



An analysis of Personal and Household Services to support work life balance for working parents and carers

Synthesis Report
ECE Thematic Review 2018
April 2018

Written by Anna Manoudi, Tina Weber,
David Scott and Jo Hawley Woodall, ICF
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Contact: Patricia Pedelabat

E-mail: patricia.pedelabat@ec.europa.eu

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Directorate-General for Employment, Social Affairs and Inclusion
European Centre of Expertise (ECE)

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GLOSSARY

ALMP	Active Labour Market Policy
CC	Childcare
EQLS	Eurofound European Quality of Life Survey
FTE	Full-time Equivalent
ICT	Information and Communication Technologies
LFS	Labour Force Survey
LTC	Long Term Care
MS	Member State
PHS	Personal and Household Services
SVS	Service voucher scheme (Belgium)
UDW	Undeclared Work

Executive Summary

The Commission is strongly committed to removing obstacles to the participation of women in the labour market, to enable parents and others with caring responsibilities to better balance their work and family lives and encourage a more equal sharing of caring responsibilities between women and men.

One way of achieving this is by developing the Personal and Household Services (PHS) sector. PHS covers 'a broad range of activities that contribute to well-being at home of families and individuals: child care, long-term care for the elderly and for persons with disabilities, cleaning, remedial classes, home repairs, gardening, ICT support, etc.' (European Commission, 2012).

When households purchase services from the PHS sector, women (who currently perform the bulk of household tasks) may benefit from time gains and subsequently take-up work, work longer hours, or find better work-life balance. Also, supporting the PHS sector, for example by improving the quality and standards of employment in the sector, may help the PHS sector grow and increase employment opportunities within it (currently many employees in the PHS sector are women).

The present review examines existing policies and tools to promote uptake of PHS in 12 EU Member States (MS): Austria, Belgium, Cyprus, Denmark, France, Germany, Ireland, Italy, the Netherlands, Portugal, Spain, Sweden. These countries are covered on the basis that they have relevant schemes in place or under development. The scope of this review is limited to PHS services provided at home (both care and non-care). Institutionalised care, provided by public welfare state arrangements such as day-care for small children or nursing homes for the elderly, are not included.

Employment in PHS in the EU-28

To approximate the PHS sector, two sectors are traditionally taken into account: social work without accommodation and activities of households as employers of domestic personnel. Between 2014 and 2016, employment in 'social work without accommodation' experienced an increase of 3 % at the EU-28 level. Employment for 'social work activities without accommodation' is dominated by women and the age group of 25-49 year-olds, while vacancies in the PHS sector are growing. However, employment in terms of 'activities of households as employers of domestic personnel' saw a 7 % decrease.

Work-life balance for the EU-28 appears to have declined between 2011 and 2016 (Eurofound, EQLS data). The EQLS shows that for the EU-28, 44 % of women and 30 % of men find it difficult to combine paid work with care responsibilities.

Main measures put in place to support PHS in 12 EU Member States

In the 12 countries covered by this review, PHS is generally not defined in law (except for France and Portugal). Measures to support the development of PHS differ regarding the types of activities they support and their goals. The promotion of PHS often focusses on addressing the challenges posed by demographic and societal change, moreover the promotion of non-care PHS links to improving the quality of employment and tackling undeclared work in the PHS sector.

For long-term, homecare services and childcare services, many of the country policies are part of wider welfare state provision. Often, therefore, delivery is based on socio-demographic status. Home help and domestic services such as cleaning and gardening are more likely to be supported through fiscal advantages and/or

voucher schemes that subsidise the take up of such services, particularly where they are intended to support the labour market integration of women, or combatting the undeclared economy, rather than meeting basic needs.

Impact of measures

Benefits from sustainable strategies promoting PHS include:

- Formalisation of pre-existing jobs previously undeclared;
- Creation of new jobs – but this depends on education and skill levels in each country: countries with generally low levels of education and skills are more likely to experience both the job creating capacity of PHS and the opportunities they offer to more skilled workers to trade care for a good job;
- Improvements in work-life balance.

Meanwhile, the impact of PHS support measures is hindered by the fact that many jobs in the PHS sector are low-paid and low-skilled, mostly taken up by women and newly arrived migrants.

Quality of jobs in PHS

Jobs created in PHS can be of low quality, expressed as low income, high flexibility requirements and psychological or health-related burdens. Such working conditions are not just an obstacle for work-life balance, they are also a barrier to attracting new (qualified) applicants to the PHS sector. Exploiting the employment potential of PHS needs to be considered both in relation to concerns about the quality of jobs and the quality of services provided.

Migrant workers in PHS

The PHS sector is dominated by women and migrants, while many foreign workers work undeclared in PHS. While there is evidence in some countries that migrant female labour in PHS does indeed contribute to increased working hours for women, there are also concerns around the working conditions they face and around the fact that their status is often not regularised.

Undeclared economy in the PHS sector

Undeclared work is prevalent in PHS, varying between an estimated 70 % for some countries to 15 % in others, making it difficult to estimate the actual size of the sector. Economic, social and cultural reasons behind high rates of undeclared work in PHS include the difference in price between the declared and undeclared economy, lack of transparency in the market, attitudes towards payment of taxes, and the circumstances of those who undertake undeclared work (e.g. undocumented migrants, as mentioned above). Services provided by undeclared workers often cost less than work carried out under a formal arrangement and a high tax or fiscal wedge can attract workers into undeclared work.

In some countries where undeclared work is significant in PHS, there have been efforts to transform this into formal employment, notably via voucher schemes. In Denmark and Sweden, tax deduction schemes supporting the purchase of household services were used to tackle undeclared work. One barrier to such efforts has been lack of remit for enforcement authorities to enter private households for inspections.

Difficulties faced by families in relation to work-life balance

The difficulties faced by families in achieving work-life balance can be summarised as difficulties in reconciling work with:

- Long-term care responsibilities – here, solutions can include long-term care leave arrangements.
- Caring for small children - solutions could be parental leave for fathers and availability of childcare for small children (younger than 3 years old).
- Securing quality time with children because of house chores - financial support for PHS could be a solution.
- Gendered division of unpaid care work and house work, where women bear most of the burden of care and house work - reversible time options and flexible leave systems with full employment guarantees throughout their life could help workers adapt their working time to various family and social commitments and secure their employment trajectories across the life course.
- Precariousness, i.e. temporary contracts that do not offer maternity leave.

How employers support their workers to obtain PHS

Financial support from employers for their workers to purchase PHS appears relatively limited. Examples of this were only identified in France, Italy and Spain.

Non-financial support provided by employers to their employees include leave arrangements, flexible working arrangements and national-level guidance and recommendations.

Emergence of new actors in PHS

Several countries, including Austria, Germany, Denmark and Ireland, report rapidly growing activity in the so-called platform economy, where online platforms match employers and workers in PHS-related occupations such as cleaning, catering, childcare/supervision, handicraft and home repair activities. The use of work exchange platforms is part of more general developments where more of the workforce are self-employed and freelance, as noted in Denmark and France.

Recommendations include:

- Continue research projects, e.g. in the field of working conditions, in the formal or informal market and in new forms of work.
- Continue efforts to promote professionalisation in PHS, e.g. by implementing minimum standards or establishing further training programmes for PHS workers thereby increasing the quality of services performed. If this happens, demand for good quality PHS may be raised and the willingness to pay for better services increased. At the same time, this would also help to ameliorate working conditions for PHS workers.
- Develop national (or regional) approaches to increase the use of PHS. These programmes need to be carefully evaluated both in economic terms (regarding their efficiency in creating new jobs, their cost-effectiveness) and in social terms (as regards their impact on social cohesion and inequalities).
- Involve employers in PHS provision. Employers could play a much more prominent role in supporting PHS consumption by their employees.

1 Introduction

Although the employment rates of women and older workers have increased substantially recently, there is still room to enhance these rates and the numbers of hours worked. Against the background of demographic change and labour shortages, increasing the volume of labour supply has become more important for politicians in the recent past. Care and family responsibilities are still an important barrier for not taking up employment or extending working hours.

The European Pillar of Social Rights emphasises 'the need to foster proactively equality between women and men through positive action in all areas ... The provisions on gender equality focus in particular on participation in the labour market'.

In the April 2017 Communication COM (2017) 252 'An initiative to support work life balance for working parents and carers', the Commission is strongly committed to removing obstacles to the participation of women in the labour market, by enabling parents and others with caring responsibilities to better balance their work and family lives and by encouraging fairer sharing of caring responsibilities between women and men. The Communication cites a range of ways to facilitate labour-market participation for those (predominantly women) who currently take on household responsibilities. It addresses, particularly, childcare and long-term care, which are a part of personal and household services (PHS).

At European level, PHS have been defined as services covering 'a broad range of activities that contribute to well-being at home of families and individuals: child care (CC), long term care (LTC) for the elderly and for persons with disabilities, cleaning, remedial classes, home repairs, gardening, ICT support, etc.' (European Commission, 2012). Another converging approach used by the European Foundation to improve living and working conditions insists on the economic mechanisms underpinning the development of these services and are a driving force for creating jobs. However, at national level in the EU, there are different definitions of what PHS covers, depending on the public policies that operate in this field. The great variety in national definitions immediately results in major difficulties in measuring the size and extent of the sector. However, a common approach is that outsourcing of care and household duties to PHS is increasingly seen as an instrument to support private households in their efforts to reconcile family, care responsibilities, and working life. Outsourcing these tasks results in time gains that can be used to take up work, work longer hours, or increase work and life quality.

Supporting PHS could therefore help to improve gaps in the supply of institutional care (child care, elderly care). In recent years, institutional childcare has been expanded, but there are still gaps in quantity and around flexible working hours. A recent COFACE (2017), report also finds that 80 % of care work in Europe still falls on family carers.

PHS could also help reduce inequalities around the division of unpaid housework. There have been some improvements in gender equality during recent years, but traditional role models (such as the male breadwinner model and high shares of part-time working women) and inequalities (gender wage gap) still prevail. While the promotion of PHS might not help to overcome traditional role models directly, it might lift some of the burden of household and care duties from women in households with traditional gender role models.

Promoting PHS quality and standards can help to increase demand for PHS services and to combat low work satisfaction that workers in this sector often experience.

As outlined in the Germany country article, but also true for many workers in the PHS sector throughout Europe, employment in the PHS sector can be connected with socio-political problems and precarious employment conditions, while the incidence of undeclared work is high in several EU Member States (MS). Tackling the undeclared economy is not only important in raising working standards, but also because undeclared work leads to foregone tax payments. The financial promotion of PHS might make these services more affordable for private households which in turn would help to combat the undeclared economy. Combating undeclared work and promoting the professionalisation of the PHS sector is also essential to improve the willingness of households to pay for high quality services that the undeclared economy might not be able to provide.

The present review examines existing policies and tools to promote uptake of PHS in 12 countries: Austria, Belgium, Cyprus, Denmark, France, Germany, Ireland, Italy, the Netherlands, Portugal, Spain, Sweden. The 12 Member States are covered on the basis that they have relevant schemes in place or under development¹. The discussion in the country articles is limited to services provided at home (both care and non-care) called PHS. Therefore, institutionalised care provided by public welfare state arrangements such as nurseries and day-care for small children, kindergarten and nursing homes for the elderly are not included in the scope of this synthesis and the 12 country articles.

This synthesis report starts with a brief presentation of data on employment in PHS and work-life balance indicators in the EU-28 (section 2), continues with a mapping of initiatives supporting PHS in the 12 Member States covered by this Review (section 3). The synthesis then goes on to discuss available evidence on the impact of measures supporting PHS on employment and work-life balance (section 4), as well as issues such as the quality of jobs in PHS (section 5), the position of migrant workers in PHS (section 6), the importance of the undeclared economy in the PHS sector (section 7), an overview of the difficulties faced by families in relation to work-life balance (section 8) and how employers support their employees in obtaining PHS (section 9).

2 Employment in PHS in the EU-28

This section offers an overview of employment in PHS in the EU-28 and on work-life balance indicators in the EU-28, covering:

- Country variation in employment in the PHS sector over time (in the sectors of 'social work activities without accommodation' and 'activities of households as employers of domestic personnel')
- Employment by gender and by age
- Job vacancy rates in the broader human health and social work activities
- Variation in work-life balance based on the summary indicator of work-life balance from the Eurofound comparative study based on the European Quality of Life Survey

¹ The present report complements a 2015 EEPO Thematic Review (synthesis report and six 6 country reports for the following countries: BE, FI, FR, DE, IT, NL). See: Farvaque, N. (2015).

- People caring for disabled or infirm family members
- People finding it difficult to combine paid work and caring responsibilities.

2.1 Size and character of employment in the PHS sector

From a statistical point of view, employment in the personal and household services (PHS) sector can be measured by the Eurostat NACE (the statistical classification of economic activities in the European Community), categories of 'social work without accommodation' (NACE 88) and 'households as employer of domestic personnel' (NACE 97). However, these data need to be taken with caution as personal and household services may encompass activities classified in different NACE sectors. The definition of 'personal and household services' may also differ from one country to another and there is no common definition of the sector². Both statistical categories correspond to very distinct social constructions.

A first approach can compare the volume of employment in each of these categories. The figure below shows the size of both data categories in the EU-28 Member States indicating the overall size of the PHS sector in terms of employment. The countries are ranked by the numbers employed in social work without accommodation.

France has the largest employment in the PHS sector, with a very large number (1.3 million people) employed in social work without accommodation. Germany and the UK also have high employment in this category, much higher than the next ranking country, the Netherlands.

In most cases, employment for social work without accommodation is higher than employment for households as employer of domestic personnel. This is not the case in Spain, Italy, Portugal, Romania, Greece and Cyprus where the category of households as employer of domestic personnel is larger. For Spain (626 000) and Italy (733 000), employment for households as employer of domestic personnel is much larger and by far the largest in the EU-28.

Between 2014 and 2016, employment in social work without accommodation experienced an increase of 3 % at the EU-28 level. This represents more than 5.2 million employees in the EU. The rate of change is very variable by different countries. As shown in the figure A1 in Annex, employment in social work activities without accommodation has increased in 19 of the EU-28 countries. It has decreased or stayed the same in only nine countries, although the rate of decrease is relatively small in all but Slovenia (-24 %) and Estonia (-33 %).

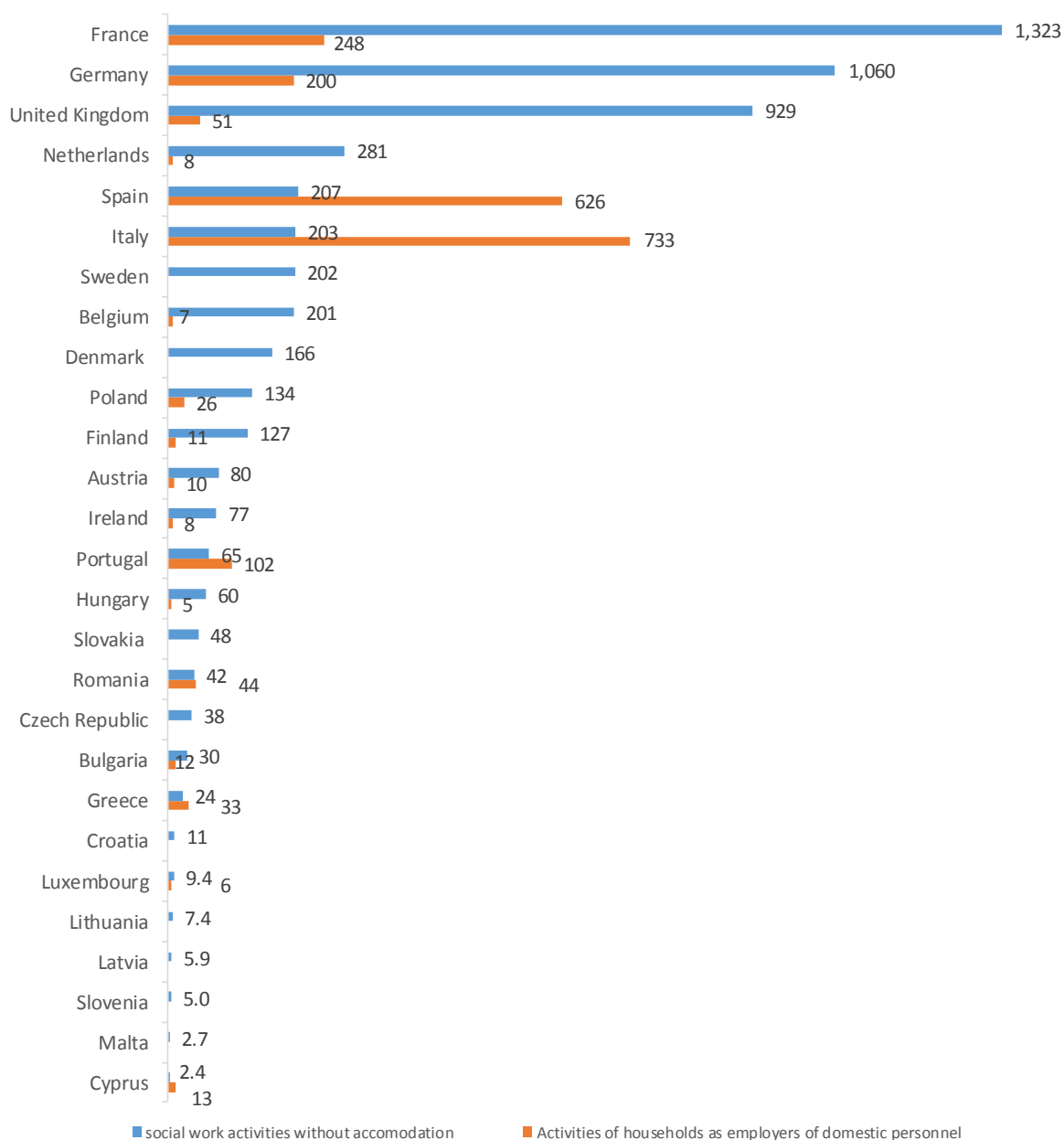
When looking at employment in terms of 'activities of households as employers of domestic personnel', there has been a nearly 7 % decrease in the EU-28. In some cases, such as in Belgium, the decline relates to more workers now being employed via an intermediary company in the service voucher scheme. **Nearly 2.2 million people worked in this sector in 2016.** Looking at individual countries (see figure A2 in Annex), only six have seen an increase (HU, HR, IE, AT, RO, BG), Hungary (61 %) and Croatia (36 %) significantly so.

Interestingly, Romania and Bulgaria have seen an increase of employment in 'activities of households as employers of domestic personnel' on this measure but a decrease in terms of the category of 'social work without accommodation'. Amongst

² Farvaque, N. (2015).

the 15 countries that registered a decline in employment, the rate of decline was marked for the Netherlands (-53 %) and Belgium (-56 %).

Figure 1. Number employed in 'social work activities without accommodation' and 'activities of households as employers of domestic personnel', 15 to 64 years, Q3 2017 (in thousands)

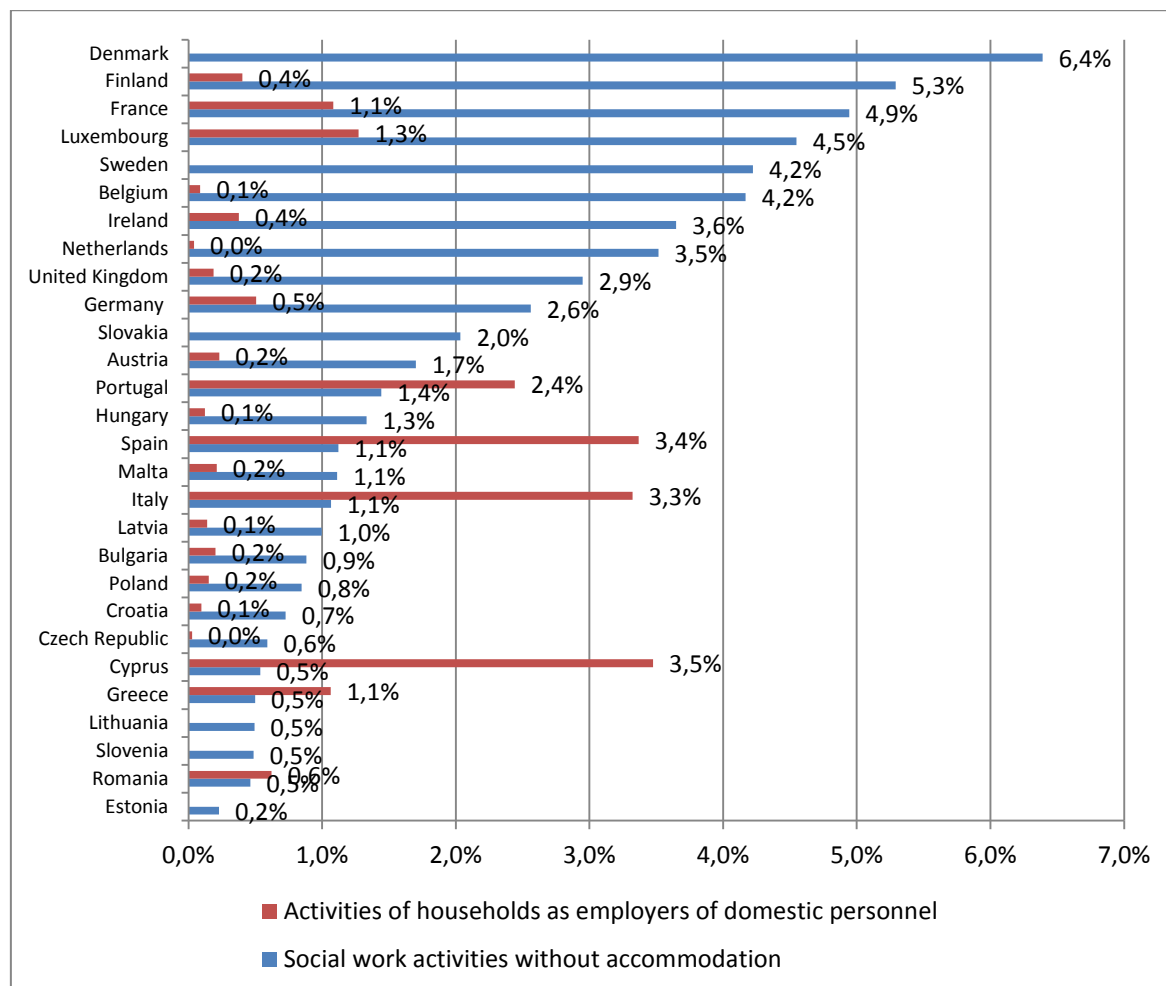


Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two-digit level) - 1 000 (lfsq_egan22d). No data for Estonia (social work activities without accommodation) and Czech Republic, Denmark, Estonia, Croatia, Latvia, Lithuania, Malta, Slovenia, Slovakia, Sweden (activities of households as employers of domestic personnel)

To go further, it is important to relate these figures to the total employment in each country. Figure 2 below compares employment rates in both categories. **Six**

countries have a proportion of employment in 'social work activities with accommodation' above 4 %: Denmark³, Finland, France, Luxembourg, Sweden and Belgium. The proportion of employment in 'activities of households as employers of domestic personnel' is the highest in a pool of Southern countries: Cyprus, Spain, Italy (above 3 %) and Portugal.

Figure 2. Employment in PHS as a proportion of total employment (2016)



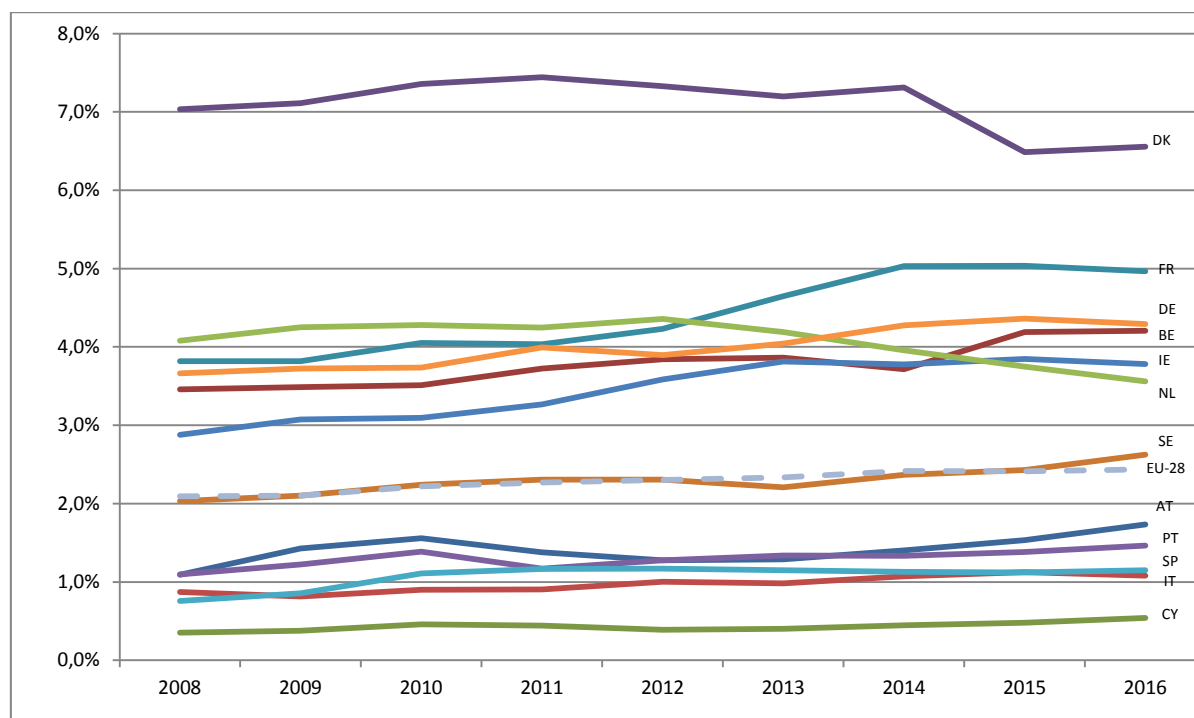
Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two digit level) - 1 000 (lfsq_egan22d). No data for Czech Republic, Denmark, Estonia, Croatia, Latvia, Lithuania, Malta, Slovenia, Slovakia, Sweden (activities of households as employers of domestic personnel)

It is also important to scrutinise the evolution of the employment rates in both sectors since the 2008 crisis. Figure 3 and Figure 4 show these evolutions for the sample of 12 countries covered by this Review. **Except for Denmark and the Netherlands, all countries have experienced an increase in the employment**

³ The share for Denmark is about twice the share reported in the Danish country article, based on administrative register data and using ISCO-code 5322. Apart from the difference in data collection (surveys versus register data) the main reason for the discrepancy is probably that the LFS-data using NACE Code Q88 includes Q88.9.1 - Child day-care activities and Q88.9.9 - Other social work activities without accommodation n.e.c. These activities are not included under ISCO Code 5322. Also the data in figure 1 are for total employment, while the data in the Denmark country article are for employees only.

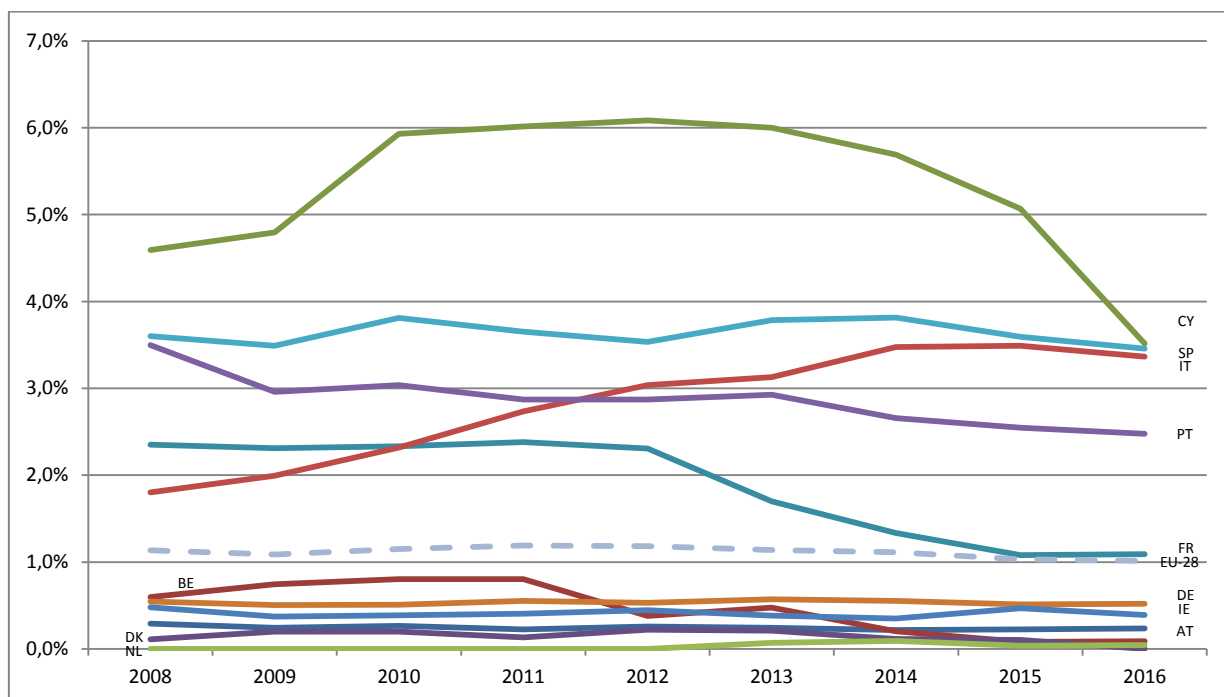
rate of social work activities between 2008 and 2016 (fig. 3). At EU level, this rate has passed from 2.1 % to 2.4 % between 2008 and 2016. By comparison, the evolution of the employment rate in the activities of households as employers of domestic personnel contrasts significantly between countries. Some have experienced important increases such as Italy, most have experienced a relative stability, while in others (such as France or Belgium) the employment rate has decreased, most often because of institutional changes.

Figure 3. Evolution of employment rates in PHS (2008-2016): social work activities with accommodation



Source: Eurostat LFS

Figure 4. Evolution of employment rates in PHS (2008-2016): activities of households as employers of domestic personnel



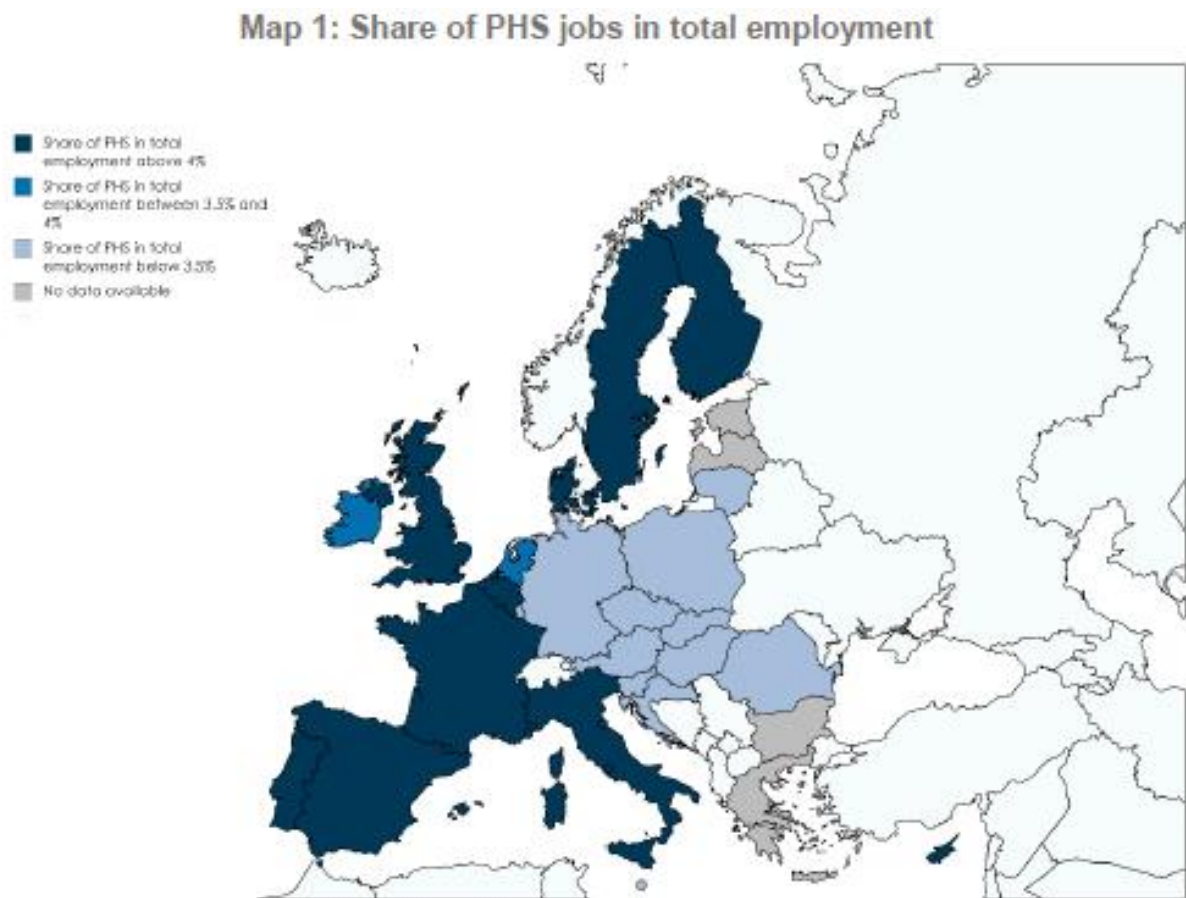
Source: Eurostat LFS

It is important to note that the Eurostat data category of 'household as employer of domestic personnel' (NACE 97) needs to be taken with caution since it describes the number of households as employers of domestic workers, and not the number of domestic workers. Moreover, for the households, this must be their main activity.

A report by the European Federation for Services to Individuals (EFSI, 2018) uses an approach based on ISCO (International Standard Classification of Occupations) data. In this case, it is not the type of employment (direct employment model vs. provider employment model) that is decisive but rather the occupation, i.e., if it is a care-related or a household-support related job. The report utilises two categories of data: group 9111 ('domestic cleaners and helpers'), and group 5322 ('home-based personal care workers').

The PHS Industry Monitor report provides data for 2016 for 24 EU MS (no data were available for Bulgaria, Estonia, Greece and Latvia). The research shows that employment in the PHS sector represented 7.9 million jobs in 2016, amounting to almost 4 % of total employment in these 24 countries. To capture variation across countries, three clusters are identified (see Figure 5 below): countries with a share of PHS jobs below the EU average (in light blue in the map below); countries in the EU average (in medium blue) and countries above the EU average (in dark blue).

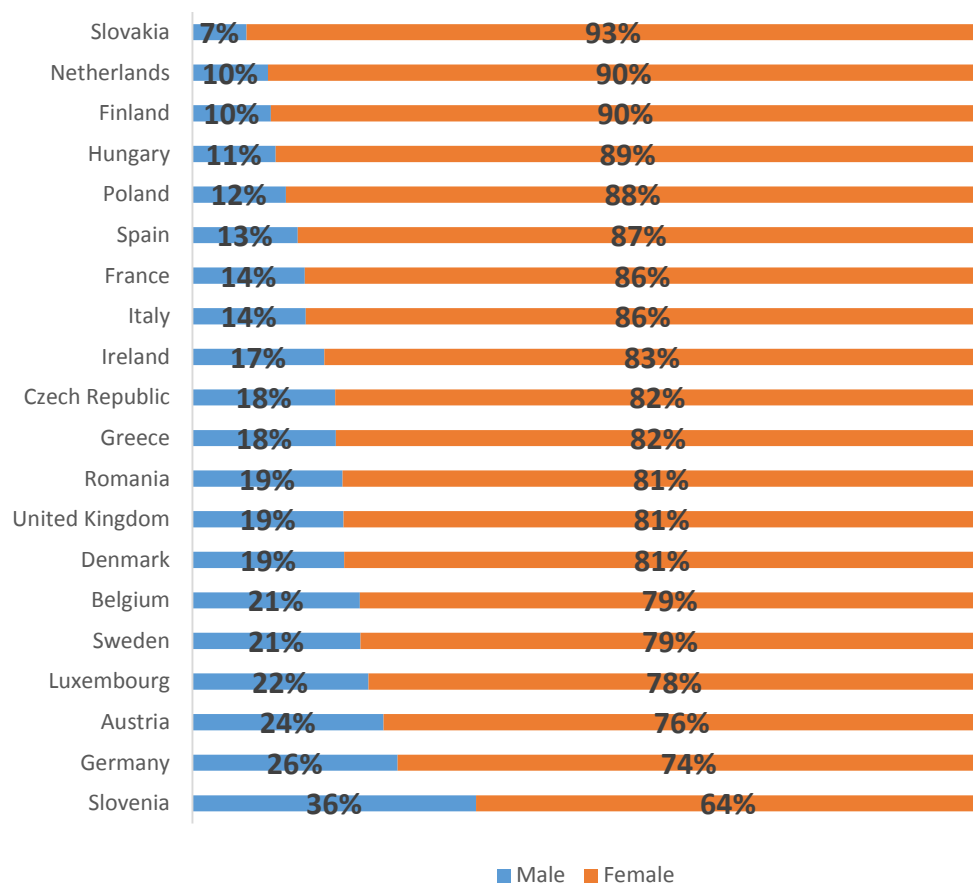
Figure 5. Employment in PHS based on ISCO data



Source: Extracted from: *European Federation for Services to Individuals (2018)*, based on Eurostat and EFSI

Returning to the NACE data, shown in Figure 6 below, illustrates how employment in social work activities without accommodation is split by gender. **Females dominate the employment field, with women constituting more than three-quarters of the category in most countries. The proportion is more than 90 % for Slovakia, the Netherlands and Finland.**

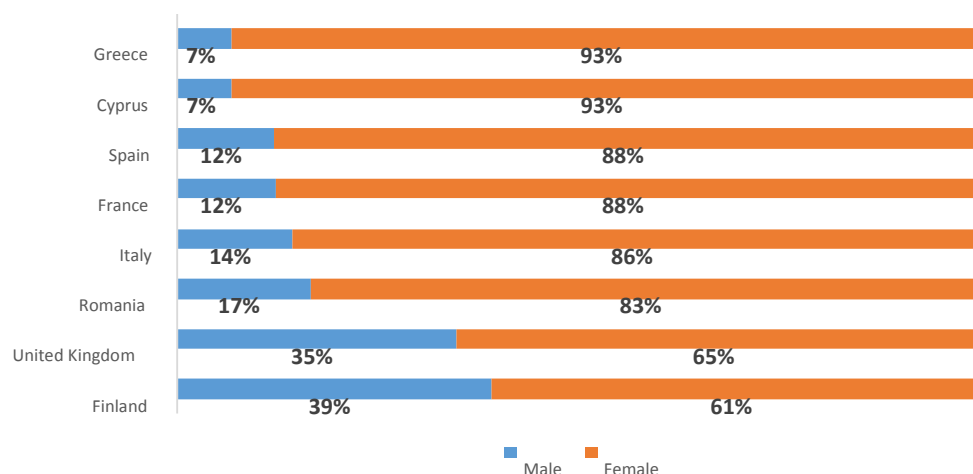
Figure 6. Employment by gender for 'social work activities without accommodation' (15 to 64 years, Q3 2017)



Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two digit level) - 1 000 (lfsq_egan22d). No data for Bulgaria, Estonia, Croatia, Cyprus, Latvia, Lithuania, Malta, Portugal

The picture of women dominating employment is similar for activities of households as employers of domestic personnel (see Figure 7 below). However, data is limited to eight countries for this employment category.

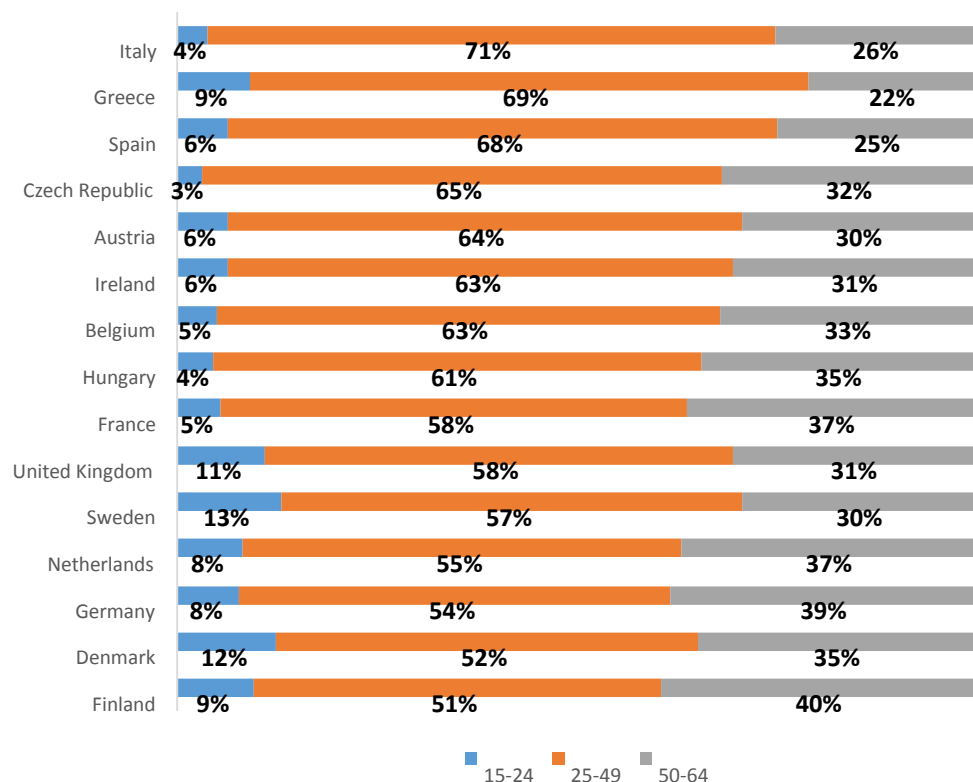
Figure 7. Employment by gender for 'activities of households as employers of domestic personnel', 15-64 years, Q3 2017



Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two-digit level) - 1 000 (lfsq_egan22d). All available data.

Considering the age of employees in PHS, there is insufficient data to provide an analysis of employment by age for 'activities of households as employers of domestic personnel'. Employment for 'social work activities without accommodation' is dominated by 25-49 year-olds. More than half of the employed fall into this group for all countries where data are available (see Figure 8 below). The 15-24 category is relatively small in all cases, but the 50-64 category is significant (more than one-third) in seven countries (Belgium, Denmark, Germany, France, Hungary, the Netherlands, Finland).

Figure 8. Employment by age for 'social work activities without accommodation', Q3 2017



Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two digit level) - 1 000 (lfsq_egan22d). Data is included where available for the three age groups. No data for Bulgaria, Estonia, Croatia, Cyprus, Latvia, Lithuania, Luxembourg, Malta, Poland, Portugal, Romania, Slovenia, Slovakia. Percentage split is from the total of the three age groups only and not for the total population (due to limited data).

Vacancies in the PHS sector are also growing. Eurostat data on job vacancy rates⁴ indicate healthy growth for Social work activities without accommodation. Data is limited to eight countries. Between 2014 and 2016 the job vacancy rate increased three-fold for the Czech Republic, five-fold for Latvia, four-fold for Slovakia, by 58 % in Romania, and by 30 % in Finland. It remained the same in Spain and Poland, and only in Bulgaria (-13 %) did in decrease.

2.2 Indicators of work-life balance

A recent Eurofound comparative study (Eurofound, 2017), based on the European Quality of Life Survey (EQLS), ranks countries with the best work-life balance in the EU. The question in the survey on work-life balance was: 'How often has each of

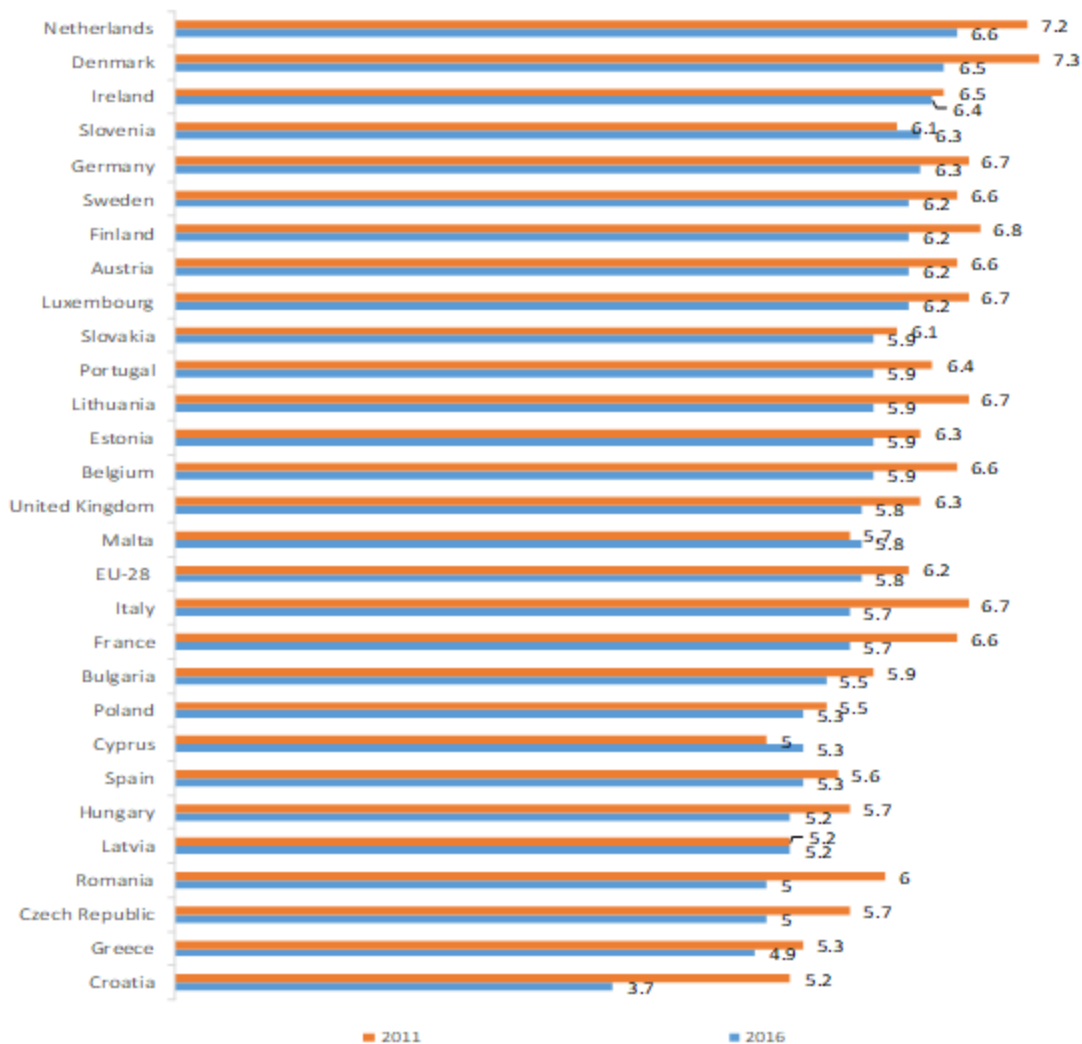
⁴ Job vacancies and occupied posts measure number of posts. The job vacancy rate (JVR) measures the proportion of total posts that are vacant, according to the definition of job vacancy above, expressed as a percentage as follows: $JVR = \text{number of job vacancies} / (\text{number of occupied posts} + \text{number of job vacancies})$.

the following happened to you during the last 12 months? a. I have come home from work too tired to do some of the household jobs which need to be done; b. It has been difficult for me to fulfil my family responsibilities because of the amount of time I spend on the job; c. I have found it difficult to concentrate at work because of my family responsibilities'. Answer categories are: Every day, Several times a week, Several times a month, Several times a year, Less often/ rarely, Never.

The summary indicator adds the data for the three parts of the question and puts them into a 1-10 scale, where 1 is the worst and 10 is the highest level of work-life balance (that is, with no occurrence of issues on any of the three dimensions). The results by country are shown in Figure 9 below, for both 2011 and 2016. Data for 2016 show that nine countries are in the top quartile for work-life balance (NL, DK, IE, SI, DE, SE, FI, AT, LU) with a score 6.2 or above. The score of 6.2 represented the EU-28 average in 2011 and 16 countries had a score above this.

Overall, the summary indicator of work-life balance for the EU-28 decreased (worsened) from 6.2 in 2011 to 5.8 in 2016. Work-life balance worsened in nearly all countries; there were only three cases where work-life balance improved between 2011 and 2016: Cyprus (5 to 5.3), Malta (5.7 to 5.8), Slovenia (6.1 to 6.3). The score for Latvia remained the same (5.2).

Figure 9. Summary work-life balance indicator (2011 and 2016), in order of highest work-life balance in 2016



Source: Eurofound European Quality of Life Survey 2016

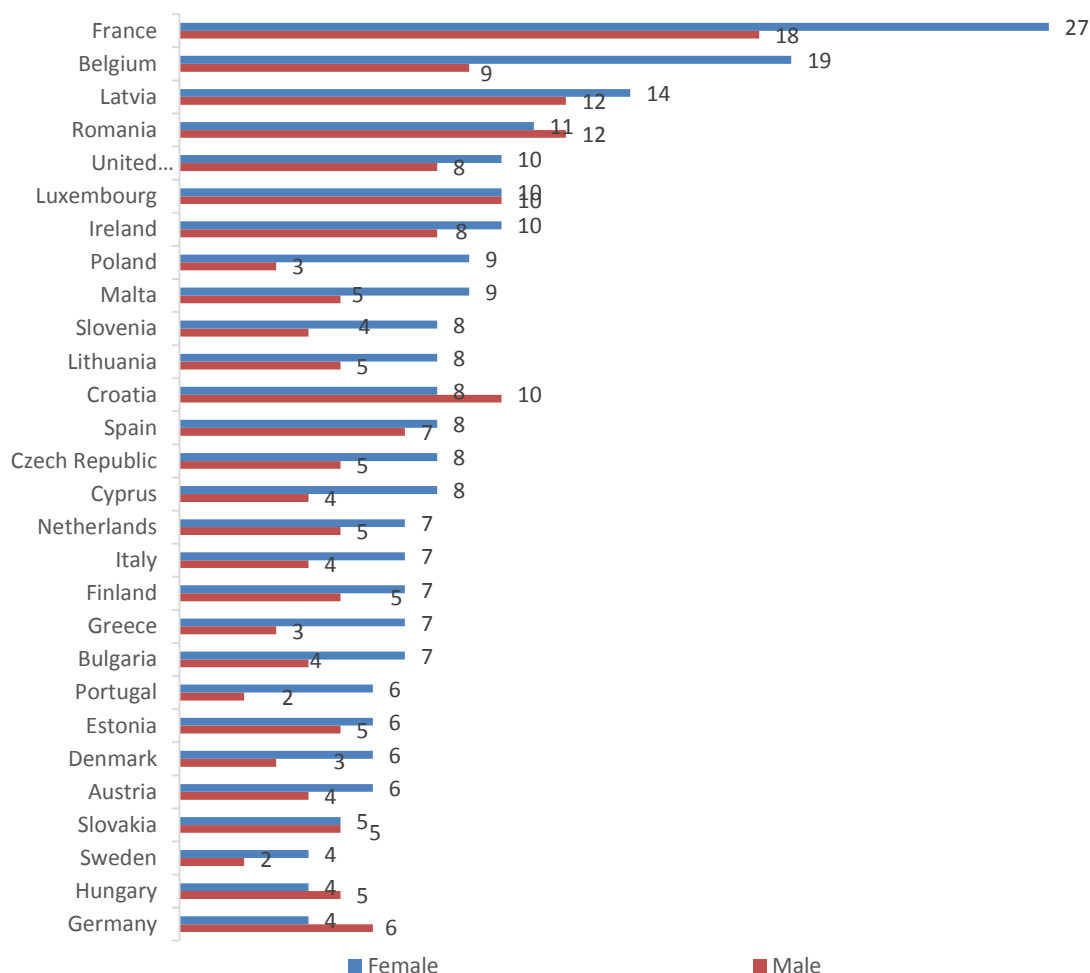
The EQLS also reveals that work-life balance has deteriorated for all age groups and in particular, for young women and women in the mid-age category (35-49). Blue-collar workers, people on fixed-term contracts, and people working long hours are most likely to have a poor work-life balance. The number of children is a key factor leading to issues in work-life balance.

Turning to the issue of the extent of caring responsibilities, **the EQLS shows that a considerable proportion of people are undertaking caring responsibilities beyond caring for children.** As regards the proportion of those caring for disabled or infirm family members or friends under 75 years old, at least several days a week, for the EU-28, 10 % of females and 7 % of males report this being the case.

There is considerable variation by country (see Figure 10 below) with some countries such as France, Belgium, Latvia, Romania, United Kingdom, Luxembourg and Ireland, exceeding the EU-28 average, but other countries seeing relatively low percentages. **The percentage is nearly always higher for females than it is**

for males, although the opposite is true for Romania, Croatia, Hungary and Germany.

Figure 10. Persons caring for disabled or infirm family members, neighbours or friends under 75 years old, at least several days a week (2016)



Source: Eurofound European Quality of Life Survey 2016

The EQLS also asked 'How easy or difficult would it be to combine paid work (say 10 hours per week) with your care responsibilities?' For the EU-28, 44 % of women and 30 % of men said that this was either rather difficult or very difficult.

Figure A3 in Annex shows the percentages of the people per country who answered 'rather difficult or very difficult', and shows a marked **pattern whereby women are nearly always considerably more burdened than men. Only the Czech Republic registers the contrary. In several countries, the difficulty is pronounced, with more than half of women saying that it is difficult to combine paid work and care responsibilities. This suggests that women (and a considerable proportion of men too) may experience significant challenges in re-starting work or maintaining employment. Availability of PHS can help in this respect.**

3 Main measures put in place to support PHS in the 12 countries covered by this Review

3.1 Defining PHS

In the countries covered by this review, PHS are generally not defined in law (except France and Portugal), but are characterised by the services considered to fall within this definition. These can be broadly sub-divided into care and non-care services. Only France has grouped all services under a single PHS framework and even there, where there is a legal definition, the sectors are still clearly separated. There is on the one hand the care sector with its own financing (welfare state, APA allowance) and on the other, the non-care sector stimulating purchase through tax incentives and vouchers. There are of course interactions between care and non-care activities (as an illustration, homework is integrated in care plans for people in loss of autonomy). It may be added that the recourse to non)care services enable people to save time which in turn can enable them to free up time to take care of their relatives. Similarly, there are interactions between care and cure activities, but they depend on distinct institutional frameworks. There are also distinct collective agreements (for care activities; for direct workers; for workers of private companies providing PHS; for workers of cleaning companies, etc.) and this also makes it clear that, in fact, there does not exist a global, all-encompassing, 'PHS' sector.

There is distinction where public policies on PHS relate to the goal being pursued in relation to these policies. **The promotion of care PHS often focusses on addressing the challenges posed by demographic and societal change.** The ageing of the population and the desire to stay at home for as long as possible are the key challenges. Other related social challenges refer to reduced (geographical) proximity of family members, increasingly complex family structures, and more involvement of women in the labour market (coupled with persistent lower involvement of men in caring tasks). In several countries, the offer of **financial support for households to avail themselves of non-care PHS is linked to a desire to regularise and improve the quality of such employment and particularly to combat the underground economy** and its associated detrimental impact on the state and on workers performing such tasks. The development of formal, non-care PHS therefore follows a strategy of raising employment rates with generally a specific target of non- or low qualified, often migrant, female workers.

3.2 Mapping of key measures promoted in the 12 countries

3.2.1 Overview

As mentioned above, the services promoted by key measures in the 12 countries studied can broadly be divided into care and non-care activities. However, a significant number of measures target both care and non-care activities and the table below distinguishes measures that only target care activities or non-care activities or measures that target both types of activity.

Although there have been some recent amendments to provisions in this area (e.g. DK, IT) and certain countries have introduced new measures (e.g. DE, PT), overall **the measures summarised in the table below have been in place – in various guises – for several years.** Ongoing amendments to such measures have mainly focussed on encouraging the provisions of certain services, for example in response to the economic crisis (e.g. DK) or to addressing the

distributional effect of certain measures. The latter is primarily the case for measures based on tax subsidies, which in a number of countries have been criticised for disadvantaging unemployed or low-income households not paying taxes.

Measures to support the development of PHS therefore differ significantly not only by the types of activities they support and their goals (as outlined in section 3.1 above), but also regarding their financing and budgetary implications for the households using such measures.

In relation to long-term and homecare services particularly, but also childcare services, many of the policies outlined in the national contributions could be considered as part of wider welfare state provision.

In many cases, delivery is therefore based on a particular status (e.g. age of child, employment status of the parent, disability, etc.) or needs assessment (e.g. need for different levels of care) and service delivery is often free of charge to the user. This is particularly the case where services are either publicly delivered or contracted by the state or municipality. In some cases (e.g. in Sweden) this is even the case in a 'free choice of provider' model, following a needs assessment.

In some countries, for child and long-term care (LTC) services, the level of support provided is based on a means test to achieve better targeting of support to those in most (financial) need.

Home help and domestic services such as cleaning and gardening are more likely to be supported through fiscal advantages and/or voucher schemes that subsidise the take up of such services, particularly where they are intended to support the labour market integration of women, or combatting the undeclared economy, rather than meeting basic needs (such as for care).

The table below summarises the main measures being promoted, classifying these into care, non-care and combined care and non-care related activities. More information on the main measures in each country is provided below in tables 1 and 2 below.

Table 1. Classification of PHS measures by type of supported activity

Country	Care activities	Care and non-care activities	Non-care activities
Austria	Long-term allowance Tax relief for childcare cost ⁵	care	Service Cheque ⁶ Employment
Belgium		Home care and home help scheme	Service Voucher System Wijk-Werken (Flanders only)
Cyprus	Direct employment on short-term (up to two		

⁵ Limited use in private households as care giver outside an institution must prove pedagogical training.

⁶ Can also be used for care of small children but is mainly intended for non-care activities.

Country	Care activities	Care and non-care activities	Non-care activities
	year) contracts		
Germany	Support for low-threshold care services	Household procedure (<i>Haushaltsscheckverfahren</i>) Perspective re-entry (<i>Perspektive Wiedereinstieg</i>)	Regional household vouchers trials for service
Denmark	Domestic care scheme Citizen administered disability assistance	Housing-Job Scheme	
Spain	Public support based on Long-Term Care Law (LAPAD) Allowances to sources services from private providers (if not public provision accessible) Allowance for informal care Allowance for personal assistance		
France	APA allowance for dependent persons Tax credits and social exemptions for households purchasing care services Reduced VAT rate CESU voucher		Tax credits and social exemptions for households purchasing non-care services CESU vouchers
Ireland	Early Childhood Care and Education Scheme Community Childcare subvention Training and Employment Childcare Nursing Home Support Scheme (Fair Deal)	Home help scheme	
Italy	Regional care allowances		Tax incentives Family booklet Occasional contracts
The Netherlands	Childcare allowance Long-term care support through insurance		Tax exemptions

Country	Care activities	Care and non-care activities	Non-care activities
	system		
Portugal	ECCI (teams for integrated long-term home support)	SAD – Domestic support services MAVI	
Sweden		Home help and home care services	Tax relief (RUT) for purchase of domestic services

Source: Country articles by ECE labour market expert

The measures can also be classified by the type of employment model used, i.e. whether the service is accessed by individuals directly employing someone to provide care or non-care support at home, or whether this is accessed through a supplier model. The table below highlights in which countries (and for which different services and measures) different employment models are used, where this information is available. As the table demonstrates, in some countries financial support can be used for the same service both under a direct employment or serve provider model (e.g. childcare allowance in the Netherlands that allows payments to institutional childcare providers as well as grandparents who meet particular eligibility criteria).

Table 2. Classification of PHS measures by employment model used

Type of activity	Direct employment	Service provider
Care activities (long term care and childcare)	AT (tax relief for childcare costs)	AT (long-term care allowance)
	CY (Direct employment on short term contracts)	AT (tax relief for childcare costs)
	DK (Citizen administered disability assistance)	DK (Domestic care scheme)
	DE (support for low threshold care services)	FR (APA allowance)
	ES (allowance for informal care)	IE (ECCE)
	ES (allowance for personal assistance)	IE (CCS)
	FR (APA allowance)	IE (TEC)
	NL (childcare allowance)	IE (Nursing support scheme) NL (childcare allowance)
Care and non-care activities	AT (Service Employment Cheque)	BE (Home care and home help)
	DK (Housing Job Scheme)	FR (CESU voucher)
	DE (Household Cheque procedure)	IE (Home help scheme)
	FR (CESU voucher)	NL (tax exemptions for individuals recruiting someone to provide support with care or non-care activities up to a certain threshold)
		PT (ECCI)
	SE (Home help and home care)	
Non-care activities	FR (tax credits and social	BE (Service Voucher System)

Type of activity	Direct employment	Service provider
(cleaning, ironing, gardening, cooking etc.)	exemptions) SE (RUT)	BE (Wijk Werken – Flanders) FR (tax credits and social exemptions) FR (reduced VAT rates) PT (SAD) PT (MAVI)

Source: Country articles by ECE labour market experts

3.2.2 Key measures to support PHS by country

In **Austria**, measures exist to support care and non-care activities. For the former, the *Long-term Care Allowance* was designed to partly cover care related costs and aims to encourage the possibility for long-term care recipients to stay in their own home rather than receiving institutional care. It is available to people requiring a relatively high level of long-term care in the home. The delivery of adequate home-based care services is the responsibility of the nine provinces and is mainly based on a service provider model even if long-term care is largely provided informally by family members. Although the main focus of the measures is to allow 'independent living' at home for as long as possible, the long-term care allowance can also fund semi-institutional and institutional care.

For parents, *tax relief for childcare costs* is only available if the child is being looked after in public or private childcare institutions or by a pedagogically qualified person (where evidence must be provided). Also, to support access primarily to non-care services (e.g. cleaning, shopping, gardening etc.⁷), the *Service Employment Cheque/Voucher (Dienstleistungsscheck)* was introduced in 2006.

In **Belgium**, the voucher system is the main approach to supporting PHS. While this initially covered both care and non-care activities, it is now primarily used to source non-care services (cleaning, ironing, washing, mending, food preparation, transport of individuals with reduced mobility and grocery shopping).

Belgium – Service Voucher System

Under the Service Voucher System (*chèque services*) the user purchases service vouchers from the voucher provider Sodexo (a private contractor issuing vouchers under the charge of the regional government, which plays a co-ordinating and supporting role).

The domestic workers delivering the service are employed by service sector companies, which act as intermediaries between workers and users. Both profit and not-for profit agencies are active in this area (including temporary work agencies), although recently for profit actors have become more prominent. Voucher employees have contracts with service sector companies, with most of these contracts being open-ended and employees having the same entitlements to social security rights as other employees.

Between 2005 and 2011, the number of users of such vouchers increased significantly, but growth slowed since 2011. Today, the service is used by one-in-five families and has more than 1 million users. The sector employed some 131

⁷ The voucher can also be used to source care for very small children.

000 workers (2015), with more than 95 % of them women. The cost of the scheme amounted to EUR 2 billion in 2013 (0.5 % of GDP). Prime users of the scheme are dual income, middle class households, often with children. The share of users more than 65 years of age has also increased. Taking into account the earn-back effect of this scheme, the costs are divided by two (taking into account direct effects) or even four (when counting also for indirect effects, which makes the estimate very speculative (Idea Consult, 2014, p. 74).

The Belgian *Home care and Home Help* system is a scheme to provide subsidies for care-related services and help with daily-living activities such as personal hygiene, eating, mobility, etc. In contrast to service vouchers, these services are targeted at those with care needs such as the elderly, the (chronically) sick or the disabled. The price for the user of these services is not fixed as for service vouchers, but depends on the income, care needs and family composition of the user. Both non-profit and profit-making companies are active in this sector.

At regional level (Flanders only), *Wijk-Werken* is a small-scale neighbourhood scheme allowing purchase of vouchers to pay for services such as home repairs, gardening, childcare and logistical support. Specific to this scheme is that the service is provided by hard-to-place jobseekers.

In **Cyprus**, measures to promote PHS are not widespread. In an attempt to regularise this sector, it is possible for households to conclude limited, two-year direct employment contracts for either live-in or daytime carers. A minimum wage applies, and terms and conditions of employment are controlled by the government.

Denmark has a long history of measures to promote PHS. For non-care (and some limited childcare) activities, these schemes have undergone significant change over the years, partly as a reaction to the economic crisis.

Denmark – the evolution of the Housing-Job-Scheme

The *Housing-Job-Scheme* offers tax subsidies for services such as cleaning, childcare and certain home renovation services (the latter only for renovations with energy-saving purpose). Subsidies are granted on wages of providers, equivalent to 25 % of wage costs.

The availability of such a scheme (or one of a similar nature) has a relatively long tradition in Denmark and was first introduced as a 'Home Service Scheme' in 1994. The aim of this scheme was to support families with children and elderly people, to reduce do-it-yourself activities and undeclared work and improve employment opportunities for low skilled workers. While the scheme initially included cleaning, gardening, window cleaning and several other household services, it was subsequently scaled back in 2004 and limited to cleaning activities in households where at least one person receives a retirement pension. Between 2011 and 2018, the scheme was abolished twice, but each time reintroduced, sometimes with small alterations in response to the economic crisis. As part of the Fiscal Law of 2018 the scheme was made permanent.

Since 2011, the Housing-Job-Scheme is very different from the Home Service Scheme that it replaced, with respect to the instrument (tax deductions instead of subsidies), the scope (both caring and non-caring activities) and the much broader target group.

For care-related activities, the Danish *Domestic care scheme* dates to 1948 and has since developed into an integral part of the social care offered by the municipalities. The law does not define exactly which services the municipality must offer. As a result, individual municipalities decide the specific coverage of the scheme, generating some differences within the country. Since 2003, there has been a free choice of supplier, with municipalities setting basic quality and price standards. Traditionally, the main recipients have been the elderly, but more recently their share among recipients has been declining due to an increasing focus on rehabilitation to help people regain capacity to care for themselves and for supplying them with practical tools like robot vacuum cleaners. **There has been a shift over time towards more health-related activities, which has also transformed the demand for workers in this area from low-skilled to higher skilled healthcare personnel.**

Citizen administered disability assistance is also offered by municipalities and provides an individual grant to people with physical or mental health impairments to allow them to recruit private personal helpers, providing an alternative to institutional care.

In **Germany**, the *Household cheque procedure (Haushaltsscheckverfahren)* was established in 2003. Under this scheme, households pay lower employer contributions (5 % of gross wages instead of the 15 % a commercial employer would pay) to the public pension scheme. Lump sum contributions to health insurance are also lower (5 % compared to the 13 % paid by a commercial employer). The household cheque procedure only applies to mini-jobbers employed by private households (i.e. those on marginal part-time contracts who cannot earn more than a specified maximum wage per month). Households using this service pay a set share of gross wages to the Federal Mini-Job authority. The co-ordinating role of this authority makes it easier for domestic households to employ such mini-jobbers directly.

Since 2003, households can also deduct expenses for personal and household services from the collective income tax. Under this scheme, a maximum of 400 EUR (up to 20 % of expenses) can be deducted from income tax. For household renovation type activities, the maximum is EUR 1 200. Low income households not liable to income tax cannot benefit from this scheme. Specific to the promotion of care activities, since 2017, households can apply for benefits of up to EUR 125 per month⁸ for low threshold care services.

Finally, there are limited regional trials being carried out offering *household service vouchers* to access cleaning, cooking, gardening and other non-care related support services. The aim of these trials is to help people wanting to return to work to reconcile work and family responsibilities.

France promotes the use of care and non-care PHS via tax credits and social exemptions for households, as well as reduced VAT rates for private service providers themselves. In addition, service vouchers are available both for care and non-care services.

⁸ Following the implementation of the Strengthening of Care Act II, https://www.gesetze-im-internet.de/sgb_11/___45b.html

France – CESU Service Vouchers

There are two forms of CESU: a pre-printed cheque book that declares the employee to the public administration and a pre-financed CESU partly or fully funded to recruit individuals or service providers to provide care or non-care services.

Service providers offering care services require authorisation from the local authority and most comply with minimum standards of service quality. Service providers of non-care services no longer require authorisation but must declare their activity with the administration to benefit from a reduced VAT rate and social exemptions on the cost of labour.

For direct employment, no specific regulation applies other than that such employees must be declared to the social security fund. Tax exemptions also apply.

The preponderance is still slightly towards the direct employment model, but this has declined over time, partly because the exemption from employer contributions offered to households as employers was withdrawn in 2011, but was reintroduced in 2015, which may in future help to boost the direct employment model again.

In **Ireland**, the focus of PHS is very much on childcare provision aimed at encouraging the participation of women in the labour market and training. Beyond this, a *Home help scheme* offers help to vulnerable people needing assistance with day-to-day tasks as a result of illness or disability. This service is either provided directly by the Health Service Executive directly or through contracts with non-profit or private providers. This aims to reduce the requirement for institutional long-term care. The service is free and is not means tested, but subject to a needs assessment by a health care professional. A set number of hours of assistance is provided per week for help with personal care and domestic duties but does not provide nursing or medical care.

In **Italy**, the PHS has grown significantly recently because of societal change (lower geographical proximity to the family, increasing labour market participation of women etc.), with the gap in previous family provision mainly filled by migrant women. So far, no clear policies have emerged for this sector and it is considered difficult to combat the undeclared economy in this area.

For non-care services, fiscal incentives exist for expenditure on domestic services. For employers with an income of up to EUR 40 000, a deduction of 19 % of the cost of taxable income applies. This fiscal incentive is in the form of a tax credit and has been criticised for disadvantaging non- or low-wage earners. The existing voucher schemes were repealed in 2017 after intense political debate (excluding babysitting vouchers). The only measures available are the use of occasional contracts and the Family Booklet, the latter being used by private users to purchase support with housework, care, gardening, cleaning, childcare etc.

The **Dutch** approach to the delivery of PHS is characterised by the diversity of providers eligible for financial support, which can include family members. For example, the childcare allowance that is paid in the form of tax subsidies and is available to parents who are (temporarily) working or studying. This allowance is based on childcare cost and family income. It can be paid to municipal and private childcare providers, as well as to grandparents who regularly babysit and who can be classified as self-employed childminders and formal childcare providers. To

qualify, they must meet some formal requirements (e.g. having pursued first aid training etc.).

In the Netherlands, long-term care services are organised by municipalities and are funded through long-term care insurance, in place since 1968. Eligibility for different levels of support under the insurance schemes is based on a health care/needs assessment.

In **Portugal**, the focus of policy activities to support the delivery of PHS has been on long-term care and the shift of services from an institutional setting to the community.

Portugal: four main measures to support PHS

Domestic Support Services supported by social security (SAD). SAD provides at least for the following care activities: care for hygiene and personal comfort, domestic cleaning, delivery of support at meals, laundry care, animation and socialisation, leisure, culture and purchase of food, tele assistance. Other services offered (e.g. food preparation etc.) are optional. SAD is targeted at elderly people, adults with disabilities and others requiring assistance. The service is generally provided by not for profit organisations. The terms of service and support are set out in an agreement between the government and the main service providers. The state subsidy is intended to cover the personnel costs of SAD (paid directly to not for profit providers). Private providers can also offer SAD but are not co-funded by the state (and hence more expensive to the end user).

CpD: This Dependency supplement is a permanent cash benefit (prestação pecuniária) directly paid to dependent people who receive a pension for invalidity, for old-age or a survivor's pension. The Decree-Law 265/1999 that created this measure (DL 265/1999) determines as indispensable tasks for the satisfaction of the basic needs 'household chores', 'locomotion' and 'hygiene'. However, it is not possible to estimate the impact of this financial support on jobs created or sustained or on family members freed up to work.

MAVI: In August 2017, the Portuguese government approved a decree law (129/2017) establishing the 'Support Model for an Independent Life' MAVI. The goal of this programme is to reduce the need for institutionalisation and allow individuals to continue to live in their homes in the community. The programme is implemented by local 'support centres for an independent life' (CAVI). These centres are conducting pilot projects co-funded between the European Commission and the Portuguese government. It is targeted at people with a disability or incapacity to help them manage tasks they cannot perform themselves. Activities supported relate to hygiene, nutrition, health maintenance and care, domestic assistance, mobility, communication, work environment, occupational training, higher education and research, culture leisure and sports, job search, creation of support networks, participation and citizenship and decision making. They are therefore similar to SAD but with a greater emphasis on the empowerment of the user. At the request of the user, an individual's personal assistance plan is drawn up providing support of up to 40 hours per week. Only specific NGOs dedicated to supporting disabled individuals can apply for recognition as a CAVI.

ECCI (teams for integrated long-term home support) were created in 2006 as part of the Portuguese national health service and its national network of long-term care. These are made up of integrated teams offering nursing, medical, rehabilitation, social and other support. The target group are mainly elderly

individuals with chronic and progressive illnesses receiving care at home. Such services can be provided by non-profit, for profit or public institutions and their work is based on contracts with the responsible ministry. The services of the ECCI are free to the user.

In **Spain**, the focus is also on long-term care service provision under a law passed in 2007. The law distinguishes three degrees of dependence: moderate, severe and major dependency and provides a series of benefits for each degree in the form of in-kind and cash benefits. Accessible care services include tele-care, home care, personal care help, and residential care. If the competent administrations are unable to offer these services, the dependent individual is entitled to means and needs tested allowances (Mot et al, 2012):

- Allowance for the care recipient to hire services from private licensed providers (if public service cannot provide)
- Allowance for informal care – the informal carers needs to be a relative (direct employment)
- Allowance for personal assistance – to hire assistance to increase personal autonomy, access to work, education and help with activities of daily living. The carer recruited must prove to have required qualifications.

In **Sweden**, provision of home help and home care services are the responsibility of municipalities. There has been a shift from public to more private provision, with the introduction of a free choice of provider system. The level and type of provision is based on a needs assessment. For non-care services, tax relief has been available since 2007 (called *RUT*⁹) for people purchasing domestic services such as cleaning and minor gardening tasks. The tax relief amounts to 50 % of the total labour cost up to a max of EUR 4 964 per person per year. From January 2016, the maximum is EUR 2 481 for those under-65. Only routine jobs (not requiring training) can be funded in this way. The following tasks are eligible: cleaning, washing ironing, removal services, childminding, personal and homecare, gardening, show shovelling, minor installations of IT equipment.

4 Impact of measures

This section discusses the impact of selected measures to encourage PHS, in terms of enabling people to work more and improved work-life balance.

Benefits from sustainable strategies promoting PHS include:

- **the formalisation of pre-existing jobs that were previously undeclared**
- **the creation of new jobs**
- **improvements in the work life balance of those using such services.**

All of the above beneficial effects have been exemplified in France, by successive policies in the field of PHS, as illustrated in the box below.

France – Benefits of policies to promote employment in PHS

⁹ The RUT acronym stands for 'Rengöring Underhåll och Tvätt' i.e. Cleaning Maintenance and Laundry.

A major impact of successive policies in the field of PHS has been the development of female employment. These services thus present an 'opportunity' for the integration of less qualified women into employment. But these are low-quality jobs with generalised part-time work and relatively low wages.

The development of these services can undoubtedly relieve families of household tasks. In this sense, PHS may improve the balance between work and private life. Indeed, active couples (excluding seniors) with children use PHS more often than other households (single or couples without children). In addition, the rate of recourse increases with the professional category and the level of the income: 20.6 % of executives resorted to PHS in 2011 against 13 % for all the French households. This recourse rate is 33.5 % among the 10 % of the richest households (Benoteau and Goin, 2014). The development of PHS is obviously linked to the existence and persistence of income inequalities between households (Devetter, Jany-Catrice, Ribault, 2015, Ledoux 2015).

In addition, the recourse rate for single-parent families is low (only 7.5 %) although it almost doubled between 2005 and 2011. These families are often single women with dependent children. And 42 % of personal services users are households with a working-age woman (Marbot, 2009). The probability that a woman is active and employed is higher when she belongs to a household that uses personal services, most often childcare services (*ibid*).

The impact of PHS support measures is stifled by the following considerations:

- **The market for PHS is characterised largely by low-paid, low-skilled jobs mostly for women and newly arrived migrants**, as described by most of the countries covered by this Review.
- **The benefits of increased labour market participation could also be achieved by other interventions.** For example, in Sweden, it could be argued that extending the opening hour of day-care or increasing home help for the elderly was a more efficient way to increase female labour supply or reduce the gender pay gap than the RUT tax relief.
- **There is also evidence that some support measures are used more by richer households.** In France, the rate of use of PHS is highly correlated with social status (socio-professional category and income level). In Sweden, the RUT tax relief has benefited higher income households more.

Table 3 below, summarises impact of PHS-promoting measures on labour supply and work-life balance for those measures for which evaluations exist.

The table illustrates that the effect of PHS-promoting measures and policies on the supply of labour and on work-life balance have only been studied in a small number of cases. Thus, more research is needed on the potential labour market effects and work-life balance effects of support for increased availability of PHS.

Table 3. *Impact of measures on labour supply and work-life balance*

Country	Name of measure	No. who start working (by gender, by age)	No. who increase working hours (by gender, by age)	Gains in work life balance
Austria	Long Term Care: legalisation of 24-hour care	a relatively high number of jobs have been created via the legalisation of 24-hour care		
Belgium	Service voucher system (SVS)	From 2003 to 2015 the employment rate of low-skilled women in Belgium has increased by 1.8 percentage points, while it has decreased in the EU. It seems reasonable to attribute part of this increase to the SVS (calculation by HIVA-KU Leuven based on very large administrative data from the National Social Security Office). In 2010, 1 % of users of the SVS reported that they started working again. Note that the latter evidence is based on a very small sample (Idea Consult, 2011, p. 110).	11 % reported working more and 11 % reported that without the vouchers they would have decided to work less – again, very small sample (Idea Consult, 2011, p. 110)	The extra time saved by voucher users was mainly used for the family (23 %), housekeeping (22 %), leisure (20 %) and free time (18 %). (Idea Consult, 2011)
Cyprus	Study on the effect of the availability of domestic help on female participation in the labour market		The study found that in a household that spent 1 000 Cyprus pounds per annum on a domestic helper, the female was 2 % more likely to participate in the labour market than one in an otherwise identical household	

			which spent nothing on this type of PHS. When children aged 0-5 were present in the household, this increase in probability rose to 5 %. It should be noted that this study was conducted before 2004 ¹⁰ so the effects just before the recent economic crisis would have been substantially larger.	
Denmark	Housing Job Scheme, Special evaluation of the effects on the supply of labour	An econometric analysis (only on the craft services and home maintenance part) was not able to identify significant labour supply effects (Damvad, 2015:4). The estimated coefficients had the expected positive sign, but they were not statistically significant.	A survey of homeowners and tenants showed that only a very small share of the persons who have used the Housing Job Scheme, increased their paid work (3 %). About 90 % responded that the scheme had had no effect on their supply of labour.	Uncertainty about the content of the scheme and the scheme's temporary nature may also have contributed to the fact that potential users were reluctant to change the balance between their leisure and working time.
France		In 2005, women who use personal services are slightly more active than average, with an activity rate of 82 % ¹¹ . And they are much more frequently in employment than the average (79 % of them vs 69 %) (Marbot, 2009)	No studies on the contribution of PHS to women's working time but (given the elasticity of women's labour supply, the probability of leaving the labour market after the birth of a child, or the correlation between the employment rate and the use of services in the labour market) it can	As a minimum, they help to reconcile family life with professional life.

¹⁰ See Christofides, Nearchou and Pashardes (2001).

¹¹ Activity rate is the percentage of the population, both employed and unemployed.

				be assumed that these services are a positive lever for women's employment.
Germany	Recent study (Forlani et al. 2018: 4-6)			An increase in the proportion of female immigrants enhances the likelihood of women of German nationality to increase their working hours. For medium-skilled women, also the probability to have a child increases.
Ireland				Data from 2005 indicated that 83 % of individuals in Ireland with caring responsibilities reported that they were happy with their current caring/work life balance.
Italy				
The Netherlands				
Portugal	SAD and ECCI			The number of users totals circa 78 000 (representing approx. 2.4 % of the total workforce) indicates that they exert a considerable indirect employment effect by facilitating the professional activity of a similar number of care-givers. Have not been evaluated. However, the working conditions of SAD-staff is physically and psychologically demanding. The normal weekly working time is 40 hours and the basic wage is c. EUR 600/month.
Spain	Country Expert own calculations based on current rates of part-time work and inactivity related to caring responsibilities (see Spain	Around 2.3 million persons (FTE) could be available for work with adequate working-life balance measures. This could be done with an		6.6 % of women work part-time because of family and personal obligations vs only 1.2 % of part-time male workers. Another 13.1 % of

	country report for details)	estimate of 0.52 million jobs that could be created to satisfy these conciliation needs.	women work part-time due to the need to care for children, sick, disabled or elderly adults, vs 1.9 % of men.
Sweden	Support for buying personal services in Cleaning, Maintenance and Laundry (RUT Scheme).	The Swedish schemes had a larger effect on both labour supply and undeclared work than the Danish Housing Job Scheme, probably due to their larger generosity and the fact that they had been permanent since 2007-8 (Skatteministeriet, 2017c:11-13). ¹²	The RUT tax relief has had a positive impact on married women's labour supply essentially in the form of an increase of working hours. The tax relief has however benefited high income earners to a larger extent than low income earners ¹³

Source: Country articles by ECE labour market experts

¹² As reported in the Denmark country article.

¹³ As reported in the Sweden country article

4.1 Impact on labour participation

The hypothesis is that PHS can contribute to a double activation of workers, in both cases of mainly female workers:

- The domestic workers who provide PHS are predominantly women; this is not expected to change in the immediate future
- Within the household that begins to purchase PHS, the person (usually the woman) who currently carries out the bulk of care and household tasks, is more likely to want to work or to increase her working hours when freed from some of these household tasks and care responsibilities.

This is the case in **Sweden**, where the introduction of the RUT tax relief has had a positive impact on married women's labour supply essentially in the form of an increase of working hours.

The capacity of measures supporting PHS to enhance employment among people who are inactive is dependent on countries' cultural norms and skills levels of the population. Member States with generally low levels of education and skills are more likely to experience both the job creating capacity of PHS and the opportunities they offer to more skilled workers to trade care for a good job. In countries where substantial investments in human capital have been made, interest in working in PHS may be more limited. In light of this, enhancing the skill levels and quality of PHS jobs can increase productivity and better respond to the needs of households with specific care requirements. **Policies can thus lead to more challenging and better-paid jobs, encouraging people who may have previously shunned PHS jobs to take them on.** Countries such as Cyprus confirm the above since the provision of PHS has helped to maintain very high participation and employment rates generally. Women particularly achieved rates beyond those in the EU-28, at least until circa 2010, when the Cyprus crisis set in. In **Belgium**, there is subjective evidence, based on self-reporting, that 22 % of respondents using service vouchers helped to increase or maintain their working hours, but econometric evidence is lacking. In the case of domestic workers however, there is more evidence that the scheme has increased the employment rate of low-skilled women (see Table 3).

In **Germany**, time gains from not having to do housework or basic care can also be used to prioritise certain family responsibilities over others. This might encourage couples that otherwise would feel that they would not have enough time for children to start a family, as reflected in a recent study (see table below).

4.2 Impact on work-life balance

As described in the France country articles, there is evidence that PHS may help families to better reconcile their work with their private lives. Childcare and caring for one's parents can be a barrier for some people to be employed, work full-time or hold positions of responsibility requiring frequent or prolonged absences from home. Given the unequal sharing of domestic chores among couples, it is plausible that the use of PHS can help a fringe of women to better reconcile their family life with their work. However, this is rarely the case for precisely the women who work as domiciliary workers, with fragmented and atypical working times.

Nevertheless, in France, measures supporting PHS have helped **increase the use of PHS by all households regardless of their sociological profile, even by jobseekers.** But the rate PHS use is highly correlated with social status (socio-

professional category and income level). Overall, 13.2 % of French households used personal services in 2011 compared to 10.5 % in 2005. In number, this represents 3.8 million user households in 2011, an increase of 45 % since 2005 (Benoteau and Goin, 2014). Part of this increase can be explained by demographic and societal factors such as women's participation in the labour market and the popularity of tax incentives on PHS purchase. However, another part can be explained by a regularisation effect of moonlighting. Some of the new users of these services are former users who employed an undeclared employee.

4.3 Impact on job creation

The country articles highlight the difficulties in estimating the exact numbers of people employed in PHS and the exact numbers of new jobs created or grey economy jobs being normalised. Official data only show formal employment whereas the field is dominated by informal and undeclared work, at least in some countries. In addition, official data do not always make the distinction between those offering services in the home or in a structure.

For instance, in Austria, the scarce information currently available on whether the availability of PHS has impacted the labour supply points to differing effects in different sectors:

- In the long-term care sector, a relatively high number of jobs have been created via the legalisation of 24-hour care. These are mostly performed by women from neighbouring countries, with potential problematic effects on their work life balance. The labour market effects resulting from the availability of 24-hour carers, on caring relatives, on carers in mobile care services, and in institutional care facilities, are unknown.
- In contrast, the potential for PHS in childcare appear limited. Most of the service is offered by formal childcare services which have (ideally) sufficient and adequate space, staff, educational material etc. and which help socialise children. Also, parents express the desire for high quality childcare (see Bergmann et al. 2014). Rather than supporting PHS for childcare the supply of childcare facilities should be improved. Regarding the issue of work-life balance informal childcare at home mostly has the function of temporary service in exceptional cases e.g. when children are ill or bridging gaps when no formal childcare is available.

The table below summarises the job creation impact of a selection of key measures and the cost of such job creation (or transformation) for the public authorities, where this is available.

Table 4. Number and cost of PHS jobs created

Country	Name of Measure	Number of jobs created	Cost of measure	Cost per job created
Austria				
	Service Voucher Scheme (SVS)		EUR 2 billion (0.5 % of GDP) in 2013. Accounting for direct and indirect earn-back effects, the external evaluators of the scheme estimated the net cost of the scheme at EUR 1.07 billion (Idea Consult, 2014, p. 74). The earn-back effects flow (mainly) back to the federal government (who pays unemployment benefit and receives social security contributions), whereas, since the sixth reform of the state, the cost of the scheme is born by the regional government. This complicates the political economy of the scheme. When also counting for indirect effects, the complete earn-back divides the gross effect by four, making the estimate very speculative.	The annual cost per beneficiary of the SVS (EUR 14 478) is comparable to the cost of sheltered workshops (EUR 14 742) and substantially higher than (permanent) wage subsidies for people with disabilities (EUR 7 984) or for employees aged 55 years and above (EUR 1 449), and higher than temporary hiring subsidies for the unemployed under 25 years old (EUR 858). The comparison with sheltered workshops is particularly appropriate as it is reasonable to assume that the earn-back effects are roughly similar. While the SVS primarily attracts women with no or little formal qualifications, often of foreign origin, the sheltered workshops focus on people with disabilities, the latter being clearly more disadvantaged and vulnerable than the former.
Belgium				
	Home Care System	In 2015, there were 9 030 and 25 160 home care and home help employees in the French and Flemish Community, respectively.	The home care and home help has a fixed annual budget, whereas the budget for the Service Voucher System is not fixed. In 2018, subsidies for home care and home help in Flanders is budgeted at EUR 681 million. In Wallonia, the budget for home	The cost per job – not accounting for earn-back effects – is EUR 27 066, while the cost per full-time equivalent job is EUR 41 641.

					care amounted to some EUR 180 million in 2016.
					Cyprus
					Denmark
	2005 law and previous reforms	Borloo and	The creation of over 250 000 jobs in PHS services between 2005 and 2015 (DARES, 2017). However, these jobs are mostly part-time. In FTE, job gains are much smaller. There were only 88 000 additional FTE jobs between 2005 and 2015. France is far from the target of creating 500 000 jobs in 3 years	Policy has contributed to the creation of over 250 000 jobs in PHS services between 2005 and 2015 (DARES, 2017). However, these jobs are mostly part-time. In FTE, job gains are much smaller. There were only 88 000 additional FTE jobs between 2005 and 2015. France is far from the target of creating 500 000 jobs in 3 years	.
France			The main impact of this policy has been the regularisation of some undeclared labour. Undeclared work declined sharply by 30 points between 1996 and 2015 according to different sources, passing from around 50 % of the sector in 1996 (Flipo, 1998), to 28 % in 2005 (Marbot, 2008) then 25 % in 2011 (Benoteau and Goin, 2014) and finally 20 % in 2015		<p>Total tax expenditures and social contribution exemptions to promote this sector were assessed at some EUR 6.4bn in 2014. When also including direct subsidies partly paid by local governments, and general policy measures to reduce the cost of labour, the gross cost of government policies for PHS rises to slightly below EUR 11.5bn (Lebrun, Fournat, 2016).</p> <p>The "gross" tax and social security revenue, primarily in the form of social contributions, generated by the sector is estimated at EUR 8.7bn. The estimated tax and social security revenue derived from the PHS sector can be used to assess the fiscal balance of revenue collected on PHS at slightly more than EUR 2.7bn, which is deducted from the cost of support policies (id.).</p> <p>The fiscal balance varies depending on the nature of the activities. It is in equilibrium for household support services (with a very slight surplus of EUR 70m) and shows a deficit of EUR 2.8bn in the case of care services. (id.)</p>
					The average cost of a job created has been estimated between EUR 24 000 per year (without windfall effects) and EUR 48 000 per year (with windfall effects). This cost is an average, and it depends on the precise type of personal services. It is higher in home-based care services for dependent people (EUR 61,000 according to Lebrun and Fournat, 2016), compared to daily services for non-dependent people (EUR 36,000, <i>ibid.</i>). This figure is to be compared with the estimated cost of unemployment which lies between EUR 20 000 and 28 700 per year per unemployed person (EFSI, 2012, Gadrey, 2016).

		(CREDOC, 2017).	
Germany	Household cheque procedure (<i>Haushaltscheckverfahren</i>)	It is plausible that UDW turns into mini-jobs in some cases, the net effect probably positive. But, mini-jobs hinder social integration, professional development, and gender equality (Bundesregierung 2017: 117)	
Ireland			
Italy			
The Netherlands		It is not clear whether this market will develop due to recent budget cuts in formal care, preference of women for part-time work and absence of public tools to transform PHS needs into formal jobs	
Portugal	SAD and ECCI	c.16 000 jobs created (conservative estimate) representing approx. 0.6 % of the private sector salaried workforce	Public expenditure for the SAD (EUR 227 million) represents approximately 1 % of the total amount paid during one year by social security for social benefits. (No data obtained on expenditure on the ECCIs).
Spain	LAPAD (2006)	184 216 jobs created between 2006 and 2016 linked to the LAPAD	
Sweden		Some 14 000 jobs in renovation services and	For 2009, the estimation of the number of new FTE jobs created was 4 000 for Several reports have assessed the outcomes of the tax incentive

more than 4 000 in housework services. The calculation is the following**:
In 2009, tax deductions amounted to over SEK 900 million, which correspond to expenses on the market (including VAT) of nearly SEK 2 billion. With an average hourly rate (Including VAT) of SEK 300, this corresponds to approximately 6.7 million hours worked, or approx. 4 000 FTE jobs.

scheme concerning domestic chores (RUT-advantage). According to Företagarna (Swedish Federation of Business Owners), 4 000 new jobs were created in the housework sector*. The outcome is really positive as the RUT scheme has allowed many people to move from unemployment or undeclared work to declared employment. The public scheme also stimulated the creation of new companies.

More recent data integrating growth from 2009 to 2010, increases the estimate to 5 000 FTE jobs. Almost all is assumed to previously have been moonlighting, or non-existent¹⁴.

Source: Country articles by ECE labour market experts (unless otherwise stated)

¹⁴ NOTES: *Företagarna, Två år med ROT och RUT (Two years with ROT-concerning renovation services and RUT -concerning domestic chores), August 2010. <http://www.foretagarna.se/Aktuellt-och-opinion/Rapporter/-2010-/Tva-ar-med-ROT-och-RUT/>

* Calculation made by Företagarna, Två år med ROT och RUT (Two years with ROT and RUT), August 2010

4.4 Cost for public finances

Evidence from Belgium and France shows that the gross cost encouraging households to use personal services is expensive for public finances. There is also evidence from Denmark, Sweden and France that the tax incentives benefit the most advantaged social classes. In Sweden, the RUT tax relief has largely benefited high earners. But it is also important to take on board the earn-back effects to have some indications concerning the net cost for public finances of the PHS support.

In Belgium, one explanation for the high budgetary costs of the SVS is that the scheme is accessible to all households at a fixed price, regardless of the need for domestic services or their income. Because the scheme is now so popular, it has become politically sensitive to reform and take on the vested interest of all stakeholders involved (users, employers and employees). As already mentioned (see page 19), taking into account the earn-back effect of this scheme, the costs are divided by two (taking into account direct effects) or even by four (when counting also for indirect effects, which makes the estimate very speculative (Idea Consult, 2014, p. 74).

In France, recent reports have estimated the cost-benefit impact of public policies to support the development of PHS (Lebrun, Fournier, 2016). These public policies consist of 15 measures directed at both the supply (social contribution exemptions) and demand (tax benefits and direct subsidies). There are also measures to simplify the access to the sector (e.g. through the CESU voucher set up since 2006). As stated in Table 4 above, the gross cost of these policies, including direct expenditures and foregone revenues, is estimated at EUR 11.5 billion (EUR 7.2bn going to the care sector and EUR 4.3 to household support services). The fiscal balance is calculated taking into account tax and social security revenue generated by PHS. The gross revenue (including social contribution, VAT, payroll taxes etc.) is estimated at EUR 4.3 billion in care services, leading to a negative balance (62.8 billion), and at EUR 4.4 billion in non-care services, with a very light surplus of EUR 70 million. The care sector benefits from much more direct subsidies from the government, while the non-care sector benefits from tax expenditures (reductions or tax credits). Another evaluative approach of interest is who benefits from these massive tax incentives. More than 60 % of tax credits go to the richest 10 % (Carbonnier and Morel, 2015).

In Denmark, there is a wide choice between tax deductions, direct grants or providing the services free seems to finance PHS activities. Here, the use of tax deductions risks causing adverse effects on the income distribution, while also being relative easy to administer. Also, politically, tax deductions have the advantage of not directly showing up as an expenditure on the public budget.

4.5 Effects on the development of regular employment in the sector

Aside from the cost for public finances, support for PHS also generates economic value, with major effects on regularising undeclared employment, as illustrated in Germany, France and Sweden. From this perspective, cost to public finances can be considered social investment.

In Italy, an ex-ante study by Assindatcolf & Censis (2015) estimates that the introduction of a total deduction of expenses borne by households (contributions and taxes) would have a positive impact both on employment, through the

regularisation of undeclared work and the availability of new jobs, and on the expansion of demand. A total deduction of the social protection charges for personal and household services would lead to:

- the emergence of 340 000 irregular workers;
- the creation of new 140 000 jobs;
- the direct effect of EUR 675 million as net effect between cost and benefit related to job creation and the emergence of the irregular employment;
- indirect effect of new 80 000 jobs in other sectors and VAT receipts generated by the availability of income connected to total deduction;
- the final public cost, between direct and indirect effect, would be EUR 72 million.

5 Quality of jobs in PHS

Even when jobs are created in PHS, they are low quality. In Austria and France, several research reports highlight the unfavourable and precarious working conditions in PHS as low income, high flexibility requirements and psychological or health-related burdens. Such working conditions are not just an obstacle to work-life balance, they are also a barrier to attract new (qualified) applicants to the PHS sector.

From the 12 countries covered by this Review, **only five (Belgium, Germany, Ireland, Italy and Portugal) have ratified ILO Convention 189 on Domestic Workers.** The remaining seven countries (Austria, Denmark, Spain, France, Cyprus, the Netherlands and Sweden) have not yet ratified the ILO Convention.

The France country report summarises the quality shortcomings of PHS jobs, as faced by workers in many of the countries covered by this Review. The hourly wages and social protection of most PHS jobs are low. Working times are fragmented. Career development is almost impossible to envisage. As for working conditions, the sector is characterised by high exposure to physical hardship and burnout. The rate of work accidents and absenteeism are significantly higher in these services compared to other occupations (Gayet, 2016). Employees providing the services also tend to work at the private home of the user which makes it difficult to deploy a prevention policy against occupational hazards. Because no professional title is required to apply for these jobs (i.e., for jobs at the lowest level defined by the branches) can be considered a failure to socially recognise their usefulness. This partly explains the lack of attractiveness of these professions to young people. The bad image of these jobs makes the good candidates avoid them (preferring work in hospitals, retirement houses or trade). As a result, 'good' service providers who want to improve the quality of their services struggle to find the right skills.

In both Belgium and France, there is evidence that the provider model is characterised by much better job quality than direct employment.

Belgium – improved working conditions for SVS employees

The working conditions of most SVS employees are legally set in the Joint Committee (JC) 322.01¹⁵ (a collective labour agreement between trade unions and employers' organizations), which is binding for all employees in the sector. Arguably, service voucher employees benefit from decent wages and working conditions, at least compared to domestic workers in most other European countries (Jokela, 2017). Their working conditions have certainly improved markedly compared to the working conditions of domestic workers before the introduction of the scheme when nearly all domestic work was performed in the informal economy at low wages and without full social security rights.

In 2013 70 % of the contracts were open-ended, while the remaining 30 % were fixed-term contracts (Idea Consult, 2014). These contracts are standard in Belgium and open full access to social security rights such as unemployment benefits, paid leave, health insurance, maternal leave and retirement.

The minimum gross hourly wage of SVS employees determined by the Joint Committee is EUR 10.86 from 1 September 2017 onwards. Domestic workers are also compensated for travel expenses. **While hourly wages are not particularly low, the total monthly remuneration of domestic workers is low because most employees work part-time or even only a few hours a week.** In 2015, the average gross monthly income of a SVS employee was only EUR 830. Surveys suggest that workers choose to work a limited number of hours.

In 2015 an employee worked on average three years for the same service sector company. One-in-four employees worked for the same employer for less than a year, while 25 % of the employees already worked more than 4.75 years for the same employer. This relatively long job tenure suggests that domestic workers are satisfied with their job. A survey among employees in 2011 confirms that 84 % of the employees are satisfied or very satisfied with their job, while 16 % are not satisfied (Idea Consult, 2012, p. 90).

There is debate among policymakers whether the SVS can be a stepping stone to (non-subsidised) jobs in other sectors but results so far indicate that this is not the case. One, three and five years after entering the domestic service sector respectively, only 16 %, 21 % and 23 % of workers are employed in a different sector. Most SVS employees either remain in the domestic service sector or are no longer active employees in the labour market (implying that they are either unemployed/inactive, self-employed or retired) (calculations based on a very large administrative sample by HIVA-KU Leuven).

In France, salary, training and social protection are also more advantageous in the provider model (Lefebvre, 2012) but some disparities are noted within the provider model. The associative offer generally produces a better job quality than for-profit companies, one of the reasons being the more advantageous collective agreement for the former. As non-profit organisations generally specialise in care services, this requires more qualifications and higher skills, which can improve the working time and the wages. But as a result, it may

¹⁵ Ninety percent of the SVS employees are registered in Joint Committee 322.01 (Pacolet et al., 2011). Other Joint Committees with SVS employees are, for instance, JC 318.01 and JC 318.02 (for home care and home help), JC 110 (textile), JC 140 (transport), JC 121 (cleaning). In general, wages are higher in these Joint Committees than in JC 322.01.

be a source of more mental strain, as carers face very complex and demanding situations (Messaoudi, Farvaque and Lefebvre 2012).

On the other hand, most private for-profit companies, micro-enterprises and also employees of private employers specialise in non-care services (household, ironing, gardening, cleaning, etc.), which are very low-qualified tasks. This explains the low quality of these jobs. These jobs are mentally less demanding. However, there is little preventive occupational health policy. According to a survey realised by the Ministry of Health, employees under the provider model delivering care services to dependent people, work on average 44 % more than employees in direct employment (Messaoudi, Farvaque and Lefebvre 2012). The number of people they help during a week is three times higher than in the direct employment model. These factors exacerbate the difficulties of work and the risk of burnout. By contrast, employees of private employers are less exposed to occupational hazards. This is due to lower working time and that in a lot of cases these employees may 'choose' their private employers. Whenever possible, they choose homes and people who offer them the least arduous working conditions (Avril, 2006).

From a general point of view, the liberalisation of these services, particularly the orientation of subsidies towards demand rather than supply, has contributed to the deterioration of the quality of these jobs (Carbonnier and Morel, 2015). The evolutions since the 2005 plan has led to an impoverishment of the personal service sector and a degradation of working conditions (Devetter, Jany-Catrice, Ribault, 2015). This regulation does not favour the emergence of a structured supply capable of investing in the quality of services and jobs. The domination of direct employment and the development of self-entrepreneurship illustrates this. These employees have almost no professional training and their social protection is lower than in other professions (Devetter and Lefebvre, 2015).

The need to have trained PHS workers is highlighted in most countries covered by this Review (including Denmark, Spain, France, Cyprus and Italy). **Spain and Cyprus have recently introduced initiatives to improve the training of workers in PHS and hence, their professionalisation and the quality of their jobs.**

In Spain, the LAPAD's main objectives has been the professionalisation and quality improvement of the long-term care services provided to dependent people. Although not fully implemented, it has provided, together with further regulatory changes, a new framework for the provision of professional care services to dependent people and the subsequent - still incomplete - transition to a model of social protection, from unpaid domestic work and informal employment in private homes to paid regular domestic work.

In Cyprus, the SWS and HRDA have recently introduced programmes of basic training for carers in hygiene, age-specific care, the handling of disabilities, and first aid to create a heterogeneity in the skills offered by carers and may lead to better resolution of needs, albeit at a higher cost. This is because programmes which encourage the development of these skills enhance both the job and the job done, but also justify higher earnings for the carer.

In conclusion, experts agree that the debate around exploiting the employment potential of PHS should be combined with the debate on the quality of service jobs and the quality of services provided. Solutions recommended by the country experts for the future, include that funding of further

training to be used in Germany draws on the voucher system of the Federal Employment Agency and the *Jobcenters* following the example of the pilot project in Baden-Württemberg (Bundesregierung 2017: 92). In Italy, it is proposed that universities could be an actor suited to the institutional promotion of specific training for care workers as it already does for social workers.

The Austrian report also emphasises that improvements by legislation or collective agreement appear important to attract workers in PHS, particularly bearing in mind expected rising demand in the long-term care sector. Safety nets are also needed for some of the new employment forms in PHS, based on a balance between the protection of workers and the need to make these new forms easy for employers to use.

6 Migrant workers in PHS

Most countries highlight that women and migrants dominate the PHS sector, including Belgium, Germany, Spain, France, Ireland, Italy and Cyprus.

In Cyprus, Spain and the Netherlands, foreign workers represent many of those performing undeclared work (in PHS). Their reasons for working in this sector may be because they are not (yet) permitted to work, and/or because they are illegally residing in the country concerned. In **Spain** for example, the irregular or undeclared economy appears fairly prevalent among foreign workers (particularly among foreign women) and non-professional care services (with and without accommodation) appear to be a widespread work option for irregular immigrants.

While there is evidence in some countries that immigrant female labour in PHS can indeed contribute to increased working hours for women, there are also concerns around the working conditions they face and that their status is often not regularised.

The difficult situation faced by foreign workers is highlighted in **Germany**, where many care workers hired from abroad perform tasks they are not qualified for. These foreign workers are also likely to work more hours than they should (Von der Malsburg/Isfort 2014: 2). Live-in employees who are solely responsible for people in need of care are specifically at risk of labour standards violations (e.g. long working hours, payment below the minimum wage). This is because many are migrants living full-time with their customers, which makes it difficult for the national authorities to monitor working standards (Bundesregierung 2017: 116).

Thus, the working conditions of immigrants in the sector are under debate. In 2013, Germany ratified ILO Convention 189 for Domestic Workers. Trade unions and NGOs stressed that working and living conditions for commuting migrant workers are of particular concern. Still, workers performing PHS have low income, excessive working hours, no social insurance coverage, experience insufficient occupational safety, and are at danger of physical abuse more frequently than workers in other sectors (Bundesregierung 2017: 116). Therefore, legal minimum standards need to be implemented, specifically for migrant workers and live-in workers who live under the same roof as their clients.

In **Italy**, the low level of fiscal incentives and the unconditional cash-for-care schemes have partly encouraged the growth of a large black and grey market in the personal and household service sector, discussed in the next section. The voucher system has not been able to tackle this issue. For migrant domestic and care workers, the need to reform the Immigration Law and the quota system needs to be considered. The current immigration system is still based on formal hiring from

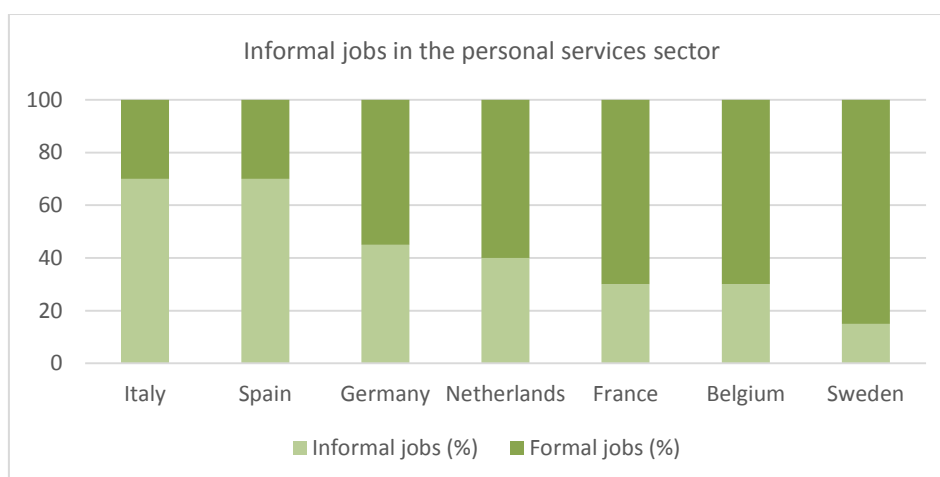
abroad, which is clearly not respected in reality, particularly for personal and household services. This leads to a slightly absurd situation where a family is not allowed to regularise a worker who does not have a visa but is living in Italy.

7 Undeclared economy in the PHS sector

This section looks at undeclared work within PHS. The EU definition of undeclared work refers to 'any paid activities that are lawful as regards their nature, but not declared to public authorities, taking into account differences in the regulatory systems of the Member States'. This definition includes both fully undeclared work and 'under-declared' work, i.e. where workers are paid in addition to their formal salary/wage, with the additional payment not declared to authorities (also known as envelope wages).

PHS is one of the economic sectors where undeclared work prevails. Although it does not include all the countries concerned, the chart below illustrates the estimated extent of undeclared work in PHS and shows how much it varies between countries; from 70 % of the personal services sector in Italy, to 15 % in Sweden.

Figure 11. Informal jobs in the personal services sector



Source: Étude sur les services à la personne dans sept pays européens, DGCIS, France, 2012. Data for France refers to the % of direct employers with declared employees.

It is important to recognise the difficulties associated with measuring the scale of undeclared work, for obvious reasons. This is highlighted in several country articles, e.g. the Netherlands, Portugal and Spain, where significant differences in available estimates are highlighted.

Similarly, the existence of undeclared work in PHS makes it difficult to estimate the size of the PHS sector itself. In **Austria**, for example, care provision performed by private individuals is not captured in official data. In addition, home repairs and gardening services are dominated by informal and undeclared work. Official data only show formal employment figures. Therefore, they do not paint a realistic picture of the size of the PHS sector.

There are several economic, social and cultural reasons for countries to have high rates of undeclared work in PHS. These include the difference in price, lack of transparency on the market, attitudes towards payment of taxes, and the circumstances of those who undertake undeclared work (e.g. illegal immigrants).

Regarding price, the country articles show that often, services provided by undeclared workers cost less than work performed under a formal arrangement. For

example, in **Denmark**, there is a wide variation in the savings from undeclared work but for undeclared work paid in cash, around 40 % of the users estimate a saving of around 50 %.

Even though there is no detailed reference to the hourly rate for undeclared work in all 12 countries covered by this Review, some estimates were provided in the country articles, as listed in the table below:

Table 5. PHS rates in the declared and undeclared economy

Country	Undeclared Hourly Rate	Relative wages in the declared and undeclared economy	Tax Wedge on low wage earners (2016, latest data) ¹⁶
Austria	No empirical evidence available. Undeclared hourly wages range from EUR 9 to EUR 15, with high regional disparities; anecdotal evidence (as an example see: https://kurier.at/wirtschaft/geputzt-wird-fast-immer-schwarz/806.494)	In the declared economy, a voucher (at least one voucher to be used per day of employment) can be used to pay for individuals working in private households, provided that pay plus holiday pay and pro-rata special payments does not exceed the monthly minimum wage rates and a maximum of EUR 600 EUR per month. In general, wages for undeclared work in household services correspond to 60 % -75 % of wages according to the minimum hourly wages in declared economy (corresponding minimum hourly wages)	43 %
Belgium	Estimates range from EUR 8.6 to EUR 12 per hour.	Tentative estimates of the hourly wage of an undeclared worker range from EUR 8.6 /hour (Idea Consult, 2010, p. 101) to EUR 12 /hour (Eurobarometer, 2014, p. 36). In (European) policy reports the SVS is often cited as a good practice to prevent undeclared work as service vouchers are cheaper than employing an undeclared worker	48 %
Cyprus	The 'going' hourly rate for undeclared PHS is about EUR 5 per hour	EUR 5 per hour compared to estimated wages and salaries of 13.30=38 %	Other labour costs EUR 2.67/estimated wages and salaries

¹⁶ Source: Eurostat. Eurostat provides data on the tax wedge on low wage earners. The 'tax wedge' on labour costs is defined as income tax on gross wage earnings plus employee and employer social security contributions, expressed as a percentage of total labour costs. This indicator is compiled for single people without children earning 67 % of the average wage. (No data for Cyprus)

		(Source: Eurostat (online code: lc_lci_lev).	EUR 13.30= 20 %. Source: Eurostat
Denmark	Average undeclared hour rate was EUR 18 (DKK 135) in 2014.	Relative wages for undeclared work in household services are typically 50 % -70 % of wages on the regulated labour market (Bendtsen, 2016)	34 %
France	No data, Lebrun and Fournia (2016) assume that the price of undeclared work is equal to the net wage. It can be assumed that the hourly rate in the undeclared economy is between EUR 8-10.	After the tax cuts, the price actually paid by households is lower than wages for undeclared work. Regarding care services, user fee after tax reduction is EUR 4.5 per hour while the minimum net wage stands at EUR 7.6 per hour, assuming that the employees would not accept to be paid less (Lebrun and Fournia, 2016)	43 %
Germany	Wide range in average undeclared wages for the economy as a whole, from EUR 1 - 5 per hour in 10 % of cases to more than EUR 20 per hour in 14 % of cases (2014 data, Enste 2017)	According to the Federal Mini-Job Authority ¹⁷ , a mini-jobber employed by a private household with an annual income of EUR 2 160 costs EUR 321.84 (14.9 %) in social security contributions and creates a tax bonus of EUR 496.37 (20 % of gross wage of 2 482.84). Due to the tax bonus, employing a mini-jobber might therefore be cheaper than employing a household helper illegally. However, for mini-jobbers employed by private households, the main disadvantage is the income ceiling of EUR 450 per month. It does not allow them to be full-time employed in a private household, while it is difficult to be self-employed in the PHS sector due to high bureaucratic barriers (Enste 2016:1).	45 %
Ireland	Using the 2013 Eurobarometer survey (European Commission, 2014), we	The declared wage in Ireland in 2013 was EUR 21.90 per hour (CSO, 2017) which implies a relative wage	21 %

¹⁷ <https://blog.minijob-zentrale.de/2016/01/12/steuern-sparen-mit-haushaltsjobs/>

	approximate the hourly wage using a weighted average of the cost of an hour of undeclared services and estimate the undeclared hourly rate in PHS to be approximately EUR 15	of 68.5 %. More recently, the declared wage was estimated at EUR 22.04 per hour in 2016 (CSO, 2017) ¹⁸ .	
Italy	Wages in the irregular market usually corresponds to the net hourly wage, namely about EUR 5 for domestic workers and EUR 8 for care workers	Several factors (geographical area, type of activity, citizenship status, etc.) affect the costs of a domestic and care worker working on the black / grey market, making it impossible to give an estimate of the average price.	41 %
The Netherlands	No reliable data available - about EUR 10-12 per hour	From anecdotal evidence, the 'going' hourly rate for undeclared PHS is about EUR 10-12 per hour, whereas the minimum in the declared economy, for relatives offering PHS (as intended by the government in 2014) was EUR 20/hour	31 %
Portugal	Undeclared hourly rate between EUR 3.50 and EUR 7, rough estimate of average is about EUR 5	Relative average undeclared wage in PHS is probably close to 80 % of declared average gross hourly rate (EUR 6) in PHS (EUR 6.00). (Sources: Calculations by the author based on the wage table "A" in the collective agreement CCT CNIS 2017; estimates by the author and by the interviewed trade union representative)	36 %

¹⁸ CSO (2017). Central Statistics Office, Earnings and Labour Costs Annual 2016, Cork: CSO.
<http://www.cso.ie/en/releasesandpublications/er/elca/earningsandlabourcostsannualdata2016/>

Spain	<p>EUR 10 for non-care activities (average prices offered on internet platforms and announcements, own estimation)</p> <p>EUR 6 for care activities</p>	<p>Relative wages for undeclared work in non-care activities are about 74 % higher than wages on the regulated labour market (possibly related to lower number of hours worked informally which increases the hourly price).</p> <p>On the contrary, for care activities, wages in undeclared work are 43 % lower than those on the regulated labour market. Possibly reflecting the high presence of irregular migrant workers and high number of hours worked in care activities. (Own estimations based on internet platforms and announcements).</p>	36 %
Sweden	<p>Average undeclared hourly rate in PHS ranges between EUR 10-13 (100-130 SEK) depending on the area.</p>	<p>Based on the hourly wage floor in the current collective agreement, the hourly wage in the PHS area amounts to EUR 11.5 (SEK 120) in 2018. We estimate the total hourly labour cost (inclusive of social contribution of 31.42 % and VAT 25 %) to EUR 19 (SEK 197).</p> <p>Based on the above hourly wage of EUR 11.5 (SEK 120), in 2017 the average monthly wage in the PHS sector for a full-time employee was EUR 2 020 (SEK 21 000) before income tax, or EUR 1 415 (SEK 14 700) after income tax. If we take an average hourly rate of SEK 100-130 in the undeclared economy for PHS the monthly labour income for a full time undeclared worker ranges between EUR 1 693-2 193 (SEK 17600 to 22800)</p>	41 %

Source: Country articles by ECE country experts, Eurostat on the tax wedge

The tax wedge, i.e., the difference between take-home pay and the total labour cost of workers in PHS is one reason for the difference in price between formal and informal work. **In Belgium, Cyprus, Denmark, Spain, the Netherlands and Sweden, the tax or fiscal wedge is cited as a factor contributing to undeclared work.** In Spain for example, the fiscal wedge is said to be the most important factor affecting the difference in the cost between regular and irregular workers. In the Netherlands, the difference between the net wage for the employee and the total wage costs of a regular employment contract is about EUR 13-14.

Spain's tax wedge, a factor contributing to irregular employment

Employers' social security contributions are 23.6 % of the regulatory basis (a proxy of the wage) and employees' 4.7 %. The social security contributions within the special system for domestic workers are 22.85 % for the employer and 4.55 % for the worker. Non-professional domestic workers, due to the 2012 reform which cancelled the state funding of their social security contributions, now need to pay their own contributions, which amount to 22.85 % of the regulatory basis (usually the minimum wage). This led to a drastic de-registration of non-professional carers from the social security system (from 180 000 in July 2012 to 8 500 in December 2017).

A lack of, or ineffective, public policies to tackle undeclared work in PHS, are identified as a factor enabling the informal market to continue in Italy and the Netherlands. For example, in **Italy**, it is suggested that the low level of fiscal incentives and the unconditional cash-for-care schemes have partly encouraged the growth of a large black and grey market in the PHS sector. This has a negative impact for the workers involved, who are at risk of exploitation, are not protected by safeguards and face precarious working conditions. As a result, they have low motivation to invest in their professional development. This situation has obvious consequences for the quality of services provided in the PHS sector.

Research in the **Netherlands** shows that households do not provide their service provider with the conditions of employment they are entitled to under the Home Services Scheme. Although most pay above the minimum wage (75 %), the rights to sick pay (11 %), holiday pay (11 %) and payment of holiday allowance (13 %) are rarely recognised. This is partly because employees who are working undeclared are less likely, or slower, to take the issue to court than formal employees. This situation has not improved with the new Arrangement for service provision at home, since this measure has not changed the legal position of the workers, compared to the black market.

An informal market also has negative consequences for the buyers of services because it lacks transparency, meaning that it is difficult to bring supply and demand together effectively. For example, in **Germany** one reason given for the presence of undeclared work in PHS is that households may struggle to find information about local household service suppliers and might also be overburdened by the bureaucracy of their role as (direct) employer of domestic service workers (Von der Malsburg/Isfort 2014: 2). As the PHS market is characterised by many small and recently-founded companies, many customers are often not aware of legal ways to obtain these services (Becker/Einhorn/Gebe 2012, p. 76-77; Weinkopf 2014, p. 23). Also, many private households employ undeclared workers because domestic services are often required at short notice (Von der Malsburg/Isfort 2014, p. 2).

The characteristics of PHS on the private market are one of the reasons identified for the prevalence of undeclared work in the **Netherlands**. The employer is a private individual, services are delivered in the employer's home, and (in some cases) the employer could do the work him/herself if needed. For these reasons, it is not easy to develop a formal market without additional policy, since there are two easy and attractive alternatives to a formal market: outsourcing on the black market or not outsourcing at all. Outsourcing on the formal market is, without additional policy, expensive for customers and unattractive for service providers (at least in the short term) due to the payment of taxes and premiums, as discussed above.

Foreign workers without regularised status also largely represent people carrying out undeclared work in PHS, as already described earlier.

In some countries where undeclared work is significant in PHS, there have been efforts to transform this into formal employment, notably via voucher schemes. There are many reasons to do so, including the poor working conditions faced by undeclared workers, the creation of an 'uneven' playing field for employers in the sector and the loss of tax and social security contributions.

The **Belgian** service voucher scheme (SVS) had three objectives, one of which was to reduce informal sector activities¹⁹. The vouchers are priced competitively (EUR 6.30 per hour in 2017 including the tax deduction, lower than the hourly wage of an unofficial worker in Belgium) which should encourage a switch from undeclared to declared work. The lack of reliable data makes it difficult to assess whether the SVS reduced undeclared work in the domestic service sector - there are no reliable estimates of the number of undeclared workers before the introduction of the scheme. Nevertheless, the Eurobarometer surveys on undeclared work conducted in 2007 and 2014 tend to confirm that undeclared work is decreasing in Belgium²⁰. Among the respondents who admitted having purchased goods and/or services connected to undeclared work, 10 % admitted having purchased home cleaning services on the informal market in 2014 (European Commission, 2014, p. 25), whereas in 2007 31 % reported having purchased household services on the informal market (European Commission, 2007, p. 102). This suggests that cleaning services are now less frequently performed by informal workers than in the past, a trend that might be driven by the SVS.

Service vouchers for direct employment arrangements are also used to tackle undeclared work in PHS in France (CESU) and Austria (Service Employment Cheque, Dienstleistungsscheck). In **Austria**, the aims of the household service vouchers were to reduce informal work and to improve domestic workers' social protection. The continued increase in the use of the vouchers suggests *'that the objectives of transparency, availability, accessibility, affordability and administrative processing have been met for users'*. (EFSI 2013, p.12). However, it is likely that informal work is more attractive to employers, since the wage level for undeclared work is likely to be below the defined minimum wage.

¹⁹ The other two objectives were to create low-skilled jobs and to improve the work-life-balance of SVS users.

²⁰ Note that the sample size for Belgium of the Eurobarometer is most likely too small to determine with any acceptable precision whether the size of the undeclared economy is decreasing. In 2014, 1000 individuals participated in the survey, of which 150 admitted having bought services and/or goods connected to undeclared work.

The **French** example shows the positive impact of public policies on reducing the share of undeclared work. In 1996, half of households did not report all hours purchased (Flipo, 1998). With the introduction of the 2005 Borloo plan, which has integrated new daily life services into the perimeter of tax deduction and also introduced the CESU voucher, the share of households not declaring their employees decreased to 25 % in 2011 (Benoteau and Goin, 2014). In 2015, this share would have decreased to 20 % (CREDOC, 2017) following the trend started since 2005.

In Denmark and Sweden, tax deduction schemes supporting the purchase of household services were used to tackle undeclared work (alongside other objectives). Available evidence suggests that, to date, these have been more effective in Sweden than in Denmark, as shown below.

In **Denmark**, reducing undeclared work was one motive behind both the 'Home Service Scheme' and later the 'Housing Job Scheme'. But neither scheme was found to have had the intended impact on undeclared work. A detailed analysis of the effects of the Home Service Scheme concluded that that the scheme had increased household demand for the subsidised services on the white market (De Økonomiske Råd, 2011, p. 416), but that these did not lead to a measurable reduction in undeclared work. Instead, the reduction was found in relation to do-it-yourself work and (previously) unperformed tasks. An evaluation of the Housing Job Scheme (Damvad 2017:23-27) also suggests limited effect. Overall it is estimated that approx. 5 % of the craftsman and household work for which deductions have been made would have been performed as undeclared work without the scheme.

In comparison, available evidence suggests that the **Swedish** scheme supporting the purchase of personal services (RUT) had a larger impact on both labour supply and undeclared work. It is suggested that this is due to the scheme's larger generosity and that it had been permanent since 2007-8 (Skatteministeriet, 2017c:11-13).

New types of contract have been introduced in Germany and the Netherlands but their impact on undeclared work is unclear. With regard to the **German** mini-jobs scheme, it is plausible that undeclared work could be transformed into mini-jobs in the private household sector, and thus the net effect is probably positive. But mini-jobs hinder social integration, professional development and gender equality (Bundesregierung 2017, p. 117). Furthermore, for mini-jobbers employed by private households, the main disadvantage is the income ceiling of EUR 450 per month. It does not allow these workers to be full-time employed in a private household, while it is difficult to be self-employed in the PHS sector due to the heavy administrative burden, which leads to a high incidence of undeclared work in the PHS sector (Enste 2016: 1).

In the **Netherlands**, the Arrangement Service Provision at Home creates a specific status alternative to the classical employer-employee relationship (Panteia, 2014). Customers no longer have obligations to the government which means that for them, there is by definition no more undeclared work. The service provider is still obliged to report to the tax authorities, yet the Arrangement does not contain any incentives for them to do so. Research shows that only 21 % of the service providers say they report to the tax authorities and meet their fiscal obligations.

Two countries have recently introduced initiatives and so their impact on undeclared work is not yet clear. The **German** programme 'Perspective Re-entry' (*Perspektive Wiedereinstieg*), which aims to help people who took a career break

for (family) care reasons to get back to work, also aims to reduce undeclared work in PHS. The programme provides information to private households on (legal) possibilities to procure PHS. In **Portugal**, it is likely that domestic support for adults with a disability, disease or disorder is currently provided by family members or domestic workers hired by the users or their families. In the future, the MAVI-programme will reduce this market and its potential for undeclared work by offering qualified and subsidised services.

However, there are several barriers to tackling undeclared work in PHS. One is that enforcement authorities may not be able to enter private households to carry out inspections – this is mentioned in Spain, Germany, France and the Netherlands. In **Germany** for example, informal employment as well as payment of the minimum wage is tracked by the customs administration. But according to article 14 of the German constitution, the inviolability of the home is protected. Without a warrant, household members can prevent customs officers entering their home (Enste 2017, p. 19). This makes it difficult for authorities to ensure that the working hours of directly employed workers correspond to their paid wage.

In Italy and the Netherlands, it is suggested that more needs to be done to tackle undeclared work in PHS. In the **Netherlands**, the growing number of women in work is increasing the demand for household services. Yet without (sufficient) public tools to transform this demand into formal jobs, this additional demand is expected to occur mainly in the informal market. In **Italy**, only modest efforts have been made at regional level to tackle the issue. The private market for personal and household services is not regulated for cultural and institutional reasons. The high demand for PHS means that Italian families form one of the strongest 'employers' in the Italian economy. Indeed, the system of the private PHS can generate important economic returns and boost employment, including during periods of economic crisis. Yet most Italian families do not receive any support for the purchase of such services, which means that they are struggling to cope with the costs. The unregulated private market remains the best mechanism to both control cost and to boost employment.

8 Difficulties faced by families around work-life balance

The difficulties faced by families around work-life balance can be summarised as problems reconciling work with:

- **Long-term care responsibilities**
- **caring for small children**
- **securing quality time with children because of household chores**
- **gendered division of unpaid care work and house work, where women bear most of the burden of care and house work**
- **precariousness**, i.e. high proportion of women in temporary contracts, which prevents them from exercising their maternity leave rights (see Spain report).

First, regarding long-term care responsibilities, some insight into the difficulties faced by carers is provided by **Ireland's** QNHS (Q3 2009) survey focussing on those providing unpaid informal care, where 66 % of carers say that their

health/lifestyle has been affected by caring²¹. Most commonly, they report that caring has been confining, led to family adjustments and changes to personal plans. More specifically, 23 % reported making work adjustments, 19 % report financial strain, while 23 % reported feeling completely overwhelmed. **Solutions can include long- term care leave arrangements, such as those introduced in Austria, despite their shortcomings. Austria** has introduced long-term care leave (*Pflegekarenz*) to organise care for frail dependents/family members for one to three months per case, which can be extended from three to six months if the health status of the dependent person worsens substantially. The Austrian care leave schemes show a limited take-up rate. They are mainly taken up by women and part-time flexible schemes are difficult to arrange with employers. Care leave schemes allow carers to deal with a new situation at the beginning of a care need. However, they do not cater for the need for care which often continues over several years.

Regarding the second challenge, families with very small children also face challenges in childcare. Parental leave for fathers and availability of childcare for small children (younger than 3 years old) can provide solutions. Analysis from **Austria** reveals that reconciliation of work and family is particularly difficult to achieve in the first two years following the birth. Overtime, atypical working patterns, irregular working hours and excessive working hours and time pressure are cited as other factors that create problems in the reconciliation of work and family (Schönherr 2017, BMASK 2018).

In **France**, the difficulties of reconciling work and personal/family life concern a significant portion of active people (all employees whether parents or not): 33 % according to the Malakoff Médéric survey (2014) and 39 % according to the INSEE survey (Garner, Méda and Senik, 2005). A dependent child greatly increases the number of people affected by these difficulties of reconciliation. About 48 % of active households with one or more dependent children believe they experience reconciliation difficulties (Garner, Méda and Senik, 2005).

Several studies in France have also shown that the difficulties of reconciling work and family life can be a reason for reducing the labour supply of women (Galtier 2011, Collet and Rioux, 2017, Briard, 2017). Temporary withdrawal from the labour market or the reduction of working hours is a solution for many women to reconcile work and family life (Collet and Rioux). One-in-two women who has stopped working due to the birth of a child explained this choice by the incompatibility of their work (working hours, working time, commuting time, etc.) with their family life (Garner, Méda, Senik, 2005). These results are consistent with studies about women's labour supply. A recent study (Briard, 2017) shows that women's labour supply is more elastic, particularly when they are mothers, compared to single women or men. In other words, a woman with one or more dependent children would be more likely to leave the labour market or reduce her working time compared to a childless woman or a man.

Third, conciliation difficulties are reported in the country articles in securing quality time with children because of household chores. Financial support for PHS would be a solution but the challenge facing policymakers is securing the necessary resources to support such schemes. In a survey by **Denmark's** LO trade union, many parents (also members of the union) found that

²¹ CSO, 2010.

time after work is too crowded with practical tasks rather than with 'quality time' with the children. On the other hand, few members of LO could afford to pay for practical assistance. Only 8 % have help to pick up children, clean, garden or shop. A significantly larger proportion (every fifth), however, believed that cheaper help to pick up children, for cleaning, etc. could improve their balance between family life and working life.

Finally, stereotypical views on the division of roles between women and men persist in most countries, where the share of housework and care work still falls predominantly on women:

- In **France**, inequalities in the distribution of domestic chores among couples also explain the reduction in women's working time. Women spend 4 hours and 47 minutes each day on domestic and parental tasks compared to 1 hour and 55 minutes for men, i.e. 2 hours and 52 minutes more (Collet and Rioux, 2017). Even when they work full-time, mothers spend two hours more than fathers each day on domestic and parental activities (*ibid.*). The use of personal services can relieve women of these domestic tasks and allow them to maintain their working hours.
- In a survey by **Denmark's** LO trade union members, four out of 10 parents believed that a more even distribution of work in the home between parents could improve the balance between family life and working life. Women particularly demanded a more even balance.
- In the **Netherlands**, stereotypical views on the division of roles between women and men have by no means disappeared during the past decades and women generally prefer part-time work to allow them to combine work with their private life, household, care for children, and informal care. Almost 69 % of the employed women in the Netherlands work part-time. On the plus side, there are lots of high-quality, part-time jobs available with terms of employment largely the same as for full-time jobs.
- **Austria** also reports a high part-time employment rate for women of 47.9 % in 2016 which reflects the gendered division of paid work and unpaid care work. This can also be seen in the indicator for the time spent in unpaid care work per week, where there is a gender gap of -17p.p (Eurostat LFS).

By contrast, in Sweden the gender division of unpaid work (care and domestic activities) is much more evenly distributed than other EU Member States. As highlighted in the Sweden country article, according to the European Institute of Gender Equality (2018), in 2015, Sweden had the highest gender equality index and has maintained its top position since 2000. The country has not only experienced the highest female employment rate in the EU and a clear convergence of the employment rate between men and women, but the patterns of labour market integration of men and women across the life course are currently similar. Publicly financed childcare and elderly care, inclusive of home care, together with a flexible and generous parental leave system, are the main work-life balance policy instruments to foster continuous employment across the life course and favour gender equal opportunities. **Reversible time options and flexible leave systems with full employment guarantees across the life course appear to be efficient tools to offer workers better opportunities to adapt their working time to various family and social commitments and secure their employment trajectories across the life course. PHS can also be seen as an additional option for people who want to work more.**

9 How employers support their workers to obtain PHS

Financial support from employers for their workers to purchase PHS appears relatively limited. Examples of this were only identified in France, Italy and Spain.

In **France**, employees can receive financial support for the use of personal services from their employer or their works council. This could be a 'CESU HR' voucher, or a cash transfer to the employee's account. The financial support is limited to EUR 1 830 per person per year, exempt from social charges. In 2013, around 650 000 employees made use of the CESU HR allowance; three-quarters of whom were in the private sector and the remaining quarter in the public sector. Figures from 2014 show that the CESU HR vouchers totalled EUR 232 million and is said to be increasing by around 7 % per year (APECESU, 2014). The financial support is mainly used to help people to reconcile their private life and work; the majority (71 %) is used to finance childcare. As such, it is seen as a tool to address social inequalities, since it helps employees earning a modest income who might otherwise find it difficult to pay for childcare (even though the maximum amount remains insufficient to cover the cost of childcare). Without it, these employees might either reduce their working hours, or stop working altogether.

Vouchers for personal and household services were introduced under the 2016 and 2017 Stability Laws in **Italy**. But the scheme was interrupted following the CGIL referendum²² since it was criticised as a means to avoid benefits from collective bargaining and of creating precarious jobs. As a result, following the 2017 Stability Law, the financial contribution is now only available for working mothers, to be used in place of parental leave, to cover the costs of childcare services.

In **Spain** too, vouchers are offered by some employers to pay for childcare for children under the age of three. Although a legislative change in 2013 means that these are no longer exempt from social security contributions, they are still exempt from income tax, meaning that parents can benefit from a discount of approximately 20 % of the childcare cost. But there are no data available on how many workers or companies make use of these vouchers.

Other non-financial support provided by employers to their employees include leave arrangements, flexible working arrangements and national-level guidance and recommendations.

In Austria, Cyprus, Germany, Portugal and Spain, on-site childcare may be offered by employers, although this tends to be larger firms and childcare provided at home is not supported. For example, in **Germany**, company-funded care services are tax-free for the employer so long as care is provided in an institution (e.g. a kindergarten). In contrast, care services provided at home, and which are financed by the employer, are not tax free.

Leave arrangements to help employees to cover PHS were mentioned in Austria and the Netherlands. In **Austria**, these are long-term care leave and family hospice leave. In the **Netherlands**, use of PHS is seen as an individual choice which is not the responsibility of the employer. However, the 2001 Work and Care Act (*Wet arbeid en zorg*) included new and already existing leave arrangements to make it

²² In 2017, one of the most important trade unions in Italy, the Italian General Confederation of Labour (CGIL), proposed two referendums to cancel the voucher system successively approved by the Constitutional Court.

easier for employees to combine work and care. These include short-term care leave for employees who need to look after a sick child and long-term care leave to look after a child, partner or parent who is seriously ill for an extended time. However, unless other arrangements have been made in the applicable collective labour agreement (CAO), no salary is paid during the leave. Figures from the National Statistics show that of the 443 000 employees (245 000 women and 198 000 men) who regularly took care of a sick family member and/or for a longer period in 2013, 17 % took some sort of leave. Most used short-term care leave (35 %) but many employees used their holiday to care for a seriously ill relative (31 %).

Flexible working arrangements are another way for employers to support employees to address PHS. For example, in the **Netherlands**, employers can help to make working arrangements more flexible, so that employees can decide where and when they work, e.g. teleworking, shift trading and job sharing.

In Denmark and Germany, national-level initiatives exist to provide guidance/recommendations to employers on steps they can take to support their workers. In **Denmark** for example, the Commission on Family and Working Life suggested initiatives employers could take to improve work-life balance, including ensuring that employees have a high degree of working time flexibility and other aspects of work such as the option to work from home occasionally (Familie - og Arbejdslivskommissionen, 2007:59-68). In **Germany**, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) published a guide for employers (2017b: 23-25) which suggests that companies should make framework contracts with household service providers to support their employees in financing PHS. In **Spain**, the Ministry of Health, Social Services and Equality has created a forum to promote the exchange of good practices and experiences in gender equality, called the DIE Network (Network of companies with the Equality in Enterprise Label).

10 Emergence of new actors in PHS

Several countries, including Austria, Germany, Denmark and Ireland, report rapidly growing activity in the so-called platform economy, where online platforms have been developed in recent years. Platforms match employers and workers in PHS-related occupations such as cleaning, catering, childcare or child supervision and handicraft and home repair activities. **Data on the size of the platform economy in terms of number of workers involved and their income are sparse.** Austria notes that the agencies are very reluctant to provide information on business figures so data are unavailable, but some efforts to estimate the size of the platform economy have been made in Denmark, as outlined in the box below.

Denmark – Characteristics and possible size of the platform economy in PHS

In Denmark, in 2018, it is estimated that there are approximately 17-20 work exchange platforms, where demand and supply for labour meet (Disruptionrådet, 2018, p. 7-9). A rough guess based on data from a limited number of Danish work exchange platforms indicates that by the end of 2017, there were more than 25 000 providers on the six platforms that supplied data, with approx. 7 000 users on the platforms.

In 2017, the Research Centre for Labour and Organization Studies (FAOS) at the University of Copenhagen conducted a study on who uses digital work platforms in

Denmark to earn an income. This study estimated that 42 000 Danes had earned money by accepting tasks through a work platform during the past year (Ilsøe and Madsen, 2017, p. 40). Most, however, had only worked for a few hours.

The platforms convey very diverse types of work. Most platforms provide so-called 'gig-work', which refers to work where the provider must be physically present at the location where the assignment is to be performed. For example, it may be cleaning, small jobs or transportation tasks, the most relevant for the present review. Young people are particularly active on this type of platform. They typically have a vocational or upper secondary education as the highest completed education and a marginal attachment to the labour market (Disruptionrådet, 2017, p. 10-11). The growth of the platform economy has also caught the eye of the trade unions, who have expressed a positive attitude, but only on the condition that work and pay conditions meet the usual standards of the Danish labour market (LO, 2016).

Despite their recent rapid growth, these labour exchange platforms still play a very limited role within the Danish labour market. Based on data on hourly rate and number of hours sold, a cautious estimate of total spending on workplaces is somewhere between DKK 25 and 40 million (EUR 3.3 and 5.3 million) (Disruptionrådet, 2017, p. 9).

In **Germany**, portals have been developed both by public authorities (such as the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) and the Federal Mini-Job authority) and by private entities (even though the quality of services provided by the later is often low).

In **Austria**, agencies emphasise their role as broker and do not appear as employers or purchaser. The service providers are self-employed. In some cases, the service providers must produce a trade licence. Platform-related self-employment also includes criteria of casual work (where service providers will be contacted in the case of a service request) and portfolio work (where someone self-employed works for a large number of clients, doing small scale jobs for each of them). The service provision via platforms does not comply with labour rights, such as minimum wage, overtime premium, night and weekend surcharge, social insurance, holiday and leave pay as labour rights, are difficult to enforce via online platforms. Due to these conditions, it can be assumed that working based on crowd work employment will not provide an income equal to that of a full-time employment contract. The nominal hourly wage might be higher than the collective agreement wage, but an aliquot share of 13th and 14th salary²³ and social insurance are not included.

Looking forward, two of the country articles refer to **the future impact of digital platforms on work in PHS**. In **Germany**, PHS portals are identified as tools that can potentially help to increase transparency of supply and demand, while also informing their customers and users about the registration process and working condition regulations. A more cautious view is taken in **Spain**, where it is suggested that digital innovation and the collaborative and sharing economy in PHS offer both an opportunity and a challenge, where labour in PHS is characterised by extreme precariousness. It is suggested that it will be vital to combat this precariousness, to allow the availability and the quality of services to increase.

²³ Christmas bonus and holiday bonus are part of the yearly income of employees and are also called 13th and 14th salary.

In other countries, the PHS sector has not seen a notable rise of new solo-entrepreneurs or new platforms that provide services. This is particularly true in Belgium, which could be because the sector is dominated by the Service Voucher Scheme. New platforms offering domestic services are emerging, but this evolution is still in an early phase.

In France, the penetration of collaborative platforms in PHS has also not been that significant in recent years. Some platforms are developing particularly around housework (cleaning), targeting young, connected and well-off households in urban areas. Other emerging platforms rather represent a danger to traditional craftsmen working in houses (e.g. painting, DIY, plumbing or gardening). This tendency appears limited for the time being, but it might encourage traditional providers to accelerate their digitalisation.

The use of work exchange platforms can be part of more general developments where more of the workforce are self-employed and freelance. This trend is particularly noticeable in Denmark and France.

In **Denmark**, a study was conducted in 2017 that looked into freelance employment. The survey estimates that in the second quarter of 2017, there were approximately 120,000 out of 2.8 million employed people who considered themselves freelancers. This corresponds to 0.5 % of the workforce (Danmarks Statistik, 2017). In addition to the increase in solo-entrepreneurs, the introduction of the option to choose private service providers for domestic care has created several often small firms that mostly provide cleaning and other practical assistance to the users. The firms are chosen following a licensing round and must have a contract with the municipality. The quality of their services is also monitored. Over the years there have been several examples of small service providers that go out of business because they have underestimated the cost of running their operation in the bidding procedure. This has led to some debate particularly where the firms go bankrupt overnight and suddenly leave the municipality without the resources to care for the needs of elderly users.

In **France**, the status of self-entrepreneur (now called 'micro-enterprise') created in 2009 is a form of self-employment with a favourable tax regime (exemption from VAT and social security contributions for three years). The process of setting up a micro-enterprise is simplified which increases its attractiveness to the unemployed. In addition, there is no regulatory barrier to setting up a micro-enterprise other than declaring one's activity to the tax administration. Thus, the PHS sector is a target of choice for micro-entrepreneurs. These services do not require start-up investments to start a small business. The only start-up expenses is communication and marketing. There is also no minimal qualification required for basic level jobs in these services; i.e., jobs at the lowest level of the scale defined by the collective convention (very rare compared to other economic sectors) and simple tasks such as cleaning (but not care services). This has attracted many people away from the labour market or retraining. Despite these facilities, micro-enterprise remains a marginal supply of personal services, only representing 1 % of the number of hours of service. There were 7 920 active micro-enterprises (which report hours worked) in 2015 compared to 3 900 in 2010, an increase of 100 % (all sectors included). The number of hours worked by these micro-enterprises amounted to 3.6 million in 2015 against 1 million in 2010, hence an increase of 260 % in five years while the market for these services decreased by 3 % during the same period. One of the characteristics of these auto entrepreneurs is their specialisation towards daily life

services for non-dependent households, for example in the field of small DIY, home school support, gardening, etc.

11 Conclusions and recommendations

Currently, there are between 7.4 million (according to NACE data 88+97) and 7.9 million people (according to ISCO data) working in PHS in the EU.

Based on the Eurostat data concerning 'social work activities without accommodation' and 'activities of households as employers of domestic personnel' (with the latter category considered with caution as mentioned previously), one might recently observe **an increase in social work activities and a decrease in activities of households as direct employers, for most countries (see Annex 1). This might be a sign of institutionalisation of work in PHS but needs to be further analysed.** Recent elements indicate a consolidation of the sector, but important steps still need to be taken.

PHS is an analytical category that does not always correspond to national institutional pathways. In very few countries is there an all-encompassing legal definition of personal and household services, covering both care and non-care services delivered at home. But in almost all countries there are well-established institutions in care services and non-care services. Some countries have experienced recent legal developments in their care system for dependent people. The promotion of care services is directly linked to pressing societal and demographic change. In the field of non-care services, the legal apparatus is most often oriented towards offering incentives to households to purchase formal services, to create a formal market for home-based services, and to fight undeclared labour relationships and their detrimental impact on workers and public finances. However, as indicated, these activities ('care' and 'non-care' services are often articulated in practice, even though they might correspond to different institutional frameworks.²⁴

Increasingly, PHS are considered an efficient tool to improve labour participation. It has been illustrated in various country reports that PHS services can improve work-life balance and enable women to increase their working hours. By using PHS, the consumers of these services can save time. These minutes or hours gained daily can be invested in taking work, increasing working hours, or further training and/or improving work-life balance.

PHS are also often seen as impacting job creation, which may recover either the creation of new activities or the formalisation of pre-existing, previously undeclared jobs. This is where certain difficulties arise from a statistical point of view, i.e. when estimating the exact numbers of people employed in PHS, as emphasised above, or the exact numbers of new jobs being created, or grey

²⁴ As mentioned by Farvaque (2013), 'One can distinguish between "care" activities and "non-care" activities, depending on the state of being of the recipient of the service or his/her needs. One can say that care services are provided to (dependent) persons with special needs (long-term care for older people, care services to disabled persons, childcare services), while "non-care" services will rather be provided so as to improve the well-being of the recipients. However, it is important to note that the same service (e.g., cleaning the home) can be considered as part of the overall care provided to a dependent person, or just a convenience service helping non-dependent people to have more free time or better conciliate their work-life balance. As well as far as conciliation issues are concerned, the distinction can sometimes be difficult to maintain'.

economy jobs being normalised. The return on investment of public strategies to foster job creation needs to be scrutinised in detail, since they often rely on expensive measures, costs that are tempered when direct earn-back effects are taken into account. This is even more important, when, as in Belgium, there is no hard evidence that the scheme boosts the employment of the most vulnerable jobseekers or acts as a stepping stone to better jobs in other sectors. Direct and indirect effects need to be taken into account in the economic assessment. Social effects also need to be considered, as public spending to foster demand of PHS through tax cuts for example may result in wider inequalities.

A fundamental question is whether these policies create new jobs and new opportunities associated with good employment quality and good working conditions. In some countries, the trend is the development of a second labour market for migrant, low-qualified, women. Can these jobs be considered a stepping stones to other jobs, to genuine career prospects, to social integration? The issue is to recognise the usefulness of the sector and to offer good conditions to people working within it. Some households appear unwilling to pay for PHS as these are perceived as simple tasks they can perform themselves without having to spend money. Many consumers are therefore unwilling to pay an appropriate market price²⁵. This leads to low wages in the sector, which further reduces the reputation of household-related services. Specifically, work in non-care PHS is perceived as an employment opportunity for people hard to place, whereas what the sector needs is well-trained and skilled professionals who offer reliable high-quality services. Behind this is the complex issue of productivity gains in the service sector, above all based on the human factor. Increasing productivity in the medium or long-term might result in lower prices or higher wages. Such an increase could be obtained through better use of technology and investment in training.²⁶ Considering new technology therefore cannot be dissociated from skills development, as mentioned above. New digital technology can help improve back-office productivity and also improve the co-ordination between actors. What is more difficult to foresee are the results of the relationship between people and front office activities, but they can obviously improve the quality of the service (for instance tele-assistance devices).

All this clearly indicates the need to strengthen the sector. It is essential to act to create and consolidate a strong PHS sector to utilise its full potential and to avoid missing opportunities. **An important challenge is to build a high-quality PHS sector, for which high-quality employment is needed.** The risk of failing to achieve this is that too many women (and men to a lesser extent) abandon inactivity, not only because of lack of good quality and affordable care services, but

²⁵ What an appropriate price is of course depends on many elements, either individual or environmental. Two persons may have distinct subjective appreciations of what the normal price for one hour of personal services should be, depending on cultural assumptions for instance. Also the relative position of the potential user is influential. The opportunity price of one hour of service (compared to the alternative solution where the user would do the service by him/herself) varies depending on his/her income. Also environmental factors should be taken into account, related to the fixation of price (the local price is not the same in big cities or more rural areas), existing opportunities (the extent of the black market for instance), credible threat of sanctions, etc.

²⁶ European Commission, Staff Working Document on exploiting the employment potential of the personal and household services, SWD (2012) 95 final, p. 14.

also because of lack of interest in working in a sector that currently offers poor working conditions.

The possibilities of social innovation and taking advantage of technological changes are promising, but, again, attention needs to be paid to employment quality and working conditions. Several research reports illustrate unfavourable and precarious working conditions in PHS including low income, high flexibility requirements or health-related burdens. Such working conditions are not just an obstacle to work life balance, they are also a barrier to attracting new (qualified) applicants. This clearly shows the importance for public authorities of elaborating a real strategy about these jobs, based on a multi-level approach (promoting the development of economic sectors, reinforcing actors in the field, stimulating the professionalisation of employees and a skill-development strategy, encouraging industrial relations, etc.).

Improvements via legislation or collective agreements appear important to attract people to jobs in PHS, particularly bearing in mind the expected increased demand in the long-term care sector.

Safety nets are also needed for the new employment forms in PHS, based on a balance between the protection of workers and the need to make these new forms easy for employers to use. All in all, it can be concluded that the debate on exploiting the employment potential of PHS must be led in conjunction with the debate on the quality of service jobs and the quality of services provided. In several EU Member States, however, government agencies are promoting programmes to enhance the skills of carers and to advertise their availability, leading to real improvements and adding to the dynamism of labour markets. National policies can be supported by a genuine social dialogue, promoting workers' rights and working conditions.

Employment models, generally characterised by two forms (the provider model and the direct employment model), may develop in the future with the emergence of digital platforms. **The PHS sector has not yet been significantly affected by the 'gig economy', even if new digital operators attempt to penetrate the market.** The model more at risk is the direct employment model. The service provision via platforms involves new risks to be analysed: they do not always comply with labour rights, such as minimum wage, overtime premium, night and weekend surcharge, social insurance, holiday and leave pay as labour rights. Legislation must therefore be adapted to regulate these new forms of provision. New atypical patterns of work, such as self-employment or the 24-hour model in certain countries – which mostly involves migrant workers – also need to be regulated by the law.

The first recommendations would be to **continue research projects, particularly around working conditions, in the formal or informal market and in new forms of work (gig economy, self-employment, 24-hour service, etc.).**

A general recommendation, already suggested in recent reports, is to **continue efforts to promote professionalisation of PHS.** By promoting the professionalisation of PHS, e.g. by implementing minimum standards or establishing further training programmes for PHS workers thereby improving the quality of services performed, demand for good quality PHS might be raised and the willingness to pay for better services increased. This would also help to improve working conditions of PHS workers. In some countries when quality rankings have

been introduced, this encourages employers to improve working conditions. Service quality and quality of employment can therefore be intertwined.

The development of national (or regional²⁷) approaches to increase the use of PHS can also be recommended. These programmes need to be carefully evaluated both in economic terms (regarding their efficiency in creating new jobs, their cost-effectiveness) and in social terms (as regards their impact on social cohesion and inequalities). For example, the development of voucher systems could be promoted, particularly targeting low-income households (currently the case in a pilot project in Baden-Württemberg – see German national report). Vouchers are a tool that can be used to implement a specific social policy as in this case. More globally, vouchers can serve to foster the demand of PHS thanks to a simplification of the process (as in France or Belgium).

Involving employers in PHS provision should be encouraged, following examples such as in France, . Employers could play a much more prominent role in supporting PHS consumption by their employees.

One may also pledge to extend regulations of PHS provision in social policies, at several levels, for example: in the family formation phase; for reintegration into work; for workers with elderly care duties; for elderly people who are not by definition in need of care but need help in their daily life; for single parents; for low-income households; for parents with a disabled child, etc.

²⁷ From the point of view of an ex ante cost-benefit analysis, the development of regional policies can be much more complex to forecast as some of the earn-back effects may go to the national level and not at the regional level.

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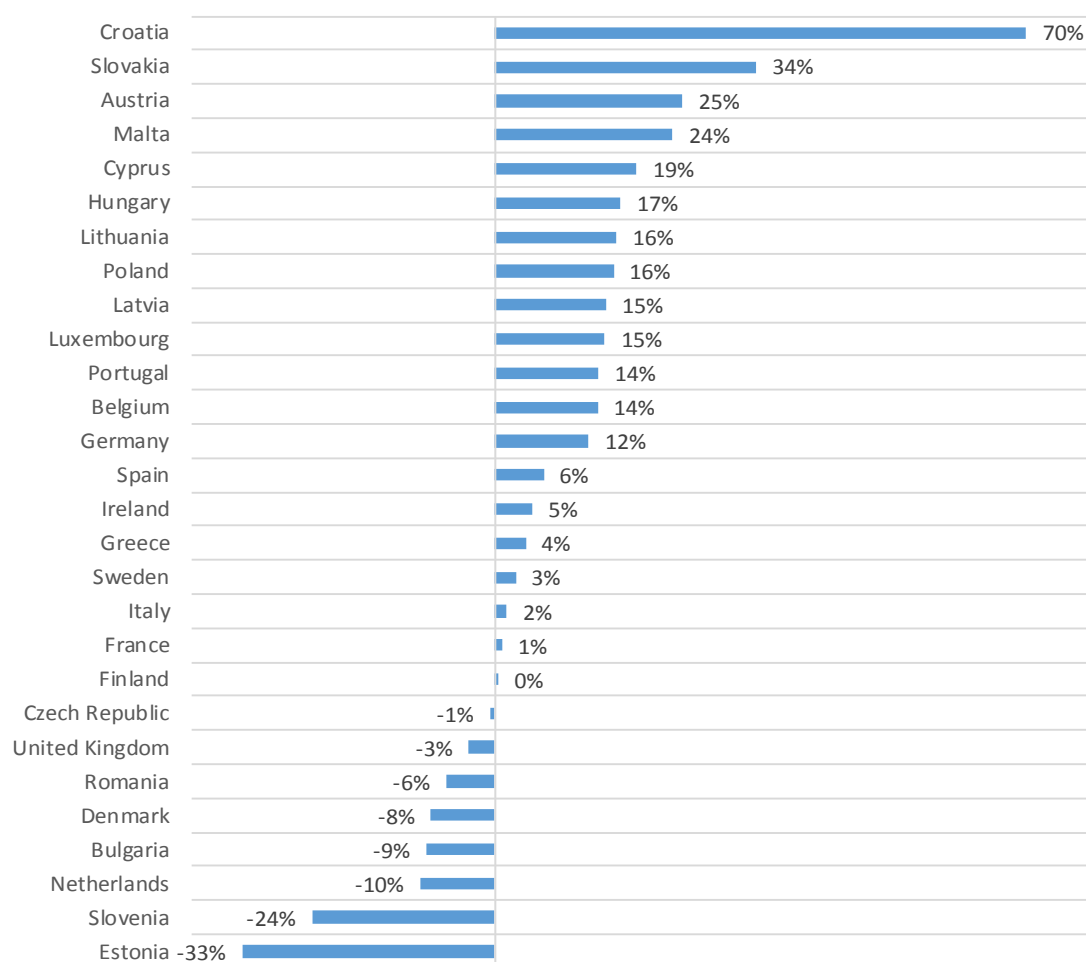
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Annex 1

Figure A1. Country variation in employment in the PHS sector over time (social work activities without accommodation)

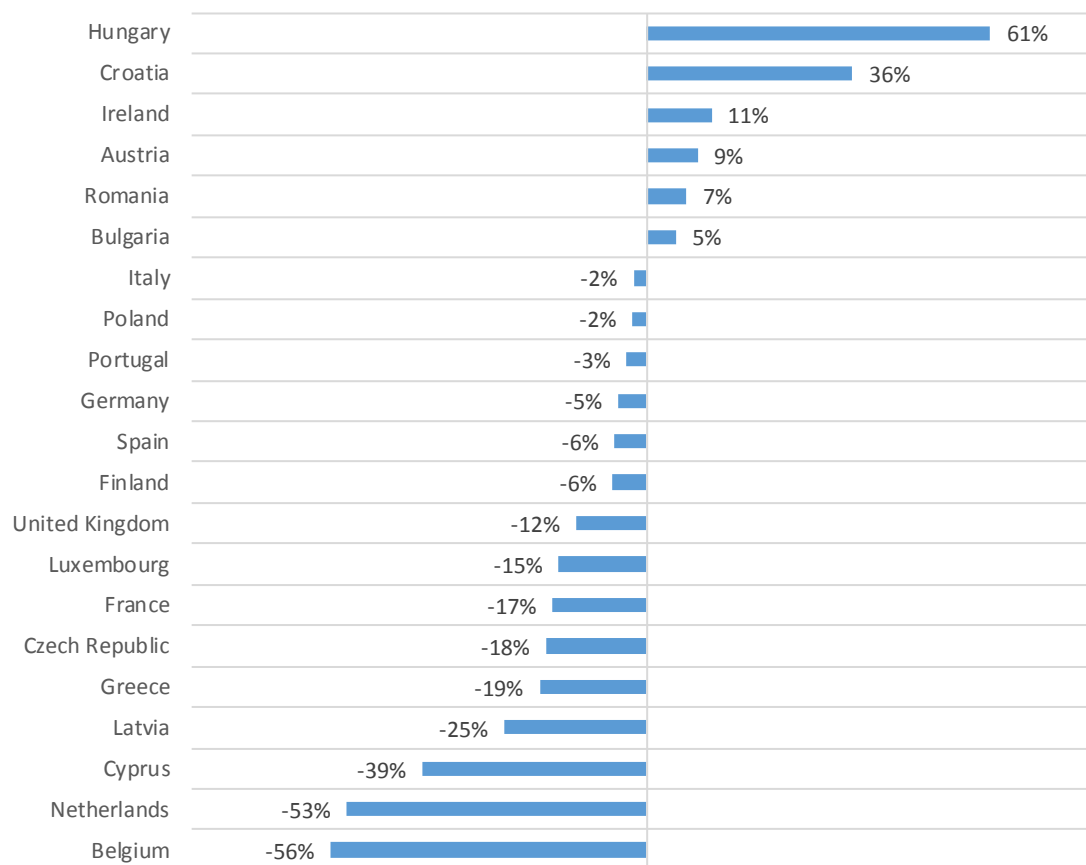
Percentage change in employment between 2014 and 2016 for 'Social work activities without accommodation', 15 to 64 years



Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two digit level) - 1 000 (Ifsa_egan22d)

Figure A2. Country variation in employment in the PHS sector over time (activities of households as employers of domestic personnel)

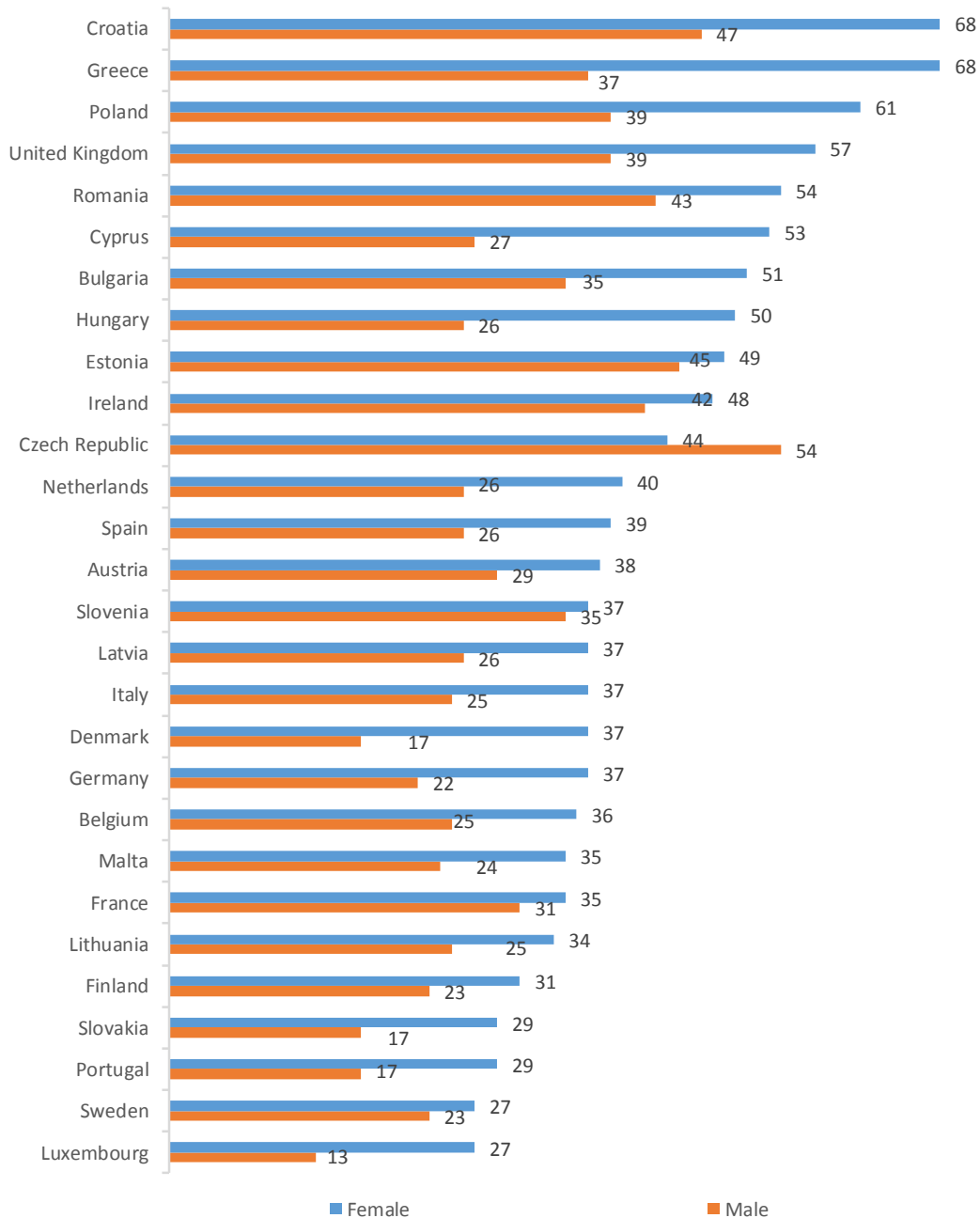
Percentage change in employment between 2014 and 2016 for 'activities of households as employers of domestic personnel', 15 to 64 years



Source: Eurostat LFS, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two digit level) - 1 000 (Ifsa_egan22d). No data for Denmark, Estonia, Lithuania, Malta, Slovenia, Slovakia, Sweden.

Figure A3. Challenges in combining paid work and caring responsibilities

Percentage of females and males finding it 'rather difficult' or 'very difficult' to combine paid work (say 10 hours per week) with care responsibilities' (2016)



Source: Eurofound European Quality of Life Survey 2016

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