Joint recommendations for the European Care Strategy regarding migrant care providers and service users

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Introduction
This document sets out some joint recommendations for the inclusion of migrants\(^1\) in the forthcoming European Care Strategy and accompanying Council recommendations,\(^2\) both as workers and providers of care as well as care service users.

With a view to supporting the full inclusion of people who are non-nationals in every part of the strategy, the document is organised around key aspects that the strategy is expected to address, namely: access to care, affordability, sustainability, quality of care, workforce, and gender aspects of care.

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1. In this document, the term ‘migrant’ is used broadly to refer to all non-nationals, regardless of their migration or residence status. As different legislation and conditions apply to EU mobile care workers and third-country national care workers, in several places specific references are made to EU mobile and non-EU migrant workers as distinct groups.

The recommendations have been developed jointly and endorsed by the following organisations: Caritas Europa, EAPN – European Anti-Poverty Network, EFFE – European Federation for Family, Employment & Home Care, EFFAT - European Federation of Food Agriculture and Tourism Trade Unions, EFSI – European Federation for Services to Individuals, Eurocarers, ERGO – European Roma Grassroots Organisations Network, Don Bosco International, FairWork (the Netherlands), FEANTSA - European Federation of National Organisations Working with the Homeless, La Strada International, Make Mothers Matter, PICUM – Platform for International Cooperation on Undocumented Migrants, UNI Europa – UNICARE, SIMI (Czech Republic), Social Platform and Red Acoge (Spain).  

General principles and key messages

- People who have non-EU nationality living in the EU must be fully considered and included in every part of the EU’s care strategy.
- The availability, accessibility, affordability and quality of health, social and long-term care, as well as early childhood education and care, are essential for all, and especially those who, as non-nationals with various statuses living in the EU, may face particular barriers in accessing care, intersectional discrimination, marginalisation and in-work poverty.
- The COVID-19 pandemic both reinforced the essential role of the care sector and exacerbated the precarity of migrant carers. Appropriate and effective measures are urgently needed.
- The forthcoming European Care Strategy should:
  - Recognise the essential role and contributions of both intra-EU mobile workers and non-EU migrant workers, including undocumented workers, in providing care in the European Union.
  - Recognise that in many cases this care is being provided undeclared or under-declared, in exploitative conditions, impacting on the rights and well-being of workers and their families. This also impacts on care service users, and contributes to unfair and unsustainable social protection systems. Decent work should be integral to definitions and priorities around sustainable and quality care systems.
  - Commit and set concrete actions to promote decent work for all care workers, regardless of their migration or residence status, including through targeted measures.
  - Commit and set concrete actions to ensure that all people living in the EU have access to quality services on the basis of need, regardless of their migration or residence status.

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3 Several of these organisations form part of an informal Stakeholder Group on migrant domestic and care work. Further joint analysis and recommendations can be found in the C189 Alliance report, Step up efforts towards decent work for Domestic workers in the EU, 10th Anniversary of ILO Domestic Workers Convention, 2011 (No. 189) European event, 28-29 June 2021, and the Working Document: Shared concerns and joint recommendations on migrant domestic and care work, February 2018 (endorsed by Afrique Culture Maroc (Morocco), Age Platform, Comité Contre l’Esclavage Moderne (France), Eurocarers, European Anti-Poverty Network (EAPN), European Association for Service Providers for Persons with Disabilities (EASPD), European Federation for Family Employment (EFFE), European Federation for Food, Agriculture and Trade (EFFAT), European Public Service Union (EPSU), European Trade Union Confederation (ETUC), FairWork (Netherlands), FEANTSA, LÉFO (Austria), Indonesian Migrant Workers’ Union (Netherlands), International Trade Union Confederation (ITUC), Latin American Women’s rights Service (United Kingdom), Migrants Rights Centre Ireland, OPZZ (Poland), FairWork Belgium (Belgium), People in Need (Czech Republic), PICUM, Red Acoge (Spain), RESPECT Network, Salvation Army EU Affairs Office, SIMI (Czech Republic), Social Platform and UNI Europa).
o Recognise and support informal carers,\textsuperscript{4} including young carers, regardless of their migration or residence status.

o Meaningfully involve representatives of care workers, including migrant carers\textsuperscript{5} - as well as those in need of care - in the development, monitoring and evaluation of care policy-making and reform, and encourage member states to do likewise.

o Encourage member states to evaluate the impacts of policies - in particular in the areas of employment, education, health and migration - on people in need of care, families, care workers and informal and formal care service provision, including through gender impact assessments.

o Encourage the use of both EU and national funds, in particular ESF+ and the Child Guarantee national action plans, to improve access, affordability and quality of care services for marginalised and disadvantaged people and families, including mobile EU and non-EU migrants.

• It is important for the European Care Strategy to address both the differences and overlap between care and non-care services needed by, and provided to, people with care needs in their homes. The strategy needs to recognise the different professional and skills profiles of care workers. This should reflect the types of care that require professional qualifications, as well as the reality that in many home care arrangements, people are providing a combination of care and housework-related personal household services.\textsuperscript{6}

**Specific recommendations**

**Access to care**

Many people living in the EU face numerous legal and practical barriers linked to their residence or migration status, that prevent or limit their access to health and social care, as well as early childhood education and care. Access to care for chronic illness, disability or other long-lasting health or care needs is highly restricted for migrants with a restricted or irregular status, in many EU countries.

EU mobile citizens and non-EU migrants on certain types of residence permits risk their migration or residence status being revoked or not renewed as a result of accessing care-related welfare services and benefits. For example, the vague definition of ‘unreasonable burden on the social assistance system of the host Member State’ in the EU’s Free Movement Directive\textsuperscript{7} provides a wide margin of interpretation for Member States to withdraw from an EU citizen and their family members their right of residence in another EU member state. This prevents many destitute mobile EU citizens from seeking care services, as they may risk expulsion from the territory as a result.

Many others are directly considered ineligible for various social benefits and subsidies, including those that are linked to income assessment and/or contributions, even when working. This is particularly the case when on short-term work permits, certain dependent residence permits, and undocumented.

\textsuperscript{4} Eurocarers defines an informal carer as a person who provides – usually – unpaid care to someone with a chronic illness, disability or other long-lasting health or care need, outside a professional or formal framework.

\textsuperscript{5} This will involve engaging with trade unions, NGOs, migrant worker or community-led organisations.


\textsuperscript{7} Article 14.1 of Directive 2004/38 of 29 April 2004 on the right of citizens of the Union and their family members to move and reside freely within the territory of the Member States.
Practical barriers arise, for example, from administrative requirements and procedures, costs, language barriers, lack of culturally appropriate services, lack of familiarity with available services, fear of immigration enforcement, and racial and ethnic discrimination.

**Key actions:**

- European Commission (EC) and Member States (MS) to ensure the legal entitlements to, availability and accessibility in practice of a viable range of care options throughout the lifecycle - including early childhood education and care and long-term care - for marginalised groups of residents, including EU mobile citizens and migrants, regardless of migration or residence status. Accessing care-related welfare services and benefits should not be a reason to withdraw residence rights or permits. Targets and indicators on access to care should be disaggregated to highlight levels of access for particularly marginalised groups.

- EC and MS to ensure – including through use of EU funds - the provision of accessible and quality care on the basis of needs and preferences, without discrimination, by removing barriers to access services, and through targeted measures to support full inclusion of people from marginalised communities.

- EC and MS to develop and apply family-friendly policies, that facilitate work-family life balance, and enable, support and recognise the value of family care work. This should include, in particular:
  
  o A universal and non-discriminatory approach to child benefits, where families with a low income should receive an increased amount of such an allowance, regardless of migration or residence status;

  o Provision of sufficient and affordable childcare facilities;

  o Full application and implementation of maternity,aternity, parental and carers’ leave rights, at least as set out in the ‘Pregnant Workers Directive’ and ‘Work-Life Balance Directive’, to all workers, including when working undeclared and/or irregularly;

  o Additionally, for carers’ leave, ensuring income compensation during longer periods of leave for care duties; and considering the time spent in informal care as eligible for the calculation of pension rights.

**Affordability**

Data suggests that non-nationals, both EU mobile citizens and non-EU migrants are among those at risk of poverty or social exclusion. Within this context, the cost of care services may make it impossible for many migrants to access them.

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8 This directive refers to ‘pregnant workers’, ‘workers who have recently given birth


For example, cost is the main barrier to access formal childcare services throughout the EU, especially before the age of three,\(^{11}\) with on average 16% of families citing financial reasons for not using it and, on average, 27.8% of families having difficulties affording formal childcare services in 2016.\(^{12}\) Since families with a migrant background and especially undocumented families live at greater risk of poverty, we can expect affordability to be an even greater precondition for them to access it.

Furthermore, affordability of care services should be seen both from the perspective of access and social rights for those in need of care, and of care workers. For those in need of care, choice and the ability to access formal care is highly constrained by income and need. In reality, costs of care services are often being cut through exploitation of mobile and migrant care workers in community and home care settings. The care that is affordable for people receiving care must provide formal and decent pay and working conditions for workers (for more see section on workforce).

**Key actions:**

- MS to invest – including through use of EU funds - in the provision of public services and subsidised, well-regulated private service provision. The goal of investments should be to ensure proper social protection for those needing care and those working in the sector, by supporting individuals and families to access affordable and quality domestic and care services while meeting the real costs of the services.

- MS to take specific measures to improve affordability of care services for low-income individuals and families, including migrants. MS to ensure effective and free access to high quality early childhood education and care for all children, including by addressing financial barriers, as foreseen by the European Child Guarantee. To ensure all migrant children and families can benefit, financial barriers should not only be tackled through subsidies for new parents or tax breaks for families.

**Sustainability**

A sustainable care system has to centre labour rights and address reasons for undeclared work, including aspects specifically related to migrant care workers (see section on Workforce).

Furthermore, important shifts in the way care provision is organised, to more care in the community and home, need to be made sustainable, in a way that provides choices, independence, autonomy and quality care to people in need of care, alongside decent work for care workers. Regulation has to find ways to respond to the reality of homes as places of employment and to address the risks of undeclared work and labour abuses, while respecting individuals’ rights to privacy.

**Key actions:**

- EC to encourage MS to implement preventative and compliance-oriented measures, reducing the cost and the complexity of hiring a domestic and care worker, as drivers for informality in the care sector. It includes – inter alia – measures supporting employers to declare work, simplifying procedures (e.g. digital registrations, social vouchers) or removal of threshold

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\(^{11}\) European Commission, 2019, *Eurydice Report: Key Data on Early Childhood Education and Care in Europe*

\(^{12}\) European Commission, 2018, Report from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on the development of childcare facilities for young children with a view to increase female labour participation, strike a work-life balance for working parents and bring about sustainable and inclusive growth in Europe (the “Barcelona objectives”).
provisions (and other legal sources of exclusion), as well as address work permit procedures (see more below under Workforce).

- EC to encourage mutual learning among MS on measures to ensure the effectiveness of labour inspectors’ mandate in ensuring decent work for care workers operating in private homes. As such, labour inspectorates should aim at both prevention and enforcement. Promoting compliance is broader than access to households (i.e. incentives, dissemination of information and precise enforcement of sanctions should also be considered). Access of labour inspectors to private homes when they are a place of employment, for example through protocols to obtain prior consent when issuing work permits for planned and unannounced inspections on terms which respect privacy and family life, should be ensured in cases where it is useful and appropriate. Others measures which enable isolated care workers to speak with relevant authorities in a safe environment and without the presence of their employers, should also be put in place.

- EC to acknowledge the principle of a strict firewall between the duties of labour inspectors and immigration enforcement (no role to enforce immigration law or report on immigration status, nor joint inspections with authorities who carry out immigration enforcement), and ensure EU legal standards and policy enable and promote this separation of duties.\(^\text{13}\)

### Quality of care

Decent work should be seen as an integral aspect of the quality of care in the European Care Strategy. This is already reflected in the European Quality Framework for early childhood education and care,\(^\text{14}\) bringing together the perspectives of carers and people provided with care. For this, care workers must be recognised and appreciated, and care must be provided in a way that is respectful and empowering for those receiving care, including for people with long-term care needs.

Europe must promote a positive appreciation of the entire care sector and the skills and competencies of both informal carers and care workers in providing quality care. Decent remuneration and working conditions for care workers and income support and access to social rights for informal carers, as well as support to develop appropriate skills, recognition of skills, professional recognition, training and career development for the care workforce, including for migrant workers and informal carers, are key to enhancing the quality of care.

### Key actions for the strategy:

- EC and MS to draw on the EU Skills Agenda to ensure further skilling and upskilling of care workers, and provide publicly-subsidised opportunities for all carers – including migrant informal carers and care workers - to participate in vocational education and training and gain qualifications.

- EC and MS to facilitate recognition and certification of social, technical, linguistic and transcultural competencies and skills acquired, including for informal carers as well as all care workers.

- EC and MS to develop quality assurance systems for monitoring care services, including indicators on decent work, and involving care service users, care workers and informal carers;

\(^{13}\) With reference in particular to the Employers’ Sanctions Directive, the Anti-Trafficking framework, and the Return Directive.

as well as to implement the European Quality Framework for early childhood education and care as developed by the European Council.\textsuperscript{15}

\textbf{Workforce}

Mobile and migrant care workers

Currently labour shortages in care and the lack of available and affordable formal care options are being met by precarious intra-EU mobile or non-EU migrant workers – often working as domestic workers or au pairs, without permits, social protection, or professional support. Major challenges include exploitative working conditions and pay; abusive recruitment practices and employment arrangements; short-term contracts and work permits; dependence of care workers on employers or agencies for housing as well as employment;\textsuperscript{16} and restrictive labour migration policies that do not recognise community and home care work as eligible occupations in general work permit schemes, or provide precarious and dependent permits that tie workers to particular employment relationships.

\textbf{Labour rights violations}

Undeclared work, underpayment or non-payment of wages, and unpaid overtime and on-call hours are common. The sector is already characterised by low wages, with many care workers receiving below the median wage even when paid according to collective bargaining agreements or statutory minimum wages.

Live-in carers are particularly at risk of extreme working and on-call hours without adequate privacy, rest periods and holidays, as well as isolation. This is particularly the case in 24-hour elderly care provided by live-in care workers, whether temporary cross-border EU workers or third-country nationals, where workers are always on call, with lack of respect for breaks, lack of private life, and on-call hours unpaid. Care workers may also be required to take on tasks beyond their job and training, such as carrying out domestic work for other relatives and certain health care treatments. Private recruitment agencies are often involved in organising the rotation of care workers in and out of these exploitative conditions.\textsuperscript{17}

Lack of organisation of workers in the sector, in particular those working in the home and/or mobile and migrant workers poses an additional challenge to collective bargaining and improvements of conditions in the sector.

\textbf{Restrictive migration and work permit policies}

When an individual’s residence in a country is dependent on a particular employer, it drastically limits their ability in case of a dispute to insist on fair pay and working conditions and challenge contract substitution and violations, which can create the conditions for exploitation. If their employer fires them, they have very limited possibilities to stay in the country, as the risks are too high. They will likely also be unable to recover unpaid wages that are due by their employer. Risks of facing immigration enforcement when using labour complaints mechanisms, in particular due to

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\textsuperscript{16} Under the ETHOS classification, care workers in employer-provided and insecure housing are considered homelessness (FEANTSA (2006) Taking stock: ETHOS (European Typology on Homelessness and housing exclusion)).

\textsuperscript{17} See e.g. Amnesty International, 2021, ‘\textit{We just want some rights! Migrant care workers denied rights in Austria}’; N. Katona & A. Melegh (eds.), 2021, Towards a scarcity of care? Tensions and contradictions in transnational elderly care systems in central and Eastern Europe, Friedrich Ebert Stiftung.
reporting obligations on labour inspectorates and joint inspections, often prevent workers whose status is precarious or undocumented from exercising their labour rights.

Short-term work arrangements and permits are equally problematic; even when workers have labour rights protections, the short time period, dependence on their employer – often for housing as well as income - and isolated living and working conditions, make it very difficult for workers to get access to information, make contact with support organisations, familiarise themselves with administrative and legal procedures, join a trade union, organise and bargain collectively, or revendicate their rights through formal complaints mechanisms.  

When workers have temporary and precarious permits, they are also often unable to bring their family members, or do not have enough stability in order to do so, creating challenges for transnational caring and fulfilment of care needs of family members in countries of origin. On a structural level, where large numbers of care workers are recruited from particular regions or countries, it can lead to care gaps in those regions and countries.

Once working irregularly, there are only a few countries that provide possibilities for people to regularise their employment and access work permits from within the country. Regularisation and status resolution are primary concerns for migrant care workers and their families.

Complex rules, employer-led and dependent immigration procedures and short-terms permits also pose challenges for employers, particularly when the employer is a household or individual in need of care.

**Key actions:**

**To improve working conditions and pay**

- EC and MS to ensure full application of all employment regulations, including the ‘Working Time Directive’ and proposed Directive on adequate minimum wages, to all care workers, including domestic workers.  
- MS to ratify the ILO Domestic Workers Convention (no. 189) and ensure its full implementation.  
- EC and MS to facilitate the recognition of mobile EU and non-EU migrant care workers in factual employment relationships as ‘workers’ for the purpose of labour rights and social protection.  
- MS to ensure enforcement of labour standards to all workers in the sector, regardless of their migration or residence status, work arrangements (live-in, live-out, single or multiple employers), employment relationship (placement agencies, provider organisations, contract with the end-users or domestic workers operating as self-employed). This must include, in particular, providing information and effective complaints mechanisms that enable workers

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18 C.f. PICUM, *Designing labour migration policies to promote decent work*, 2021.
19 Including applicable ILO Conventions, such as: C87 on Freedom of Association and Protection of the Right to Organise; C98 on the Right to Organise and Collective Bargaining; C29 on Forced Labour; C105 on the Abolition of Forced Labour; C138 on Minimum Age; C182 on the Worst Forms of Child Labour; C100 on Equal Remuneration; C111 on Discrimination (Employment and Occupation); C111 on Discrimination (Employment and Occupation); C135 on Workers’ Representatives.
20 Directive 2003/88/EC.
21 For more information, see e.g. FEANTSA, 2019, *The “working poor” and EU free movement: the notion of “worker” in the context of low-wage and low-hour employment*; PICUM, 2022 (forthcoming), Guide to Undocumented Workers’ Rights at Work under International and EU Law.
to know their rights, file a complaint and access remedies without any immigration enforcement consequences. EC to ensure EU legal standards and policy enable and promote such mechanisms.  

- EC and MS to promote social dialogue and national action plans to increase freedom of association and collective bargaining coverage to improve conditions and wages for care workers, including home care workers, and ensure that sectoral social dialogue includes migrant care workers.

- EC and MS to foster the organisation of care workers and care employers, including by using ESF+ and by investing in worker organisations specifically working to provide information and organise with community and home care providers, including specific outreach and counselling to migrant workers.

- MS to take specific measures to address the precarious conditions of EU mobile and migrant care workers. Measures should aim to:
  
  o Facilitate employment to be declared and ensure insurance and social protection coverage.
  o Ensure that any temporary work arrangements are entirely voluntary and that other longer-term work arrangements are available, in the interests of both care workers and care service users.
  o Include checks to ensure labour contracts meet labour standards - including regarding working time (including on-call time, rest periods, free time and holidays and corresponding salaries) and salary (including any deductions) – and are provided in a language the worker understands, as well as safeguards against contract substitution and violations.
  o Systematically provide information to care workers about their rights, support organisations and mechanisms for complaints and redress.
  o Include stringent checks of the suitability and arrangements around employer-provided accommodation, and ensure alternative independent accommodation is available when needed, regardless of residence or migration status.

To improve international recruitment of workers

- MS to recognise the demand for labour force in the sector, by ensuring that domestic and community and home care work are considered eligible under general work permit schemes for admission for people from outside of the EU.

- MS to ensure that the permits granted promote decent work and social inclusion. In addition to the minimum standards set out in EU law, key aspects include:
  
  o the issuing of renewable permits of reasonable initial duration (2 years is considered good practice);
equal treatment and rights, including the right to bring family members and social protection (including portability);

- real possibilities to change employer and status, including time to be unemployed;
- pathways to settled status and citizenship.

- EC to seek to strengthen minimum standards set out in EU law in reform of the Single Permit Directive.
- MS to implement schemes for regularisation of workers currently performing these jobs with irregular or precarious status, ensuring autonomy of workers and mitigating risks of exploitation, as well as regularisation of their immediate family members.
- EC and MS to elaborate a ratio of care workers per population size, which could be used as an indicator for investment, funding and training.
- EC to explore regulation and monitoring of recruitment and au pair agencies at EU level, including a role for the European Labour Authority.

Informal carers

The contribution of informal carers constitutes a great resource for our society, but their role is not always recognised, nor adequately supported. Delivering a wide range of care and support services, as well as emotional support, carers often offer the most comprehensive and desirable option for people in need of care. Caring for a loved one can be a source of great personal satisfaction but it does create its own set of challenges. On a structural level, informal care often fills the gaps in public service provision, and cannot be a substitute for the provision of professional and publicly-subsidised care services. On an individual level, challenges include physical and mental health problems, lack of choice with regards to the intensity and duration of the caring role, lack of professional support and isolation. Informal carers who are migrants can be particularly vulnerable, when these challenges layer on and intersect with, in particular, marginalisation, isolation, limited social networks, lack of fluency in the language of the country, precarious working conditions, lack of familiarity with the care system and support available and/or discrimination and restricted access to public services and social supports, among others.

Key actions for the strategy:

- EC and MS to design a comprehensive framework to support all informal carers in all aspects of their life, including access to information, training, respite care, counselling, health prevention, work-care balance, financial support, and access to complementary care services.

- MS to develop measures to provide targeted support to informal carers of migrant origin.

Gendered aspects of care

Many of the issues regarding lack of investment and poor working conditions in the sector are linked to pervasive challenges to women’s empowerment, gender stereotypes and discrimination, including perceptions of care work as “women’s work”. These are perpetuated by the continued
gender imbalance and high proportion of migrant women workers recruited into precarious conditions in the sector. Women care workers also face risks of gender-specific labour rights violations and violence, particularly when working in the home. As racialised women, often with precarious migration or residence status, migrant women workers face intersectional discrimination and risks of exploitation, abuse and other violations of their rights.

At the same time, migrant women care workers are also carers for their own families. The disproportionate share of care responsibilities on women is also a reality for migrant women. Barriers to access early childhood education and care, long working hours and low wages, create specific challenges for parents to manage childcare as well as children’s education, well-being and development. If family members have long-term care needs, migrant women may also need to act as informal carers, in particular if there are barriers to access services and supports linked to migration or residence status, a particular issue for undocumented families.

Further, as mentioned above, migrant care workers are often unable to migrate with their families. At the same time, they may be unable to visit their families, including their children, due to exploitative working conditions, and/or if their status is irregular. While migrant workers nonetheless contribute to and participate in the care of children and other family members abroad, when family separation is not a choice, it creates significant challenges for care responsibilities, harms well-being and interferes with the right to family life.

**Key actions:**

- EC and MS to invest in and reform the care sector - to recognise the essential contribution of this sector and to ensure decent work for all carers, including migrant workers - as a fundamental pillar of policies and actions to promote gender equality.
- EC and MS to support fair sharing of care responsibilities through work-life balance, fiscal and pension policies.
- EC and MS to support civil society organisations and trade unions to develop awareness-raising campaigns to address gender and racial stereotypes and discrimination against home care workers, including migrant workers.
- EC and MS to address gender-based violence against migrant domestic and care workers through policies on victims’ rights, gender-based violence and gender equality, including through safe reporting policies and protocols and procedures to access secure residence status.
- MS to ratify the ILO Violence and Harassment Convention (no. 190) and ensure its full implementation.
- EC to underline the importance for migrant carers being able to migrate with their families if they wish to, and enjoy work-life balance, well-being and family unity. In consultation with migrant worker organisations, EC and MS to develop systems to support transnational care networks and portability of social rights.