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GENDER EQUALITY IN A NEW EU CARE STRATEGY¹

RESOLUTION OF CESI'S STATUTORY COMMISSION ON WOMEN'S RIGHTS AND GENDER EQUALITY

The European Confederation of Independent Trade Unions (CESI) is a confederation of more than 40 national and European trade union organisations from over 20 European countries, with a total of more than 5 million individual members. Founded in 1990, CESI advocates improved employment conditions for workers in Europe and a strong social dimension in the EU. Most of CESI's affiliates are employed in the different fields of the European, national, regional and local public services, as well as in privatised services of general interest. As such, CESI represents numerous unions of nurses, physicians and care professionals across Europe.

CESI's statutory Commission on Women's Rights and Gender Equality broadly welcomes the initiative of the European Commission to publish new holistic EU Care Strategy to address existing and rising challenges towards accessible, affordable as well as staff-friendly and high-quality early childhood education and care and long-term care in Europe. It considers that a new EU Care Strategy is an important opportunity to advance gender equality in Europe.

According to CESI's statutory Commission, the European Commission correctly acknowledged in first consultations on a new EU Care Strategy that 90% of the formal care workforce is female and just 10% male – while working conditions in the sector tend to be relatively difficult and wages low, and that it correctly noted that that EU-wide more than 7 million women care informally for relatives while giving up on their employment and thus on wages, pension rights and career prospects in the occupations and jobs that they were trained for – as opposed to just 450 000 men.

It considers that the care sector is a societal mirror of persistent economic gender inequalities in Europe. It stresses that it is therefore of central importance to bring down gender inequalities which the care sector gives rise to, and that hence a new EU Care Strategy must feature a strong gender dimension.

CESI's statutory Commission demands that a new EU Care Strategy:

1. facilitates better **working conditions and higher pay in the care sector**. This should span to pay levels, stress and strain exposure as well as occupational health and safety standards and would benefit many women in Europe that work hard every day but are compensated with low wages, as opposed to male counterparts that tend to work in higher-paid STEM sectors.

¹ This resolution complements a previous horizontal position paper of CESI on a new EU Care Strategy, adopted in April 2022: <https://www.cesi.org/wp-content/uploads/2022/04/2022-CESI-EU-care-strategy-hearing-Written-contribution-20220425.pdf>

2. strengthens the **provision of affordable, accessible and high-quality early childhood education and care and long-term care services**. This would force less women to take on family care responsibilities at the expense of their employment. In care systems that have faced underinvestment during decades, delivering on this objective will require significant new investments in care facilities, equipment and in further staff retention and attraction. The latter goes hand in hand with the need for better working conditions and higher pay in the care sector.
3. while the demand of public care services exceeds its supply:
 - i. promotes a further **equal sharing of domestic care responsibilities between partners**. Parental leave and carer's leave rights should not be transferable from male to female partners, as the former tend to transfer their rights and stay in occupational life to the detriment of the latter. The work-life balance directive 2019/1158 which introduced a partial non-transferability of parental care among partners is an exemplary step in the right direction. An EU Care Strategy should pave the way for similar further measures at the EU and national levels.
 - ii. sketches ways to **ensure that responsibilities to provide care for children or relatives can be reconciled by flexible work arrangements and working hours** for affected workers – which are mostly women. If a leave of employment is necessary, care should be adequately compensated and be subject to equal pension credits and social security entitlements. A special consideration for single parents – often female – is especially central in this regard.
 - iii. **acts on personal household care services and in particular unregulated informal household care**. Personal household care services is often delivered by informal carers – mostly women – with little or even no professional specialisation and training. An EU Care Strategy should make unregulated personal household care services subject to adequate social protection, including health and accident insurance and statutory pension, and outline ways to professionalise care services to the benefit of the many women that deliver them. To this end, it should focus, for instance, on a better training and qualification of home-based care services, delivered e.g. by health and care professionals, and an improved recognition thereof.

In terms of implementation, CESI's statutory Commission on Women's Rights and Gender Equality proposes that the EU Care Strategy, complemented by new and revised Council Recommendations on long-term care and on early childhood education and care as well as related existing tools such as the EU Child Guarantee, should integrate **clear and measurable targets for a quality framework for affordable, accessible and quality care** which is implemented and monitored regularly, for instance as part of the European Semester and its country reports and country-specific recommendations.

In terms of financing, CESI's statutory Commission on Women's Rights and Gender Equality considers that **care services should be re-emphasised in the EU's structural and investment funds** such as the European Social Fund (ESF) or the Fund for European Aid to the Most Deprived (FEAD) as well as the recent Recovery and Resilience Facility. Moreover, it suggests that the EU should also make it easier for Member States to pursue **necessary adequate investments in care systems at the national level** without being penalised straightaway by the EU's fiscal deficit rules of the Stability and Growth Pact. The current debate about the future of the EU's economic governance framework should take care policy specifically into consideration.