010 to 224 platforms in 2020 worldwide (ILO 2021b).

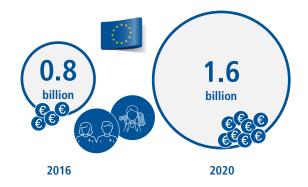


However, as Flanagan (2019) points out, service work involving care and domestic work has only received marginal attention in analyses of the gig economy to date. More recently, Piasna et al (2022) highlighted the gender divide in platform work, with women accounting for a large majority of on-location workers (64 per cent), an area that is indeed dominated by young women rendering care services.

#### PLATFORMS IN CARE

Platforms offer care services such as babysitting, domestic work, and LTC for the elderly and those with special needs. While there is significant overlap between domestic work and LTC work, our focus is on the latter. Platforms typically enter markets where regulation is weak, and where public provision of services is largely absent, e.g. private transport for individuals. Sedacca (2022:152) notes that the provision of domestic services through online platforms could increase the work's visibility, thereby facilitating improved rights and valuation in the sector. This potential has not yet been realised, with visibility often failing to translate into increased benefits for those performing the work or to subject working

conditions to more scrutiny. Pulignano et al (2023:5) highlight the difference between contexts of regulatory and legal ambiguity, where platforms may enhance formality, as demonstrated by Mateescu and Ticona (2020;2022). However, platform work also brings new forms of risk. Revising the concept of personalised risk introduced by Christensen and Manthorpe (2016), Macdonald (2021) refers to pindividualised risk that of isolating workers, fragmenting work, and working time.



The platform economy's conquest of domestic care sectors in countries of the global North is seen as a response to the scarcity of affordable quality care services (Rodríguez-Modroño et al, 2022). Although the statistics available on care platform work are scarce, it is generally accepted that domestic help is an occupational group which are growing significantly (Marzo, 2023). The size of the EU platform economy in the domestic and care sector grew to € 1.5 billion in 2020 from € 0.8 billion in 2016 (Marzo, 2023). Rodríguez-Modroño et al (2022) argue that digital platforms take advantage of inequalities of gender, race and immigration status to access a precarious workforce. They argue that migrant workers lack access to alternative forms of employment and that platforms provide an otherwise unavailable source of income, albeit coupled with precarity, lack of access to social protection and unemployment benefits. They argue that digital platforms have reinforced the >casualisation< of labour markets, gendered segregation and subjugation.

#### Table 1.1 Care Platforms (primarily long-term care)

Country		Care Platform
	Austria	Betreut.at, Curafides
	Estonia	Care Mate
	Ireland	Care.com, Home Care Direct
	Italy	Amalia, Badacare, Epicura, Latuabadante, Liane Care, Ugo
	Germany	Marta.de, Careship, Pflegix
i Či	Spain	Cuorecare, Depencare, Cuideo

<sup>7</sup> https://www.consilium.europa.eu/en/policies/platform-work-eu/

<sup>8</sup> https://braveneweurope.com/half-of-platform-workers-have-hourlyearnings-below-the-minimum-wage-research-finds

### **OPERATIONAL MODELS**

Ticona and Mateescu (2018) found that care platforms typically claim not to be platforms, rather asserting that they are marketplaces matching workers with those who need care services. Care platforms differ from other platforms in that the person using the platform to seek a service is often not the person availing of it, in other words it is the family of a person in need who arranges care. Once signed up to the platform, clients are given access to a list of carers based on geographical proximity. Sparsely populated rural locations contribute to inefficiencies in traditional models of care provision (Murphy and O'Sullivan, 2021). Digital platforms operate in a number of formats, used either singularly or in tandem (Ustek-Spilda et al, 2022). One is a piece-rate approach, where workers are paid only for the tasks completed, with a specific rate attached to each job the platform assigns. Others provide more of an employment model with a base salary topped up with additional piece-rate payments; alternatively, some operate on a subscription model, in which workers and/or clients pay a fee to use the platform. In a review of operation of care platforms in Spain, Blanchard et al (2021) differentiate between two different models: digital placement agencies and on-demand platforms. They found that **digital placement agencies** operate in a way similar to a traditional private placement agency, offering recruitment as well as ongoing, follow-up support, charging clients both an initial fee (covering assessment of client needs, matching a carer and meeting legal and registration requirements), and monthly fee (covering administering payroll, finding substitute carers if needed and maintaining contact with the worker and family). Blanchard et al (2021) also found variations even within the digital placement agency model, whereby some platforms exclude clients who only want to use a platform to select a carer and are not seeking an ongoing, formalised working arrangement. On average, half of their demand is for live-in carers. In contrast, some platforms limit their involvement to the contract paperwork and registering the carer on the social security system for the client. Another service provided is the option of formalising the working relationship for families who already have a carer who is working informally (Blanchard et al 2021).

The second model is an on-demand platform which Blanchard et al (2021) have found to exhibit operating models similar to other on-demand platforms in different sectors. In this case, workers set their own hourly rates, with the platform taking a percentage as commission (e.g. Familiados 14 per cent, Home Care Direct 13 per cent).<sup>9</sup> While Blanchard found that these platforms tend to specialise in short-term services not intending to create a longer-term relationship between carer and client, a commission-based approach can also encourage the development of longer-term care relationships. While maintaining longer-term relationships between carers and client is better from the perspective of continuity of care, the Fairwork Foundation has found that some platforms (Helpling, Careship) have created financial mechanisms to promote this continuity,<sup>10</sup> for example by taking a higher commission for the first three jobs a worker takes from the same client, and then subsequently reducing this, so that workers find it financially more beneficial to retain clients, which also benefits the platform.

The type of tasks performed by care platform workers varies from support with shopping and cooking to more complex personal care-related needs. The platforms generally require carers to have demonstrable experience, references, and recognised care qualifications. Despite platforms offering an innovative approach and potential to provide care work differently, a growing literature suggests significant similarities and parallels between care work both in the gig economy and its non-digital counterpart, explaining the continued gendered nature of the work (Ustek-Spilda et al, 2022). Indeed, some care work platforms fail to monitor whether workers are paid in full and in a timely manner, reflecting the problems domestic workers experience, particularly in informal or undeclared working arrangements. Unpaid work is a significant problem in care work through traditional agencies, where workers are not paid for travel time or additional time not stipulated by the agency (Murphy and Turner, 2014). Additional unpaid work is also generated by the need to check the platform for new work and to interact quickly with messages to/from clients.

## 1.5 RELEVANT POLITICAL AND POLICY DEVELOPMENTS

### THE EUROPEAN CARE STRATEGY

The European Parliament has called for several measures which would facilitate a shift in how care is provided, valued, and rewarded. In 2022, the European Commission presented the »European Care Strategy for caregivers and care receivers«. To meet Principle 18 of the European Pillar of Social Rights, the strategy emphasises the importance of improving the affordability of care services, as currently one-third of households with LTC needs do not use domestic care services due to affordability. The strategy emphasises the need for increased social protection coverage and a sustainable approach to financing LTC. Finally, the strategy refers to a person-centred approach to care entailing greater choice. To meet care demands, both public and private investments in care services will be needed, but the strategy emphasises the importance of a clear regulatory environment that considers the social value of care services and the need to uphold the fundamental rights of persons both receiving and giving care.

From an employment perspective, the strategy has acknowledged that investment in care is needed to attract and retain talent and to address difficult working conditions and low wages and fulfil the sector's economic and job-creation potential. This echoed European Parliament calls for recognition of professional qualifications of paid care workers using

<sup>9</sup> Wray, B (2020) https://www.equaltimes.org/alisa-trojansky-it-stime-to#.ZDkL3HYo-Uk

<sup>10</sup> Fairwork (2020) Fairwork Germany Ratings 2020: Labour Standards in the Platform Economy. Fairwork. [PDF] Available at: https://fair.work/ wp-content/uploads/sites/97/2020/05/Germany-English-report.

objective criteria and gender-neutral job classification tools, coupled with investment to upgrade formal care workers' skills in line with a harmonised career structure. Crucially, from a trade union perspective, the European Parliament also recommended guarantees for decent conditions and wages, and social rights for care workers, including representation and collective bargaining. In committing to fairer working conditions in the sector, the European Care Strategy focuses on aspects of industrial relations, human capital development and public awareness, specifically citing actions which:

- (i) Promote collective bargaining and social dialogue with a view to improving wages and working conditions
- (ii) Ensure the highest standards of occupational health and safety
- (iii) Design continuous education and training for care workers
- (iv) Tackle gender stereotypes surrounding care and launch communication campaigns
- (v) Ratify and implement ILO Convention 189 on domestic workers

The strategy also announced the intention to create a new sectoral social dialogue committee for social services at EU level.<sup>11</sup> This was established in July 2023, and was positively received by both EPSU and the Social Employers, having called for such in 2021.<sup>12</sup> The Commission noted the strong links between social services and other sectors, urging cooperation with other committees covering similar areas. Furthermore, the care strategy also promotes the establishment of a skills partnership under the Pact for Skills. This includes furnishing workers with soft skills, digital skills, and specialised knowledge (e.g. on certain types of care needs such as Alzheimer's) while also using digital technologies to enhance labour productivity, improve case management, and address occupational safety.<sup>13</sup>

Crucially, the strategy also highlights that quality encompasses not only infrastructure and services, but also the interactions and human relations between carers and the people receiving care.<sup>14</sup> The strategy underscores the importance of care that alleviates isolation and loneliness as well as meeting care recipients' physical needs. While the care relationship is not explicitly mentioned, it is reasonable to expect its quality to improve wherever there is continuity between a client and a carer. This highlights the importance of measures aimed at improving employment conditions to address not only future workforce supply but also the retention of current care workers. Additionally, the strategy emphasizes the importance of robust quality assurance and enforcement mechanisms. The strategy acknowledges the low take-up of ILO Convention 189 on domestic work<sup>15</sup> with only nine Members States having ratified it, limiting potential improvement of the conditions of migrant care workers, who often face undeclared or precarious conditions.<sup>16</sup>

### **DOMESTIC WORKERS CONVENTION, 2011**

Convention No. 189 concerning decent work for domestic workers was adopted by the ILO on 16 June 2011. As an example of how this has been adopted in Member States, in Ireland, the Workplace Relations Commission (WRC) *Code of Practice for Protecting Persons Employed in Other People's Homes* restates the provisions of the Convention and further stipulates the rates applicable for board and/or lodgings. The Convention is founded on the premise that domestic workers are not servants or part of the family and have the same rights as other workers.

Table 1.2

#### **Provisions of the Domestic Workers Convention**

The right to freedom of association, collective bargaining and to join an association of their choosing.

Protection of compulsory education; from abuse, harassment, and discrimination.

Entitlement to fair terms and conditions of employment, including written job offers and statements, payslips, minimum wage, annual leave, and rest breaks.

Freedom to reach agreement with the employer regarding living-in and entitled not to remain in the household during rest periods, and to keep travel and identity documentation in the worker's own possession.

The same rights as other workers regarding occupational health and safety, social security, maternity entitlements.

## **1.6 EUROPEAN DIRECTIVES OF RELEVANCE**

### DIRECTIVE ON ADEQUATE MINIMUM WAGES

The EU Directive on Adequate Minimum Wages is to be transposed into national law by November 2024. The Directive aims to ensure that workers are protected by adequate minimum wages and a robust collective bargaining framework, which can in turn address issues such as wage inequality, precarious work, and gender discrimination. Bargaining coverage and trade union presence are identified as a more effective way of reducing wage inequality than statutory minimum wages alone (Bosch, 2015) The Directive aims to strengthen the institutions of collective bargaining as a precondition for more sustainable and inclusive economic development (Schulten and Muller 2021). All countries must

**<sup>11</sup>** This was formally requested in June 2021 by EPSU and the Federation of European Social Employers

<sup>12</sup> https://www.epsu.org/article/social-employers-and-epsu-releasejoint-position-paper-forthcoming-european-care-strategy

**<sup>13</sup>** European Care Strategy p10.

<sup>14</sup> European Care Strategy p4.

<sup>15</sup> The ILO Domestic Workers Convention 2011 (No. 189) defines a domestic worker as any person engaged in domestic work within an employment relationship in or for a household or households. This extends to the provision of care. A person who performs domestic work only occasionally or sporadically and not on an occupational basis is not deemed to be a domestic worker.

<sup>16</sup> These are: Italy, Ireland, Portugal, Belgium, Sweden, Spain, Germany, Malta, and Finland

establish conditions to enable collective bargaining. Moreover, wherever collective bargaining coverage is below a threshold of 80 per cent, Member States must establish national action plans to provide for enabling conditions, either by law or after consulting social partners, and subsequently establish an action plan to increase this coverage. Variations in collective bargaining coverage are attributed to key industrial relations factors, including the organisational features of trade unions and employers' organisations, the legal coverage of collective bargaining rights, the institutional setting for collective bargaining (multi-employer or a single employer), and how collective agreements are applied (ILO, 2022). As wages closely align with minimum wage rates and have low bargaining coverage in the care sector, this Directive may well help raise standards. Importantly, the Directive requires States to put in place effective, proportionate, and non-discriminatory controls and field inspections, plus sufficient resources, training, and guidance for enforcement authorities to target and pursue non-compliant employers. Care provided in the domestic environment is an area where inspection and enforcement have proved difficult to date. For those workers on platforms, however, the impact may be limited, so the Directive on Platform Work may offer more.

### DIRECTIVE ON IMPROVING CONDITIONS IN PLATFORM WORK

The EU Directive on Platform Work is aimed at improving working conditions while notably also preserving the opportunities and benefits brought by the platform economy.<sup>17</sup> It provides a list of criteria which, if met legally, deems a platform to be an employer, who must then provide employees with rights as per national legislation. For example, if a platform intervenes in several criteria, such as determining remuneration levels, supervision of work through electronic means, restricting personal choice on working hours or tasks, establishes rules for interaction with clients or restricting the capacity to perform work for third parties, then it is deemed to have an employment relationship with the person performing the work. Dealing with the re-classification of those bogusly categorised as self-employed was the element of the Directive that contributed to lengthy delays in reaching agreement on the final text. In June 2023 efforts continued to seek a consensus relating to the core elements resting on how the presumption of employment status applies. After much negotiation, a common consensus was considered to have been achieved, according to which if a platform >exerts control and direction over the performance of work with three out of seven criteria relating to supervision, remuneration and sanctions restricting freedoms in organising work, then the relationship is deemed to be an employment relationship.<sup>18</sup> However, a harmonised legal presumption of employment through which self-employed platform workers could be reclassified as full-time employees has yet to be achieved. Moreover, the proposed Directive intervenes in the algorithmic management, with the aim of increasing

transparency, ensuring human monitoring, and providing for the right to contest decisions made through an automated process. Finally, it reinforces the platform's obligations to disclose its activities and the workers involved to the national authorities. At the time before this paper goes to press, however, the status of the Directive remains in flux, with Member States having failed to conclude an agreement citing the legal presumption of an employment relationship (as opposed to self-employment) and the administrative burden cited among the reasons for the opposition<sup>19</sup> and reports emerging of plans to split the Directive into two parts, with one having a more immediate focus on the algorithmic management element.<sup>20</sup>

## **1.7 CONCLUSION**

This review of the literature has shown the scale on which the care sector is growing, and consequently given rise to the emergence of new digital platforms as key players in the sector. We have also outlined the core problems that exist in the sector regarding funding and management along with the attendant impact this has on wages, working conditions, and worker representation. The next section of this report is comprised of case studies illustrating how unions are approaching changes in the care sector in two EU countries.

<sup>17</sup> Consilium 2023 Spotlight on digital platform workers in the EU – Consilium (europa.eu)

<sup>18</sup> https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX: 52021PC0762

<sup>19</sup> https://www.euronews.com/my-europe/2023/12/22/eu-deal-toreclassify-gig-workers-as-employees-falls-apart-at-the-last-minute

<sup>20</sup> https://www.euractiv.com/section/gig-economy/news/is-theplatform-work-directive-dead/

## DOMESTIC CARE DEVELOPMENTS IN IRELAND AND ITALY

## 2.1 INTRODUCTION

The purpose of this section is to provide a deeper understanding of challenges for unions in two specific country contexts, namely Ireland and Italy. These countries were chosen for comparison for several reasons. They each have differing care regimes and are at distinct stages in relation to population aging. Both countries are experiencing an aging population and decline in the availability of familial care. The scale of this issue has been more evident in the Italian context for a longer period, however. Furthermore, the employment and industrial relations regimes differ. Finally, the extent to which platforms are a feature of domestic care in both countries varies considerably. Experience in these countries is examined in the following to illustrate how unions are seeking to create and maintain positive employment conditions as the sector changes.

## 2.2 OVERVIEW OF THE LONG-TERM CARE SECTOR

## **IRISH CONTEXT**

In Ireland, LTC policy conforms with recommendations across most developed welfare states, namely to support independent living for as long as possible. Hence, there has been a steady shift to domestic-based care (Dempsey et al (2016). Ireland is by no means unique in Europe in terms of the challenges facing the provision of quality care and decent work in the sector. These include a high rate of population aging and dependency ratio, an extreme rural/urban geographic divide, low public expenditure on care, the increasing marketisation of care services, and absence of sector-wide regulation (Murphy and Turner, 2017). In 2021, approximately 55,000 people were receiving domestic care. 38 per cent of this care was provided through direct provision and 62 per cent was delivered through indirect provision (Department of Health 2022). A 2018 report by the Health Service Executive (HSE), who coordinates domestic care, acknowledged that the greatest barrier to the provision of services in some regions is the inability to source staff.<sup>21</sup> The demand for domestic care services is projected to increase significantly by 2030 (Wren et al, 2017). OECD (2020) data reveals that Ireland has a low number of LTC workers relative to the population aged 65+. A further demographic challenge is the age of workers in the sector. A significant proportion of those providing domestic support are themselves older, with around 42 per cent being 60 and over (Sherlock, 2023).

#### In 2023, 42% of care workers are aged 60 and over.



Significant structural changes have occurred in the past two decades. While once employed quite informally, domestic care workers achieved an improvement in conditions following sustained campaigning by unions to have pay scales aligned with other health care workers, written contracts, pay premiums, maternity leave, pension, and a daily travel allowance introduced (Murphy and Turner, 2014). Through outsourcing however, direct public sector employment has given way to private sector and non-profit organisations (Section 39 organisations, as they are known, which are funded by the HSE). Existing collective agreements do not cover these areas. Services Industrial Professional and Technical Union (SIPTU) and Forsa trade unions highlight that within private companies and non-profits operating in the sector there are issues regarding zero hours contracts, travel expenses for staff, and a downward pressure on the amount of time a carer will spend with clients.

Ireland is currently developing a new domestic care statutory support scheme. For now, publicly funded domestic care is allocated on the basis of a care needs assessment. Families also can choose to pay private organisations directly for domestic care services (Pierce et al, 2020). Those who can financially afford to do so supplement informal and publicly funded care with additional domestic care visits or live-in care, often provided by migrant care workers.<sup>22</sup>Ireland was only the third country to ratify the Domestic Workers Convention No.189 in 2014, which provides for written

<sup>21</sup> Home and Community Care Ireland (2020) Pre Budget-Submission Available at https://hcci.ie/hcci-pre-budget-2021-submission/

<sup>22</sup> Irish Times (2017) Estimated 20,000–26,000 undocumented migrants living and working in the State

contracts, and the right to collective bargaining. However, without strong regulation, employers have tended to stray from their original employment agreement and request that carers do more work, prompting advocacy groups such as the Migrant Rights Centre of Ireland (MRCI) to launch the My Fair Home campaign. The exact number of migrant carers working in the sector is not known, particularly because informal work is pervasive, although changes in the availability of work permits for domestic care in 2021 is likely to have contributed to an increase in documented migrant workers (O'Neill et al 2023).

While the Health Information and Quality Authority (HIQA) regulates residential care, there remains little statutory regulation of the domestic care sector despite calls from multiple stakeholder groups, including unions, for such.<sup>23</sup> The recently introduced consumer-directed domestic care (Consumer-Directed Home Care - CDHC) scheme provides individuals with vouchers from the state which they can use to purchase care from providers, but is not yet fully embedded on a national basis despite lobbying from the private sector providers (Mercille and O'Neill, 2021). As is the case in many other European countries, this commissioning approach is increasingly viewed as attractive and appropriate in addressing the needs of individual service users. However, Power (2017) argues that persons of a cynical persuasion may suggest that appeals to choice and service user input may be considered trojan horses for agendas of privatisation, marketisation and/ or state retrenchment in the sector. Vying to secure Health Service Executive tenders has now become highly competitive and more dominated by private sector providers, particularly as the domestic care sector has been identified as a high growth sector, where investors can expect to become profitable within three years (Mulkeen, 2016).

#### **ITALIAN CONTEXT**

In Italy, over 28 per cent of those aged over 65, and over 64 per cent of those over 85 years, are not self-sufficient and need daily care, corresponding to 3.9 million people.<sup>24</sup> The care needs expressed by this substantial portion of the population are met only minimally by the public welfare system. 2.8 million elderly people in conditions of dependency do not receive any public LTC service (Fosti et al. 2023). According to Domina (2022), total public expenditure on LTC amounts to 33.0 billion euros, equal to 1.85 per cent of GDP. Of the total 33 billion, more than half (50.3 per cent) is intended for cash transfers, while 15.7 per cent is directly provided domestic care and the rest (34.6 per cent) concerns support for beneficiaries residing in care homes.

#### Nearly 4 million people in need of daily care are aged over 65.



Available workforce demographics aggregate domestic workers (domestic helpers and caregivers). Demographically, those providing care tend to be female, older, and migrant. **Women account for 85 per cent of the total and migrant workers 70 per cent.** A significant regularisation programme during the pandemic impacted irregular foreign workers in the domestic and agricultural sectors.<sup>25</sup> Over 200,000 applications were presented, 85 per cent of which related to domestic work.



85% of paid care workers are women.



70% of paid care workers have a migrant background.

ACLI<sup>26</sup> estimate that two-thirds of carers have been working in care for more than five years: more than half (54 per cent) for more than ten years. 39 per cent of carers are working more than 40 hours per week, while the majority work part-time (Pasquinelli and Pozzoli, 2021). 39 per cent of employers pay wages in cash, while less than 30 per cent use banking instruments (wire transfers or cheques). Nearly onethird of households have no established mode of payment. The possession of a title or professional qualification relating to care work, as well as a good knowledge of the Italian language, are generally minimum requirements for enrolment in the registers of family assistants. However, just over one in ten are registered.

<sup>23</sup> Mason Hayes Curran (2023) Homecare and Home Support Services: Legal Reform

<sup>24</sup> The main sources we used to prepare this report are threefold. First, the Annual Report on Domestic Work by the DOMINA Observatory, the national association of domestic employer families. The report analyses information available as of 30 September 2022, exploring institutional sources (INPS, INAIL, ISTAT, General State Accounting Office, EUROSTAT, ILO) and internal sources. Second, the ACLI annual report on carers; the last edition (Pasquinelli, Pozzoli 2021) is based on a non-probability sample of 405 family carers interviewed with a semi-structured questionnaire. Third, the Long-term Care Observatory of CERGAS SDA Bocconi and Essity, in its fifth edition (Fosti, Notarni-cola, Perobelli 2023).

<sup>25</sup> Decree Law 19 May 2020 No. 34, Article 103

<sup>26</sup> ACLI is a private law organisation working to assist workers and protect their rights in the fields of social security, health, safety at work and industrial accidents and access to social benefits

## 2.3 KEY PLAYERS IN THE DOMESTIC CARE SECTOR

## IRELAND

In 2022, 38 per cent of the domestic-support services in Ireland were delivered through direct public provision.<sup>27</sup> The remaining 62 per cent of non-publicly provided care is provided by a mix of not-for-profits, but increasingly profit-driven organisations. The possibility for profitability combined with limited regulation means the sector is relatively easy for platform-based models of care to develop. However, the Department of Health is currently preparing to establish a licensing framework for professional domestic-support providers and secondary legislation setting out minimum standards with which providers must comply to be licensed. This regulatory environment is currently in flux, which may partly explain the low salience of platform-based care providers in the Irish context. Furthermore, the HSE operates an approved provider list on a regional basis, meaning that public funds can only be directed towards those providers who are approved in each region. Therefore, while platforms have a presence in Ireland, their use by families is more limited to privately purchased care, thus restricting the extent to which they can grow compared to countries with unrestricted cash transfer systems. Therefore, domestic care providers may operate dual business models, featuring both traditional and platform approaches. As the regulatory context in Ireland is in flux, this type of approach makes sense for providers.

## ITALY

In Italy, a carer is typically found by word of mouth (70.8 per cent), despite there being several different forms of employment agencies in the sector. There are generalist supply agencies, which carry out brokerage, personnel search, and support for professional outplacement, and there are specialist-type supply agencies, which only supply workers on permanent contracts (Censis Assindatacolf, 2022). Finally, professional outplacement support agencies carry out activities aimed at the outplacement of workers in the labour market. Among these we would note CooperJob, which is the only Employment Agency in Italy and is 100 per cent owned by non-profit organisations. Some municipalities make available a register of family assistants which can be consulted by families. The digital platforms currently on the market do not hire workers directly. Some act as a showcase for adverts by carers or clients, without being registered as agencies and without intermediating the process. Others offer intermediation and to an extent declare that they are registered as authorised agencies, while in some cases they do not indicate this on the site.28

## 2.4 CARE PLATFORMS OPERATIONAL MODEL

#### EXAMPLE OF CARE PLATFORM IN IRELAND

A traditional domestic care agency, Home Care Plus, established Home Care Direct (HCD), a commercial care platform, in 2018. The decision allowed the organisation to leverage technology in how care is delivered and address »inefficiencies« within the current system, including high costs, a lack of continuity in care, and difficulties in recruiting care assistants. The combination of a traditional agency background and platform approach helps to reassure clients by stressing the concurrent »bricks and mortar« status of the parent company: »When you interact with our platform you can rest assured that there is a physical backup behind the technology, able to provide the extra support when needed«. It facilitates clients and carers in arranging the provision of care services via their companion app, highlighting significant savings possible for clients. The website stresses the ease with which care arrangements can be made even by *»the most technology adverse person.* « The organisation highlights the role of technology for the user in monitoring the care relationship: »The platform offers real peace of mind for concerned family members by giving them real-time information on when Carers/Personal Assistants have arrived and left as well as offering them real time updates through digital journal notes that Carers/Personal Assistants fill in after each visit«.

The organisation argues that its model addresses some of the issues associated with care work such as low wages, lack of guaranteed hours, low job security and limited career paths. While gig economy type working arrangements are not always associated with positive outcomes for workers, the provider highlights how working in this model can lead to better outcomes for workers compared to traditional agencies, where there is a lack of predictable working hours and travel allowances. While the messaging regarding the guality of care is central to traditional care agencies, the platform combines this with an emphasis on quality working conditions, too: »Not alone are you getting better value but your carer/personal assistant is also much better rewarded than they would be if working through an agency ... a win/ win situation for everyone involved«. The organisation seeks to highlight the quality of carer selected for inclusion on the platform, noting that only *»a very small percentage of* the Carers/Personal Assistants we interview actually get accepted onto the platform.« While the industry has low levels of regulation regarding qualifications, the platform assures clients that »all carers are interviewed, garda vetted<sup>29</sup> & reference-checked.« They also emphasise that care recipients themselves do not need to »become an employer,« while

<sup>27</sup> Department of Health (2022) Report of the Strategic Workforce Advisory Group on Home Carers and Nursing Home Healthcare Assistants

<sup>28</sup> We can distinguish between vertical agencies, which only intermediate the work of caregivers – such as Amalia Care (https://www. amaliacare.it/), Apedomestica (https://www.apedomestica.it/), Badacare (https://badacare.com/), Badapp (https://www.gallasgroup. it/badapp/), La tua badante (https://latuabadante.it/), Le Badanti (https://www.lebadanti.it/), Epicura (https://www.epicura.it/) or Noi per voi (https://www.noipervoibadanti.it/) and transversal ones, which also intermediate other professional figures or other services

<sup>(</sup>e.g. transporting the elderly), such as Familyldea (https://www.familydea.it/), Ilmiosupereroe (https://ilmiosupereroe.it/),Ugo (https:// hellougo.com/), Yoopies (https://yoopies.it/) or FamilyPartner (http:// www.familypartner.it/).

<sup>29</sup> The vetting process is a statutory requirement under the Children and Vulnerable Persons Acts 2012 for individuals undertaking work on behalf of organisations that work with children or vulnerable adults.

stressing that this is not *»removing any of their control«* over the service.

The platform allows workers to set their own hourly rates, which vary depending on experience/qualifications, and which they then receive via HCD. Testimonials from workers suggest that they understand their self-employed status, with one describing the situation as *»technically working for* yourself, but they [HCD] take care of taxes and insurance.« Once signed up to the platform, clients are given access to a list of carers based on geographical proximity. One of the goals that HCD promotes is the localisation of care by ensuring carers can build a pool of clients in the same area where they live. The platform emphasises that *»if a carer is available* for 40 hours work, our platform and its algorithms make sure they are working for as much of that as possible, rather than travelling«. This is in fact a core aim of most platform-based organisations in all sectors, and they usually apply mechanisms that minimise distance between workers and clients. Contracts allow for the payment of expenses and mileage not always paid by agencies, increasing the attractiveness of the platform to workers. These fees, however, are negotiated directly between the client and carer.

The introduction of regulation is anticipated to go hand in hand with a statutory right to domestic care provision, thus further accelerating demand for services. The organisation has been vocal about the lack of regulation and statutory entitlement to care, seeing it as »a real opportunity to ensure home care plays a much fuller role in the health care continuum.« Of concern for the platform is which of the various models of funding and service provision might transpire through regulation. HCD argue that the Irish system should include a greater use of personal budgets and direct payments, where clients can decide on care providers rather than reinforcing existing practice, in which the HSE operates the outsourcing of home care packages<sup>30</sup> to private agencies. They contend that *»increased choice for families is a great* driver of quality and efficiencies.« They stress that regulation should not indiscriminately regulate out of existence models or practices that are working successfully, and it must be flexible enough to allow for future innovation.<sup>31</sup> This illustrates fears that the introduction of regulation may include provisions which limit the ability of platforms to operate in the care market: »Home care provision in Ireland is hugely lucrative for the limited list of approved corporate providers and will be even more so when regulation and a statutory scheme are introduced«.<sup>32</sup> The platform has also highlighted the informal market for care and suggests that regulation should include generous tax reliefs for individuals availing of formal care provision to combat the informal market.

## EXAMPLES OF PLATFORM OPERATION IN ITALY

In Italy, platforms are becoming more common. Two examples are presented here to illustrate how they operate: AmaliaCare and Badacare.

AmaliaCare (https://www.amaliacare.it/) was established in 2020 and has a nationwide presence. It claims to have a database of more than 42 thousand caregivers (February 2024 data) and can close matching in 5 days. The platform asks the family to fill out a needs analysis questionnaire. The agency then creates a profile of the required caregiver and sends it to all caregivers, who can apply for the position. AmaliaCare is an agency authorised by the Ministry of Labor and Social Policy regularly registered in the Register of Agencies For Employment. AmaliaCare is a socially oriented innovative start-up based in Brescia, and the two founders have previous experience in traditional job agencies in the domestic care sector. AmaliaCare was selected by Personae, the welfare accelerator of the CDP National Network, born from an initiative of CDP Venture Capital SGR and realised together with SocialFare | Center for Social Innovation and alcube.

Badacare was established in 2019 and has a nationwide presence. It claims to have a database of more than 9 thousand caregivers (data February 2024) and has offered services to more than 15,000 families. The platform asks the family to indicate their needs through a filter system and directly shows available caregivers. Badacare is a socially oriented innovative startup based in the province of Turin. In its initial phase, Badacare received support from the University of Turin startup incubator 2i3t.

The co-founder of AmaliaCare opened her own agency after being both an employee of a caregiver services cooperative and founder of another platform. She describes some of the challenges of that model: *»Since we are profit-making, the associations and cooperatives that are non-profit do not want to have anything to do with us. This creates problems even if I go to talk to the municipality or to social workers. If we want to innovate, we have to get rid of the idea that whoever makes a profit is absolute evil. We are not evil.*« (founder of AmaliaCare)

The matching process between client and carer operates as follows:

»The family fills out a questionnaire with all the requests, we enrich this information with a call and create the profile of the ideal caregiver for them. We link a specific question to each characteristic requested in the questionnaire for the carer. The characteristics are many, usually we arrive at about fifty questions. Then we open the job offer and give everyone the opportunity to apply. The algorithm links questions and answers also based on the relevance of each question and calculates the percentage of affinity between the candidate and this ideal profile.« (founder of AmaliaCare).

**<sup>30</sup>** Home care packages include additional home help hours, nursing care, respite care, physiotherapy and other supports which, while funded by the state, can be supplied by private companies.

<sup>31</sup> https://blog.homecaredirect.ie/policy-challanges-for-the-introductionof-regulation-in-home-care/

<sup>32</sup> https://blog.homecaredirect.ie/corporatizing-of-irelands-homecare-sector/

Workers recognise and appreciate this approach:

»I feel great with this agency because they are a serious agency. I had to deal with an agency that didn't even comply with regulations, I was there for three months but then I left. There are various agencies that tend to exploit workers, especially people who don't know the rights, the laws and the majority of people who do this job are people who don't know what they're getting into in every sense« (carer 1, AmaliaCare, 31 years old, female, of Algerian origin).

The owner of the platform points out that to ensure decent working standards for carers sometimes means having to be clear with clients that certain compromises are not possible. This approach has an impact on operations, which the founder of AmaliaCare describes in these terms: *»For many families, the caregiver is a robot who doesn't have to eat, doesn't have to sleep, doesn't have to talk to the outside world, but that's not the case*« (founder of AmaliaCare). This implies that, in addition to the selection of carers, they select also the families: *»We took into account that we would not have taken many families but when you are small you don't need to take everything, you need to work well to make a name for yourself.*« (founder of AmaliaCare).

The founder of AmaliaCare recounts having a good collaboration with a trade union: »We thought about entrusting them with the slips, the paperwork, but they are too low-tech for us, but they remain as a support when we have problems on the caregiver side, it is as if they were a consultant for us. We basically ask, whow can we fix things before they get to you?«. This collaboration between the agency and the union is also recognised by the workers: »They also rely on trade unions, an associate told me this when we were talking about agencies that cheat« (carer 1, AmaliaCare, 31-year-old woman, Algerian origin).

Badacare was established in 2019, with a license for personnel recruitment and selection and offers a tax support service. *»The family receives a monthly pay slip which includes tax obligations such as calculating contributions, etc. In addition, there are replacements in case the carer goes on holiday, falls ill, or requires other leave, etc.* « (founder of Badacare). The contract is stipulated directly by the family, and the founder of Badacare declares that the carers appreciate this method. We found some confirmation of this from the carers interviewed: *»I used to work for a cooperative, but I don't like cooperatives that much. They pay little, and you have to pay contributions. Now, instead, [Badacare] is not an employer. It's an agency that selects workers, but I make the contract with the family* (carer 3, Badacare, woman, 54 years old, of Nigerian origin).

Unlike the rhetoric about platforms as a disintermediation tool, the founder of Badacare identifies his own value precisely in intermediation: *»To have a secure network you must have entry and exclusion prerequisites. There are behaviours that lead you to a blacklist, cruel as it may sound, we must safeguard a secure network. The profiles are included in the portal only if they meet certain experience requirements,*  passing a structured interview and aptitude tests such as tests of empathy and reliability« (founder of Badacare). Concerns exist that workers can be isolated, which Badacare intends to address by creating a community of carers: »In Facebook groups they also share other contents, they pray together [...] After all, it's their way of spending the day, because they have to stay inside a house practically all day and therefore they have to find something to hold on to. It would be nice to have more substantial resources so as to create a small social network just for family carers with activities that create more involvement.« (Founder of Badacare).

Badacare also spoke of developing collaborations to support the matching process between client and carer, beyond the initial online interaction: *»Our strategy is to create an omni-channel experience. Online is essential in the first phase. However, we are trying to enter into agreements with tax assistance centres, labour agencies and cooperatives to ensure that the matching takes place online, but then the first meeting between the carer and the family is mediated by experts of the sector.* « This company is also engaged in advocacy efforts to change public support for LTC. *At the regulatory level, something needs to be done... I want to propose a voucher, but the family assistant regularly hired must benefit from it. This would reduce undeclared work, increasing revenue for the state coffers* (founder of Badacare).

Unlike platforms operating in other sectors, the technological element is rarely exposed to clients: »We hardly tell the family that the algorithm that makes the selection is behind it, because then maybe they get scared. They see the end of technological processes and maybe they don't realise it«. Badacare also is seeking funding to strengthen the technology: »On average, it costs us around € 62 to carry out a comprehensive search, check references and conduct a proper interview. We have identified technologies that will allow us to find intelligent solutions. And therefore, these technologies will allow us to achieve scalability with fewer resources than a traditional organisational structure.« The platform highlights the centrality of data in building its business: »We are a data-driven company. We have the data: we know that a carer has worked with Alzheimer's and from that data we have to give value to the family and generate revenue. I told people working with me: Write everything down on the platform, don't miss a single piece of data because that is gold for us.« (founder of Badacare).

The platforms explained how technology improves the process of finding care by shortening service response times: »The investment will allow us to achieve this scalability and to offer an instant experience to the customer. We call it »instant experience.« Therefore, within 30 minutes of contact, the family will already have a personalised profile available, adapted to their needs«. (Founder of Badacare)

The technology supports scalability and international expansion:

»The Italian market offers many opportunities because it has more carers than other countries; therefore, it could be an opportunity to promote cross-national labour mobility and evaluate its feasibility, considering that around 70 per cent of carers are foreigners and would have no problems moving from one country to another.« (founder of Badacare).

»I'm doing this job temporarily because also for bureaucratic reasons, since I still have to apply for citizenship, then I hope to go abroad because we know very well that salaries in Italy are very low compared to France, compared to Germany or other countries of Europe who have higher salaries doing the same job« (Carer 1, AmaliaCare, 31 years old, of Algerian descent).

More generally, the founder of this company explicitly refers to regimes present in other countries and other sectors, while highlighting the need to adapt them to the specific context.

»In the future there will be tools available to family caregivers, like with Uber you practically book a taxi from an app, there will certainly be an app ... [...] I saw that there was a platform which I liked very much. However, despite attracting a network of more than 400,000 family caregivers across the United States, it had an hourly rate. There, the model that moves the best is that, but in Italy an hourly rate would be unsustainable for families. In Italy, the reference model is recruitment through a collective agreement. So, we changed the model from an hourly rate to a search-and-hire fee, which has a fee for the recruitment and a fee for continuing to receive support« (founder of Badacare).

## 2.5 TRADE UNION INVOLVEMENT IN THE SECTOR

#### IRELAND

Trade union representation in the health and social sector in Ireland is delineated mostly along occupational lines. For the purposes of this study, SIPTU and Forsa were the most important unions, with the former representing care workers and the latter acting as representative of the local management of these grades.

The lead divisional organiser for the sector in SIPTU traced the evolution of the Home Care Support Worker grade and his union's role therein over the past 30 years from a point where shome helps were paid a nominal fee by the local health authority for daily care visits to elderly neighbours. Those involved in direct public sector provision, who are members of SIPTU, reflect the high density of union membership in the public sector workforce. However, there is no evidence of any trade union activity among care platform workers, nor any plans to focus a campaign on such workers soon. A representative from the organising unit explained the two routes to organising campaigns:

»[workers] give us a call ... and we ... figure out what it is you want to change and how you're going to do that. And then the other part of it is that we'd have kind of big strategic campaigns where we kind of look at specific sectors and say, OK, we're going to go after that.« Platform workers have not approached unions. The organisers acknowledged that there *»is no issue organising the directly employed staff*«, but organising such *»a widespread and far-flung workforce... [would be] ... literally impossible.«* The organiser drew attention to a long-running SIPTU campaign in childcare that bears similarities to domestic care, where a similar strategy of lobbying to create a joint labour committee (a body responsible for negotiating tri-partite agreements in typically low-paid sectors) could have merit. However, for this to happen *»these people need to be employees.«* Hence, while such a strategy may be useful for the care sector in general, it would have little value in terms of addressing platform work.

One of the recommendations emerging from the strategic workforce advisory group for domestic care related to the creation of an appropriate mechanism to reach agreement in the private and voluntary sector in respect of pay and pensions for domestic-support workers and healthcare assistants. Similarly, the union view is that there needs to be a right to collective bargaining, but also ways to support workers to organise: *»You can have all the legislation you want around sectoral or local bargaining, [but] if you don't have a right for workers to be able to organise, I don't see how they're going to be able to effectively exercise those rights«.* 

Successful organising of campaigns requires an ability on the part of workers to engage with each other, another feature that is limited by the nature of domestic care work carried out in private households whether through a platform or not. »What people need [is] to be able to talk to each other about being in the union. They need to be able to talk to each other about what their rates of pay are and what their issues are as well. They need to be able to hold meetings.«

One organiser from SIPTU recounted the experience of organising migrant domestic workers in the early 2000s, noting that the workers were *»very isolated*« and *»treated appallingly*«, stating that *»I don't believe too much has changed with regard to that*«. This is despite changes since then, like the passing of the Domestic Workers Convention. This organiser also felt that the sector needed stronger regulation and organised representation, noting the series of individual referrals to the Labour Court had done little to improve matters: *»A huge amount of the settlements won in the Labour Court had to be confidential … because the employers didn't want to be named and shamed. They reneged frequently … sometimes then we had to go public.*«

The organiser noted that it will take *»more than a code of practice, something robust like a Sectoral Employment Order*« to achieve change in the sector.

While trade unions have no knowledge of care platform workers, they acknowledge that the system is ripe for their introduction: »Government has shown over many years a hands-off approach when it comes to home care ... and a willingness to let the private sector provide these services and then for them to wash their hands and say: >but we're not the employer<«. One organiser noted that domestic care has always been considered »the poor cousin« and linked a political »inclination to outsource«. Another noted that while care platforms are not a major feature of the sector, those working in the sector are using other social media tools such as Facebook groups to source work. One organiser felt this could act as a precursor to formal platform work and is widely visible in social media in Ireland. There exists *»an informality in the Irish context that's maybe unique to Ireland.*« Care workers offer their services on social media in a way that *»looks like platform work… except for the absence of the app.*«

All interviewees expressed concern about the implications of further privatisation via platform working for union organising. It is a development which *we should resist«*, according to organisers in the sector, as it furthers the *wrace to the bottom«* in terms of workers' conditions, and will have *wserious future implications for the gender pay gap and the gender pension gap«*. Moreover, *wif it becomes a feature of the provision of health service at a critical mass, it will be a challenge for all of us, regardless of who we currently represent, and it will need a whole different approach«*.

### ITALY

Italy is the only European country to have bodies representing families as domestic employers. At the same time, the uniqueness of the Italian unions, which also represent pensioners, creates jurisdictional conflicts since the unions represent workers, but at the same time can also include employers among their members. While there are benefits to this approach, there are also reservations. As pointed out by De Vita and Corasaniti (2022:533), on the one hand collective bargaining has potentially created a means of limiting undeclared work and improving working conditions. The accepted family approach to care provision places limited accountability on the state in relation to adequate provision, however.

Italy was the fourth Member State of the ILO and the first among the Member States of the European Union to ratify the Convention on domestic workers (n. 189) in 2013. During the pandemic, domestic workers were excluded from the redundancy fund and the prohibition on dismissal instituted through the *Cura Italia* Decree (Legislative Decree 18, 17/03/2020). Following pressure from the ILO and trade union and employer organisations, the *Relaunch Decree* (DL 34, 05/19/2020) provided for the regularisation of workers, and income support for domestic workers of EUR 500 per month (for a maximum of two months), but only for non-cohabitants who work more than 10 hours a week.

Interviews with care workers illustrate the difficulties that exist in extending trade union representation in the sector:

»I never went to the union, not even when I worked in a factory. I have never had, even if they treat me in a way that I don't like, instead of going to the union, I say to myself »stop stop«. Because if I go to the union it doesn't mean that in the end they agree with me, even if they agree with me, tomorrow when I look for work, I can't find it anymore, be-

cause there's that one there ... it's already marked that you brought the employer to the union. When you are looking for a job they ask you for your reference, the telephone number of the person you recently worked for and if you don't have a reference, it becomes very difficult to find work. Without reference [platform name] won't even let you register.«

(carer 3, Badacare, female, 54 years old, of Nigerian origin)

Interviewed trade unionists report that they have never come into contact with platform workers in the care sector, attributing this to invisibility and fragmentation:

»It is difficult for the union to be able to collectivise a totally fragmented work. There is the problem of intercepting them, putting them together, collectivising.« (Felsa CISL – national level).

»We as a union generally act if there is demand. In the case of riders, even if the demand didn't arrive, you could see them on the street and so we went. Here, on the other hand, no one contacted us, there was no question. Then you don't meet them.« (Nidil, CGIL – territorial level).

»For us, platform work is a challenge, but we don't quite know what tools to tackle it with. We don't know how to intercept them, but then we don't even know what to propose because we can't offer a platform worker what we do in traditional situations.« (Felsa CISL – territorial level)

»A colleague of ours has started to stay on the platforms, to understand how they work. Without saying that he is a trade unionist, just to know how they work.« (Felsa CISL, national level)

Among the strategies that could be activated, the importance of raising awareness, both of workers and families, is mentioned most frequently.

»Campaigns should be made to raise awareness among workers, this has been done with riders. In this case the campaign could also involve the pensioners' union, to signal the agencies to avoid, but also to promote the agencies – even the platforms – which instead operate in compliance with the law« (Nidil, CGIL – territorial level).

Furthermore, some interviewees draw attention to the traditional levers of trade union action from advocacy to collective bargaining.

»There are different levels. The first is the regulation of platforms. we are witnessing a hyperregulation of rider platforms and a complete absence of regulation of other platforms.« (Felsa CISL, national level)

To improve working conditions, some trade unionists are open to evaluating different contracts.

From this point of view, if the person who works through the platform at least opened a VAT number, it would certainly be

a step compared to the intermediation of undeclared work. This would mean having the courage to work on a labour market welfare that does not depend on the employment contract and to ensure rights also for the VAT number« (Vivace – freelance association, CISL, national level)

Finally, unions are calling for a strengthening of public intervention in the sector in the form of economic support for families, in the promotion of intermediation tools that favour agencies that adopt ethical behaviour and in the promotion of training courses.

»We should also aim at the state level to introduce training courses in vocational schools to take care of the elderly. Let's start with three years and then later you can get to five, but you have to give this job a value, a professionalism, because our young Italians don't want to do this job« (Maids and carers office, CISL, territorial level)

### 2.6 OTHER MODELS OF CARE PROVISION

#### IRELAND

The Migrant Rights Centre Ireland (MRCI) has received funding from the European Social Fund to create sustainable employment in domestic care, in particular addressing labour disadvantages of migrant domestic care workers. The result has been the establishment of The Great Care Coop, a cooperative launched in 2020 as a registered limited company founded and led by migrant care workers. It aims to re-invest profits into the organisation to contribute to training and benefits such as pensions: »Setting up a worker-owned business seems like a natural solution to workplace exploitation, so for the last two years we have been working with a group of migrant women carers to develop a better model of home care based on excellent care and great jobs«. The founders have described the cooperative as a »political move in itself, « challenging the for-profit model of professional care (Holland, 2020).

Live-in care is also a feature in Ireland. An array of live-in care agencies operates by matching clients with live-in care, typically migrant workers, generally from eastern European countries. These agencies operate in one of two ways: either by the client paying an initial fee to the agency, which finds the carer and provides training, but thereafter pays the carer directly, or where the care agency acts as an intermediary between clients and care providers in other European countries, which then place their employees with the clients in Ireland on a posted worker basis. A posted worker is defined as >a person who, for a limited period, carries out his or her work in the territory of an EU Member State other than the state in which he or she normally works. In line with the Posted Workers Directive, Irish legislation provides that the full range of Irish employee protection legislation applies to workers posted to work in or otherwise working in the State. The invisibility of care work within the private home was already noted, while with live-in care arrangements, risks associated with this are exacerbated due to the isolated situation of such carers.

#### ITALY

In Italy, in addition to the platforms, another concern is the »platformisation« of cooperatives, which should not be confused with the literature on »platform cooperatives«. The former refers to a process of digitisation and automation of already existing cooperatives, while the literature on platform coops refers to technological start-ups that copy the digital infrastructure to existing companies, upon which they graft a cooperative governance. With respect to the »platformisation« of this service, the interviewee identifies obstacles other than the digitalisation difficulties of the third sector, including in the specifics of this profession. *»Some cooperatives have tried to get involved and manage directly a platform, but when you expand on numbers you cannot guarantee quality* (President and CEO of a non-profit employment agency).

## 2.7 ENFORCEMENT OF LABOUR RIGHTS IN THE SECTOR

#### IRELAND

The Health and Safety Authority (HSA) has stated it will target the gig economy as part of its 2022–2024 strategy, including increasing inspections in sectors with higher risks, which is where vulnerable and migrant workers are employed. In its programme of work for 2023, the HSA has stated it will consider options for influencing and enhancing engagement with sectors including the health and social care sector, though no explicit reference is made to whether that extends to domestic care.

The provision of care falls under the criteria of domestic worker and as such the Domestic Workers' Convention applies. The Workplace Relations Commission (WRC), the body responsible for labour standards enforcement in Ireland, sets out clearly the requirements for domestic workers regarding pay and working conditions. Domestic workers who feel that their employment rights have been breached can make a complaint to the WRC's Information and Customer Services, and this will be dealt with either through an Inspection or at a hearing by a WRC Adjudicator. However, the vulnerability of such workers may negate their ability to report infringements. Regulations require all employers to keep detailed records for all employees for three years. Failure to do so is a punishable offence. Such records may be required by WRC Inspectors in an inspection. However, regulatory effectiveness the context of a platform arrangement where there is no formal employment relationship either with the platform or the client receiving care, thus further complicates the capacity to regulate standards, and the effectiveness of the domestic workers convention.

## ITALY

Checks by the state to uncover labour irregularities in this sector are rather limited, among other things due to the fact that this work is carried out in a private home that is not subject to normal Labour Inspectorate checks. In 2022, inspections relating to domestic work accounted for just 1.3 per cent of total inspections (Ispettorato Nazionale del lavoro, 2022). The Labour Inspectorate officer interviewed confirmed the limitations of inspections:

»If a platform just brings together job supply and demand and is registered with the Ministry of Labour, everything is fine; if it is not registered, a minimum penalty is imposed on it, within the range of EUR 1500«. »We don't have such a timeliness that we can affect these platforms, which we know have only been operating for a couple of years. Furthermore, a family that has an illegal worker cannot be sanctioned for undeclared work because it is not an entrepreneur.

## 2.8 POSSIBLE ACTIONS

### CARE WORKER REGISTER

While there are registers of approved providers at a service/ employer level at the regional level, an individualised approach to registration would constitute a step forward in understanding and managing a growing workforce. Some lessons to be learnt from the childcare sector in Ireland may be applicable to domestic care. While creche facilities are currently subject to a register which allows parents to benefit from the National Childcare Scheme, the creation of a new register for individual childminders is being proposed to bring them under the scope of regulation, subsidies and supports over the coming years. The creation of a similar register for those who work in the domestic care sector could lead to benefits as a step towards increasing regulation and/ or professionalisation of the sector, particularly if linked with subsidies or approved payments for clients.

### COLLECTIVE BARGAINING

While conditions exist for collective bargaining for care and domestic workers in Italy, in Ireland the establishment of a Joint Labour Committee for the domestic care sector would create similar conditions for collective bargaining in the nonprofit and private sector agencies. In Germany, under the Care Staff Strengthening Act (Pflegepersonal-Stärkungsgesetz 2019), domestic care service providers have been made subject to collectively agreed pay standards. The existence of collectively bargained terms and conditions should contribute to fewer differences in employment terms between providers, particularly if ancillary issues such as travel expenses were included, which would reduce the attractiveness of self-employment or undeclared work.

Notwithstanding the ongoing debate on worker status in the platform economy, collective bargaining with care platforms could also offer a way forward. A 2023 ETUI report found that smaller platforms are more willing to engage in social dialogue, while larger players have an attitude of avoidance when it comes to collective bargaining and labour law protections (Lamannis, 2023). Therefore, in country contexts where platforms in the care sector are still only emerging, a concerted effort to achieve collective agreements in those organisations before they scale up might be advantageous. According to the ETUI report, most collective agreements with platforms in Europe have been concluded in Italy and Spain. While the most salient sector by far is food delivery, there have been a small number of agreements reached in the cleaning and grocery shopping sectors. In one arrangement (in Denmark) in the cleaning sector, after 100 hours of work for the platform, employee status is automatically acquired unless the worker opts out (llsøe, 2020).

### FUNDING MODEL REFORM

In Ireland, the current funding model has largely limited platform use, in particular LTC needs and privately paid-for care, with private agencies (directly employing carers) delivering a much greater share of care outsourced by the HSE. However, workers in private care agencies are necessarily significantly better off financially, assuming that they possess employee status. The current model waives the requirement for providers to pay travel expenses and allows them to cut visit duration. Such conditions exacerbate the stressful nature of the work and may in part incentivise working either informally or on the basis of a platform model.

In Italy, recent regulatory interventions relevant to the sector are linked to the National Plan to Combat Undeclared Work approved by the Government in 2022. The Plan has not yet been implemented, but envisages review of the »carer's allowance, « the introduction of a bonus aimed at covering part of the costs incurred for domestic workers, and simplification of casual employment contracts.

At a European level, Eurocarers, the group representing family care-givers, has expressed concern over the erosion of publicly provided care services. While the body is in favour of more choice for families in how they can arrange care, which care credits and cash transfers promote, their preference is for a funding model which facilitates this choice, but concurrently prioritises investment in high-quality public services:

### »We've never championed the idea of informal care as the solution for everything, or certainly not informal care as a good suitable replacement for good quality professional care.« (Eurocarers)

The European Care Strategy is viewed as a step forward in terms of care policy, but the extent of its success will depend on how individual Member States adopt a policy approach which facilitates the delivery of care balancing the needs of formal carers and care recipients' families.

## AWARENESS RAISING CAMPAIGNS

Coordinated and collaborative action by various actors (trade unions, informal carers, and care workers) is a potential way to improve working conditions. It was suggested in interviews with stakeholders representing both informal carers and care provider organisations that families who purchase care are often unaware of how to manage their working relationships with care workers in terms of the formal employment responsibilities. One example worth exploring is au pairs in the Irish context, where the WRC and MRCI conducted a campaign aimed at improving conditions for au pairs who have usually worked informally in exchange for accommodation and a small fee. The campaign sought to increase domestic employer compliance with labour/employment regulations, and to communicate employment rights to those involved in domestic working relationships (in particular vulnerable groups such as migrant workers). One of the issues with enforcement of labour rights in the sector is that authorities have no way of reaching such cases unless they are alerted to them. In the Irish context, it was noted in an interview with the WRC that: *»unless somebody comes to us, makes a complaint or we can find it through revenue or social protection*«. It was also noted that when selected for an inspection, there is a requirement to comply. Working in a domestic setting does not remove this expectation, although in some circumstances meetings with the employer may take place outside of the private residence.

## 2.9 CONCLUSION

The findings illustrate that care platforms have not been placed high on union agendas to date, in part due to existing problems in organising public and private sector care workers. Furthermore, the invisibility of these platform workers has meant that the workers have remained under the radar. Organisation and representation of female workers have long been discussed in the literature on union organising efforts, although more in relation to platforms. The main union focus has thus far been on male-dominated areas. Therefore, care platforms can be viewed as an area exhibiting a growing representation gap. In terms of actions that unions in other countries could learn from, in both countries unions have campaigned for changes in the funding model to address informality in the sector, but also as a reaction to declining public provision.

## RECOMMENDATIONS AND CONCLUSIONS: RAISING THE BAR – UNIONS AND THE FUTURE OF EMPLOYMENT IN DOMESTIC CARE

## 3.1 INTRODUCTION

Despite rhetoric espousing the value of care in society, conditions of employment in the domestic care sector remain poor relative to other economic sectors. Maintaining or raising standards of employment is additionally challenging wherever informal working arrangements are commonplace. The potential for platform work to increasingly become the model through which domestic care is delivered potentially creates further challenges for unions in seeking to raise standards on behalf of workers, as it adds to fragmentation of the sector. Domestic care work is already fragmented and individualised, with little opportunity for interaction among workers, even when employed by the same organisation, making it difficult to organise. Our findings suggest that unions are continuing to prioritise the organisation of domestic care workers employed in the public and non-profit sectors and by private agencies, while so far a clear strategy to actively address the increasing growth of platformbased work is lacking. Furthermore, there remains a dearth of union organisation among platform workers more generally speaking.

In this concluding section, we examine possible strategies for unions to take, regarding care platforms. We identify a dichotomy of approaches. The first approach is a complete rejection of platform work, whereby unions' approach is to attempt to address the emergence of platform work in the care sector through lobbying for broader regulation of work and employment. The second approach is once again regulatory in nature, but focused directly on the care sector. This involves unions campaigning for greater regulation in the care sector itself. The interpretation and application of the European Care Strategy is of relevance to this approach. The third approach is to accept that platform work is a growing feature of the care sector and adopt active organising strategies in response. The Directive on Platform Work – adopted by the European Council on March 11, 2024 – could be an important support for unions seeking fair treatment of workers in line with legislation.

## 3.2 REGULATING PLATFORMS

Many actors in the trade union movement question the fairness of platform-based work and view the gig economy as a threat to working conditions more broadly. A complete rejection of platforms as a model of employment may therefore seem appropriate. To turn this into a reality, trade unions' role is primarily lobbying for regulation or legislative change. In service sectors where platforms have emerged, competition for work is locally based, and unionisation rates tend to be low. Therefore, unions' lobbying role becomes more important (Koutsimpogioros et al, 2023). At national level, trade unions can be a powerful lobby group; their influence can play a role in changes to platform operational models. Maintaining a media presence through various channels is important for unions in this regard. For example, in the case of domestic work, platforms have been shown to vary their operational models in several ways in line with the demands of national regulations. They also point to the role of the media in raising awareness of the introduction of platforms. The emergence of one platform, Helpling, was extensively discussed in the media in Germany and the Netherlands, in contrast to very little media coverage being devoted to Helpling in the United Kingdom and Ireland. The authors noted that unions such as IG BAU in Germany referred specifically to Helpling when discussing the negative impact of digitalisation on employment relations. In contrast, the authors note that institutional opposition was largely absent, and unions showed little engagement with the platform in Ireland and the UK. Unions therefore need to be cognisant of changes in individual sectors where platforms are growing and use their media influence to attempt to impact the way in which platforms operate. The effectiveness of this strategy in the Netherlands was demonstrated by Helpling's decision to no longer determine the prices set for cleaning, as they risked becoming entrenched in a public relations feud with trade unions (Frenken et al 2017). Indeed, employer associations as well can be an ally of unions in seeking regulation. For example, the industry association of cleaning companies in Germany (DIRV) has criticised platforms for offering low wages, accusing them of replacing undeclared work with pseudo self-employment (Koutsimpogioros et al, 2023). A clear similarity exists between domestic cleaning work and care in this regard, with unions and established employers sharing similar views.

#### WIDER ACTIONS

While action in relation to individual platforms may be useful, an all-encompassing approach through legislation may be effective in a different way. Through their social partner role, unions can express support for changes in employment legislation that can counteract platform operations. Such changes may involve strengthening existing employment legislation and regulation, as for example in Croatia. As part of its Act on Elimination of Unregistered Work, from 2024 digital working platforms are to be recorded in the competent Ministry's register with information on issues such as (i) non-registration of the employee with mandatory social insurances, (ii) performance of work without a written employment agreement, (iii) hidden employment relationships, (iv) non-compliance with regulations on the employment of foreigners, (v) non-payment of salary add-ons and (vi) non-payment of public contributions.

While national-level changes may be possible - and here unions still have a significant say and influence – in some national contexts the possibility for achieving changes to curtail platform work is limited. Therefore, a pan-European approach to regulation offers better prospects of achieving change. Significant hope is attached to the EU Directive on Platform Work in terms of its ability to regulate the platform economy through assigning employee status to those persons working via platforms. The European Directive on Platform Work is the most prominent example of a regulatory effort to address platform work in national contexts where to date there has been little appetite to amend existing regulation of employment to create a distinction between genuine freelance work and bogus self-employment (see 5.1 of section one). Concerns remain regarding the effectiveness of such legislation in both care and domestic work when transposed into national legislation since these sectors have typically been characterised by breaches of existing employment legislation that are difficult to address. The way this is transposed nationally matters as a concern is that many domestic workers may not satisfy the requirements to be designated as employees. However, a recent case from Spain suggests that the claim of intermediary status may not exclude organisations from the presumption of employment. A court ruled that Clintu Online (which provides a range of domestic services) controlled and assigned work. Workers were therefore deemed to receive orders and instructions from Clintu and the organisation of the platform placed limits on the services they could provide to clients (Spanish Vida, 2023).<sup>33</sup> The case highlights how the claim that a company is only performing an intermediary role in the relationship between clients and workers may also be subjected to constraints in the care sector. The Directive itself also provides for tighter regulation of how algorithms used by digital platforms are applied. This includes requirements for transparency on how and when algorithms are used to manage work. The Directive gives workers the right to challenge automated decisions affecting them and ensure that there is human oversight

for significant decisions. In the context of care, the work itself may be less heavily directed by algorithms compared to areas of transport, for example. Nonetheless, algorithmic management plays a role in the matching process between clients and carers. Of importance to users is understanding how algorithms impact their visibility to clients and likelihood of being selected for work. Furthermore, requirements on sharing personal information, and maintaining active engagement with an app to access work, are concerns that care workers share with other platform workers. While the Directive offers one route to addressing platform work in care, other approaches which focus specifically on care work itself also warrant consideration.

## 3.3 CARE-SECTOR-FOCUSED ACTIVITY

Trade unions can approach the regulation of standards of employment in care by intensifying and expanding existing organising efforts specifically targeting the value of care as a public good. Care is a driver of social cohesion, sustainable growth, and gender equality. EPSU and national affiliated unions have expressed concerns at the rate of privatisation and general marketisation in the care sector. Curtailing privatisation requires lobbying for change in the face of neoliberal policies which reduce state provision of services. Many actors share the same concerns as unions in this regard. Representatives of family and unpaid carers, including Eurocarers at a European level, have expressed concern that publicly provided care services are being eroded across Europe. Care is a public good, and if private providers withdraw because it is not profitable, the absence of a statutory right to, and public provision of care will widen this care gap. Therefore, the formation of alliances of unpaid carers' associations at national level can be an important aspect in seeking policy change in care provision. Unions need to be cognisant, however, that due to the nature of current service provision many family carers operate on the basis of a mixed model of care, relying on both publicly and privately provided care, both funded and unfunded. Therefore, accessibility and affordability of care need to be prioritised in tandem with improved employment standards. Alliances of unions and family carer representatives can be an important force in raising awareness of employment standards. This encompasses rates of pay and additional benefits, the sharing of sample contracts and financial assistance information, such as tax credits for families employing a carer. Additionally, the complex nature of care provision, with intermediaries, either platforms or private agencies, facilitating live-in care arrangements, can blur the lines in relation to the duty to properly attend to the needs of employees in the employment relationship. Persons providing care need to understand who has the duty to ensure that they are safe when they work – the family or the intermediary. This is an issue regarding which unions can campaign for clarity for both workers and families.

## LESSONS FROM PREVIOUS CAMPAIGNS

Lessons can be learnt from the Better Jobs, Better Care Act in the United States, where unions formed alliances not only with family care representatives, but also with employer associations, to campaign for legislative support for better

<sup>33</sup> https://spanishvida.com/2023/07/17/company-fined-over-a-millioneuro-for-using-self-employed-workers/

funding of care provision. Currently the system of funding makes it difficult for the non-profit sector to successfully tender for care contracts. The Most Economically Advantageous Tender (MEAT) method of assessment can be used for selection, allowing the contracting party to award the contract based on parameters in the submission of tender other than merely the price. However, application of this in the care sector appears to be quite limited. Trade unions should consider actions which explicitly demonstrate how this principle has been disregarded, seeking greater use of a MEAT approach as set out in the European Care Strategy to support the rationale for sustainable care and a care-based economy. The care sector is structured so that individual states will always retain high levels of influence over service providers. This influence should be used to leverage improvements in quality care and quality employment in the sector, including the establishment of minimum income requirements and paid sick leave (based on the lessons learned from Covid-19) regardless of a worker's employment status.

Unions can further play a role lobbying for welfare and taxation reforms to specifically address aging populations and LTC needs. For example, German social security introduced an LTC insurance (Pflegeversicherung) in 1995, which has recently been reformed. Beginning on 1 July 2023, the rate of contribution to be paid is set to increase. Controversially, the legislation distinguishes between people with and without children. People with children are to pay 2.4 to 3.4 per cent depending on the number of children they have, while people without children are to be levied 4 per cent of their gross annual salary.<sup>34</sup> This is based on the fact that people without children have greater disposable income, and that children will later support aged parents, reducing their dependence on public care services, a perspective which proceeds on the assumption of family-based care to an extent. Nonetheless, investment specifically ring-fenced for LTC supports future increases in wages and staffing levels, while in many countries LTC, social and domestic work fare poorly in financial allocations when included in broader healthcare budgets. Lessons can be drawn from the German example in terms of how funding for the sector may be better managed.

Across Europe, migrant workers account for a significant, if not a majority, of the LTC workforce. Therefore, alliances with migrant rights organisations nationally and transnationally in Europe offers potential in helping trade unions reach out to workers who are often in the most vulnerable and precarious employment situations. In Ireland, previous campaigns by both MRCI and SIPTU have been useful in increasing awareness of working conditions in the sector and in increasing workers' own awareness of their rights through targeted and translated campaign materials. However, the growing prevalence of new forms of work such as live-in care, and the increasing use of posted workers, means a need for better coordination of activities on an international

scale. Coordination of trade union and migrant rights organisation across borders may be beneficial in helping people working in posted work situations better understand their employment rights and application of the Posted Worker Directives. The German Trade Union Federation's (DGB) Fair Mobility project has also highlighted live-in care workers as being particularly vulnerable to working time exploitation. In cases where caregivers are placed with families in a different country as >self-employed persons<, they are deprived of the ability to hold the assigning agency responsible for poor working conditions they may encounter.<sup>35</sup> Furthermore, the FES has drawn attention to the importance of supports for migrant workers who may be undocumented and working on platforms.<sup>36</sup> They need to be supported in attaining access to the labour market, for example by regularisation channels to prevent or fight exploitation.

Platforms tend to grow quickly and develop international presence rapidly, particularly if funding and venture capital are to support their growth. New platforms whose business is based on facilitating migrant care work are now emerging, e.g. Borderless, a workforce migration platform assisting with staff relocation in the care sector, has raised £ 2.5 million (€ 2.9 million) in a funding round led by Backed VC<sup>37</sup>. Such developments are likely to contribute to a further rise in migrant care work. At the European level, more Member States need to ratify the Domestic Workers Convention to extend protection to migrant domestic workers. Increased enforcement of the aims of the convention would go some way towards ensuring that migrant workers who sign with private employment agencies have their working rights supported across the EU. Only nine countries have implemented the convention to date - with varying degrees of success. Recently, the European Federation of Food, Agriculture and Tourism Trade Unions (EFFAT) has highlighted Belgium as an example of a country where the convention has been effective,<sup>38</sup> in part due to the introduction of a voucher-based system that has contributed to tackling undeclared domestic work by fostering greater demand for a set of domestic services through subsidised tariffs. While the process has been effective in tackling undeclared work, it is argued that the system still fails to recognise workers' qualifications and challenge the gendered and migrant nature of domestic work employment (Safuta and Camargo, 2019).

The EFFAT >A House of Dignity for Domestic Workers< Campaign called for effective pathways for recognition, valuation and professionalisation of domestic workers.<sup>39</sup> Raising the standard of employment in care is often linked to the discussion surrounding professionalisation of the sector. The Euro-

<sup>34</sup> https://support.personio.de/hc/en-us/articles/6110302747805-Statutory-Long-Term-Care-Insurance-Contributions-Difference-Between-Saxony-and-Other-Federal-States#h\_01GBA6XME4R 3Z9HQJTZ44WE87F

**<sup>35</sup>** DGB Fair Mobility: https://www.fair-labour-mobility.eu/portal/fair mobility/++co++cbe13ae2-4314-11eb-a706-001a4a160123

<sup>36</sup> https://www.epc.eu/content/PDF/2023/Regulating\_Platform\_Work\_ DP.pdf; https://library.fes.de/pdf-files/bueros/bruessel/19257.pdf

<sup>37</sup> https://www.uktech.news/medtech/borderless-20230822

<sup>38</sup> https://effat.org/wp-content/uploads/2022/09/What-can-the-EU-doto-improve-domestic-workers-conditions-EFFAT-demands.docx-pdf. pdf

<sup>39</sup> https://effat.org/a-house-of-dignity-for-domestic-workers/

pean Care Strategy places a focus on the importance of care workers' skills. However, any professionalisation or upskilling in the sector must be linked to better terms and conditions. Unions could also play an active role in determining where and with whom responsibility for professionalisation and upskilling in the sector is to be assigned. While the public sector has in place a pay scale for employees rising over time, this is largely not a feature characterising private care providers and is unclear in platforms. Unions could also campaign for an accrediting body and registration of care workers. For example, in July 2023 Sweden introduced a register for Practical Nurse grades in the care sector, a role which is now assigned a protected professional status, long sought by the Swedish municipal workers union Kommunal. The union argued that care workers should have a vocational education degree and be recognised as a profession with a standardised skillset in order to set an industry standard and facilitate regulation of the profession.

Terminology can be problematic for unions campaigning for the professionalisation of care. In domestic work, the terminology must cover a range of roles, from the provision of intimate personal care and assistance to basic household tasks. A greater differentiation in terminology is required to recognise the breadth of skills involved in domestic work. The level of care required by different individuals varies from assistance with basic instrumental activities involved in daily life and social interaction to much more intensive physical and cognitive support. In many other health and allied health professions, individual skills are developed and tailored to needs. As LTC demand grows, support for the development of a broader range of job titles and differentiated grades should be considered so that care roles are accompanied by clear progression paths.

# 3.4 EXPANDING REPRESENTATION AND ORGANISING PLATFORM-BASED CARE WORKERS

It is crucial that care workers find unions appealing. Therefore, unions must accelerate existing efforts to communicate their relevance in efforts to achieve worker agency, including for those people working in the platform economy. In other sectors such as transport and food delivery, where platform work has become ubiquitous, union activity has intensified. Unions have actively played a role at both national and European levels in seeking regulation and legislation relating to the achievement of employee status for platform workers, and have otherwise sought to engage with platform workers directly. New ways of establishing contact have become important. In Germany, Austria and France, for example, unions have set up physical spaces for riders to meet, rest or repair their bikes and achieved compensation for riders who use their own equipment.40 The perception that self-employed and freelance workers are not targets for trade union needs addressing if platform workers are to consider engaging with unions. For example, in 2019 in Belgium, the Algemeen Christelijk Vakverbond (ACV), Confédération des syndicats chrétiens (CSC) established the United Freelancers organisation to support freelancers and platform workers. Those members who join pay the same membership fees as employees, but for services tailored to platform workers' needs, including assistance in the interpretation of the platform's terms and conditions and provision of legal support in some cases.

In the Belgian example, the United Freelancers' organisation, which is part of the ACV-CSC union confederation, is able to draw on broader resources available at federal and confederation levels. This has contributed to the conclusion of collective bargaining agreements that apply to platform workers and freelancers. In Denmark as well, the 3F union and cleaning services platform Hilfr signed a collective agreement in 2018 covering those persons classified as >Super Hilfrs. Workers who choose employee status when signing up to the platform automatically become a >Super Hilfr after completing 100 hours of work on the platform (although there is an opt-out clause). The agreement includes an additional >welfare supplement< to be paid by the platform, but set aside by the workers for sickness, retirement, holidays and similar.<sup>41</sup> Likewise, in Austria, the transport and services (including health and social care) trade union Vida have focused on extending membership to freelancers and entrepreneurs through their Vidaflex initiative.42

Identifying and reaching care workers is more complex than with other platform workers given the nature of their work. However, unions should consider greater use of digital organising tools to reach workers. It was noted earlier that in the absence of care platforms, social networking sites are used as a method of both sourcing care and finding work. Online groups and online threads are also a digital domain where workers openly exchange information and build support networks. These spaces represent an opportunity for unions to increase visibility and to interact with otherwise difficult-to-reach workers.

The fragmented nature of platform work limits the capacity of care workers to collectivise organically. However, even in the absence of a sense of collective identity, unions can look for other ways to increase bargaining power. Collective bargaining rights are central to the Directive on Adequate Minimum Wages and collective bargaining coverage. The potential impact of the Directive will likely be greater in countries with low collective bargaining coverage (Pasquier, 2021) where there is a possibility to increase the use of agreements extending to areas where representation is weak. Unions have a range of interventionary steps they can take to force platforms to operate within existing collective bargaining frameworks. In Denmark and Sweden, for example, unions

<sup>41</sup> Eurofound (2021), The Danish trade union 3F (Initiative), Record number 3098, Platform Economy Database, Dublin, https://apps. eurofound.europa.eu/platformeconomydb/the-danish-trade-union-3f-103030.

**<sup>40</sup>** Social Europe (2021) https://www.socialeurope.eu/trade-unions-takeon-platform-companies-in-the-struggle-for-decent-work

<sup>42</sup> https://www.vidaflex.at/pages/unser-paket

have used tactics such as negative media campaigns and litigation to force conclusion of collective bargaining arrangements (Ilsøe and Söderqvist, 2023). While not all platforms may be amenable to collective bargaining, from a platform's perspective collective agreements can improve visibility and branding as a socially responsible actor. This may be particularly important in a sector such as care, where clients and workers form strong relational bonds.

## 3.5 CONCLUSION

While much of this report has highlighted the problems associated with digital platforms, such as the tendency toward fragmentation of labour and the impact on social protection, it should be acknowledged that platforms offer possible solutions as well. For example, the platform model also allows the emergence of >digital platforms for the public good< >not just to enhance and expand existing welfare services but also to bring into being entirely new services that can contribute to the development of a new kind of welfare state (Huws, 2020). Platforms and cooperatives share several characteristics, so a »quasi« or »hybrid« model combining the digital capabilities of one, with the locally rooted and social approach of the other, has the capacity to significantly alter the care sector for both workers and carers. For unions, being part of the development of such a model represents an opportunity, not least in terms of its potential to formalise undeclared work, where some of the most flagrant exploitation of workers' rights is to be found. However, in terms of evidence of the potential of platforms to formalise this hitherto very informal sector and to stimulate new forms of mutual governance, there remains a lack of evidence that such changes will lead to improved wages and working conditions. Care is a basic right, and the state has a role in the funding, if not direct provision of, care for its citizens. Indeed, Principle 18 of the European Pillar of Social Rights provides for the right to quality, affordable LTC services, in particular domestic care and community-based services. However, challenges lie in the delivery of this in line with Principle 5 (Secure and adaptable employment) and Principle 6 (wages that provide an adequate income set in a transparent and predictable way in accordance with national practice and the autonomy of the social partners). Care is a pressing concern and is central to the UN sustainable development goals. The issues raised in this report draw attention to the importance of Europe having a cohesive, gender-inclusive approach ensuring that accelerating digitalisation is accompanied by sustainable care and decent work in the care sector.

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