



Peer Review on “Work-life balance: promoting gender equality in informal long-term care provision”

Online, 3-4 December 2020

Synthesis report



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1 Introduction

The Peer Review focused on policies improving the reconciliation of care and work and the equal sharing of informal long-term care between men and women, as well as measures taken by employers to encourage a gender-equitable distribution of care. The objectives of the Peer Review were to explore challenges and good practices of gender equality in informal long-term care provision.

The Peer Review was hosted by the German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth. It brought together government representatives from the Host Country (Germany) and seven peer countries (Czechia, Spain, France, Latvia, Malta, Portugal, Slovenia). Representatives of the European Commission, as well as a thematic expert who put the topic in the wider context of EU policy, were also present.

At the EU level the European Pillar of Social Rights and the Directive on work-life balance for parents and carers require Member States to find new ways of supporting the vital contribution that informal carers provide, by adapting employment arrangements and making long-term care (LTC) systems more accessible, affordable and responsive.

Reconciling work and informal care provision has been a growing challenge for individuals and families for decades, and has risen up on the agenda of policy-makers and employers. Especially during the COVID-19 pandemic the importance of sufficient income and social protection of informal carers, who carried out their role in an extremely challenging environment, were under the spotlight. Effective policies to support informal carers of working age can yield major economic gains. Ultimately, establishing gender-equitable arrangements for care offers a crucial opportunity to create a better, fairer Europe.

Despite the existence of legislation to promote gender equality and to enhance balancing employment and care responsibilities, most informal caregivers are women. Participants reflected on employment and long-term care policies that aim at a better work-life balance between work and care responsibilities, such as flexible working arrangements, support measures and care leave. In addition, the Peer Review focused also on company culture and measures by employers to promote an equal sharing of care responsibilities.

The German long-term care system relies heavily on home-based care provided by informal carers of working age (mostly female). Recent legislation has provided employees with more time flexibility and employment security so that they can care for their relatives and stay in employment. This was done through the Caregiver Leave Act and Family Caregiver Leave Act. These two laws provide the legal framework for Germany's care leave policies and were both amended in 2015 by the Act to Improve Reconciliation of Family, Care and Work. The latter act also introduced a carer's grant (*Pflegeunterstützungsgeld*) for the time of a short-term absence from work for up to ten days (twenty days during the COVID-19 pandemic), a legal entitlement to family caregiver leave (*Familienpflegezeit*) as well as a legal entitlement to an interest-free loan during the leave arrangements.

1.1 Background and purpose of the Peer Review

Over the last decades, women have become increasingly more active on the labour market. While the employment rate of women in the EU-27¹ in 2001 was 56.6%, it grew to 67.3% in 2019². The employment rate gap between men and women consequently decreased at EU level from 16.4 percentage point in 2005 to 11.7

¹ Eurostat, 2019. Employment and activity by sex and age - annual data [lfsi_emp_a] https://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=lfsi_emp_a&lang=en (31.07.2020)

² As above.

percentage point in 2019³. However, women are still underrepresented on European labour markets. Moreover, 31.3% of women in employment work part-time, compared with 8.7% of men⁴.

The gender employment gap appears to be tightly linked to the unequal distribution of caring and professional responsibilities between men and women. Women providing family care for close relatives (e.g. partners, children with disabilities, elder relatives) tend to reduce their paid work or leave the labour market for prolonged periods. Caring responsibilities are the reason for inactivity for almost 31% of inactive women, while this is only the case for 4.5% of inactive men⁵.

People who need support in daily life because of illness, disability or frailty in old age rely usually on a combination of informal care and formal care services. The support comprises informal care, provided by families, neighbours and friends (usually unpaid) and formal care services, provided by a paid workforce in private households, institutions and local communities. All long-term care systems in Europe rely on informal care which is often seen as a cost-effective way of preventing institutionalisation and enabling users to remain at home⁶. Estimates suggest that as much as 80% of all long-term care in Europe is provided by informal carers⁷. The available estimates of the number of informal caregivers range from 10% up to 25% of the total population in Europe⁸. Informal care is likely to become even more important in the future due to demographic changes, health care advances and cost-containment pressures leading to the favouring community care options over institutionalisation.

The unequal distribution of care (and other household) responsibilities between men and women is reflected in the fact that globally women tend to perform three times more unpaid work than men⁹. Even if more women than in the past participate in the labour market, also because of part-time work possibilities, unpaid work in the private sphere is still done largely by women. Therefore, women's increase in labour market hours is not accompanied by a more balanced sharing of domestic and caregiving work between women and men¹⁰.

As in other Member States, the German long-term care system relies heavily on working-age (mainly female) family caregivers in order to meet the care needs of the chronically ill, disabled or elderly. Within the last two decades the gender care gap in family care did not narrow substantially: although providing family care when of working-age is not only a women's issue, women still do so more often and with greater intensity than men. In addition, family caregivers are less likely than non-

³ Eurostat, 2019. Gender employment gap (percentage points)[SDG_05_30]

http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=sdg_05_30&lang=en (31.07.2020)

⁴ EUROSTAT, 2019. *The life of women and men in Europe – a statistical portrait*. Digital publication. Accessed at: <https://ec.europa.eu/eurostat/cache/infographs/womenmen/wide-menu.html?lang=en> (31.07.2020)

⁵ European Commission, 2019. *Factsheet: A new start to support work-life balance for parents and carers*, <https://ec.europa.eu/social/BlobServlet?docId=17583&langId=en> (17.12.2020)

⁶ Zigante, V., 2018. *Informal care in Europe. Exploring Formalisation, Availability and Quality* Directorate-General for Employment, Social Affairs and Inclusion (DG EMPL), Brussels: European Commission. <https://ec.europa.eu/social/main.jsp?catId=738&langId=it&pubId=8106&furtherPubs=yes> (17.12.2020)

⁷ Hoffmann, F., & Rodrigues, R. 2010. *Informal carers: who takes care of them?* POLICY BRIEF APRIL 2010 European Centre for Social Welfare Policy and Research, Vienna

⁸ Zigante, V., 2018. *Informal care in Europe. Exploring Formalisation, Availability and Quality* Directorate-General for Employment, Social Affairs and Inclusion (DG EMPL), Brussels: European Commission. <https://ec.europa.eu/social/main.jsp?catId=738&langId=it&pubId=8106&furtherPubs=yes> (17.12.2020)

⁹ United Nations, 2015. *Human Development Report 2015*.

http://hdr.undp.org/sites/default/files/hdr15_standalone_overview_en.pdf (17.12.2020)

¹⁰ European Commission, 2019. *Report on equality between women and men in the EU* Luxembourg: Publications Office of the European Union, 2019.

https://ec.europa.eu/info/sites/info/files/aid_development_cooperation_fundamental_rights/annual_report_ge_2019_en.pdf (17.12.2020)

caregivers, and female caregivers are less likely than male caregivers, to be employed.

1.2 The EU policy context

At the EU level, the European Pillar of Social Rights (EPSR)¹¹ aims at delivering new and more effective rights for citizens. This covers the areas of equal opportunities and access to the labour market, fair working conditions, and social protection and inclusion. Regarding long-term care, the EPSR establishes the right to affordable long-term care services of good quality, in particular home-care and community-based services (Principle 18 on Long-term care). The EPSR also states that 'People with caring responsibilities have the right to suitable leave, flexible working arrangements and access to care services' and that 'women and men shall have equal access to special leaves of absence in order to fulfil their caring responsibilities and be encouraged to use them in a balanced way' (Principle 9 on Work-life balance). The principles of the EPSR have become even more important in the current context, to ensure that the transitions of climate-neutrality, digitalisation and demographic change, as well as the recovery from the COVID-19 pandemic, are socially fair and just. A Pillar Action Plan will be presented in early 2021 to further support the implementation of the Pillar.

In recent years, the EPSR translated into concrete actions and instruments, such as the Work-life Balance Initiative¹², which addresses challenges faced by working parents and carers, encouraging a better sharing of caring responsibilities between women and men. The initiative was also part of the implementation of the Commission's Strategic Engagement for Gender Equality 2016-2019 and of the UN Sustainable Development Goal 5 on gender equality. Within the measures introduced by the Work-life Balance Initiative, the Directive on work-life balance for parents and carers¹³, adopted in 2019, aims at addressing women's under-representation in employment, encourages an equal sharing of family leaves and flexible working arrangements between women and men with caring responsibilities and provides opportunities for workers to be granted leave to care for relatives. The Directive includes measures such as the introduction of paternity leave, strengthening of the existing right to four months of parental leave, by making two out of four months non-transferable from a parent to another. The Directives also regulates a carers' leave for workers providing personal care or support to a relative or person living in the same household for five days in one year, as well as the extension of the existing right to request flexible working arrangements to all working parents and all carers.

In December 2020, with the adoption of the conclusions on 'Tackling the Gender Pay Gap: Valuation and Distribution of Paid Work and Unpaid Care Work'¹⁴, the Council called the Commission and the Member States to greater efforts to reduce the gender pay gaps in the care sector, and to combat gender stereotypes, using all available measures, and to follow up on the measures set out in the EU Action Plan 2017 – 2019 on Tackling the Gender Pay Gap. The conclusions highlight a two-step approach to achieve both equal pay and comprehensive equality on the labour market: firstly, paid and unpaid care work need to be shared on an equal basis between women and men, and, secondly, the provision of public infrastructure and external services is

¹¹ European Commission, 2016. *The European Pillar of Social Rights*. Accessed at: https://ec.europa.eu/commission/priorities/deeper-and-fairer-economic-and-monetary-union/european-pillar-social-rights/european-pillar-social-rights-20-principles_en (17.12.2020)

¹² European Union, 2017. *Communication from the Commission to the European parliament, the Council, the European Economic and Social Committee and the Committee of the Regions an initiative to support work-life balance for working parents and carers*. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=COM%3A2017%3A252%3AFIN> (16.12.2020)

¹³ European Union, 2019. *Directive of the European Parliament and of the Council on work-life balance for parents and carers and repealing Council Directive 2010/18/EU*. Accessed at: <https://data.consilium.europa.eu/doc/document/PE-20-2019-INIT/en/pdf> (16.12.2020)

¹⁴ Council Conclusion on 'Tackling the Gender Pay Gap: Valuation and Distribution of Paid Work and Unpaid Care Work', 2020. <https://www.consilium.europa.eu/media/47063/st13584-en20.pdf> (17.12.2020)

crucial to allow for the outsourcing of care work. The conclusions also invite Member States to further develop or establish a framework, including collective agreements, where relevant, for the sharing of paid work and unpaid care work between men and women on an equal basis. Closing the gender pay, pension and care gaps is intended not only to reduce women's exposure to poverty, but also to support business by increasing the talent pool available on the labour market, and helping them to retain workers, reduce employee absence and enhance employee motivation and productivity.

2 The situation in Germany

2.1 The current situation

As in other countries, a growing number of people in Germany will become family caregivers at some point in their life. In 2019, about 4.3 million people in Germany needed long-term care¹⁵. The German long-term care insurance supports primarily care at home, to a large extent provided by family members and support from volunteers. With its benefits, a choice between cash benefits, benefits in kind or a combination of both, most long-term care recipients receive cash benefits, so are therefore likely to be supported by a family carer at home. In 2019, out of the 4.3 million people in the need for long-term care, 3.14 million were cared for at home and around 30 % of these cases involved professional care¹⁶.

In Germany, there are thus around 4.8 million informal caregivers; out of which 3.1 million are of working age and fit to work and 2.5 million are actually in employment. According to the SOEP (*Sozio-Ökonomisches Panel*) 59% of all informal caregivers are women. The largest gender difference can be observed amongst people of working age. In 2017, 43 % of all family caregivers were women of working age, compared to 26 % men of working age¹⁷.

In general, many caregivers tend to reduce their working hours or even quit, leading to disadvantages on the labour market on the long run. Between 2001 and 2017, the proportion of family caregivers in paid work increased from 49% to 71% for women and from 61% to 70% for men, indicating that more family caregivers than before combined family care with paid work. However, caregivers are integrated in the labour market to a lesser extent than non-caregivers and female family caregivers spend significantly less time on the labour market than non-caregiving women.

Depending on the amount of family care provided, women and men in Germany face difficulties in balancing family care and paid work. In particular, low-intensity care provision cause difficulties for women and men to keep their full-time employment, which leads to part-time work. However, when care needs increase and informal care for more than 10 hours per week is needed (high-intensity care), women are more likely to leave the labour market entirely, while male caregivers are less likely to reduce or interrupt their paid work¹⁸.

Moreover, research has demonstrated that at the end of a family care period, women in Germany tend not to take up the opportunity to access the labour market again or to increase working hours, either because they do not want to or cannot increase their labour market engagement. It was also pointed out that more research is needed into the reasons and motivations of (not) returning to the labour market of female family caregivers (see also employment reintegration programmes addressing family

¹⁵ Data from the German Federal Ministry of Health.

¹⁶ See Host Country Discussion Paper, available here:

<https://ec.europa.eu/social/main.jsp?langId=en&catId=1024&furtherNews=yes&newsId=9841>

¹⁷ See Host Country Discussion Paper, available here:

<https://ec.europa.eu/social/main.jsp?langId=en&catId=1024&furtherNews=yes&newsId=9841>

¹⁸ Ibid.

caregivers on page 15). Part-time work or the entire withdrawal from the labour market results in lower wages and thus lower pensions for many women. Existing gender inequalities may increase further, since women tend to suffer the career penalties and wage loss associated with family care in addition to the already existing inequalities on the labour market. The 'Gender Care Gap' project¹⁹ reviews the allocation of unpaid care work between men and women and tries to reason some of the inequalities.

Box 1: Pay Gap, Care Gap, Pension Gap: Interlinking Key Gender Gaps for Germany to monitor Gender Equality and Taking Action

The project 'Pay Gap, Care Gap, Pension Gap: Interlinking Key Gender Gaps for Germany to Monitor Gender Equality and Taking Action' was implemented by the German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth, and by the Institute for Social Work and Social Education (ISS e.V.), with funding from the 'Rights, Equality and Citizenship Programme 2014-2020'. The project investigated how women and men allocate unpaid care work and came to the conclusion that this depends on many factors, such as institutional and legal frameworks.

The gendered allocation of paid and unpaid work results from the cumulative effect of choices made by men and women at key events during the life-course, like starting a family, returning to work after childcare leave or providing support for older relatives with care needs. Once individuals choose whether to prioritise work or family care responsibilities at these crucial turning points, it becomes very difficult to reverse course and re-focus later in life.

One of the goals of the German Federal Government is to strive for equal division of responsibility between family and work. The Second Gender Equality Report²⁰, prepared by the Expert Commission on Gender Equality, promotes the establishment of the work-care reconciliation model, which enables all people, depending on their requirements, to provide home-based care in addition to going to work. Compensation is required for income-loss in times of informal care and the Expert Commission recommends using tax revenue to pay for a flexible time budget of 120 days and compensation for loss of income equivalent to the parental allowance.

In line with the conclusions of the Report, Germany's new Gender Equality Strategy²¹ calls for the introduction of an earner-carer model, entailing a gender-equal organisation of paid work and (unpaid) care work and provides everyone, irrespective of gender, with the possibility to combine employment and care work during the life course.

Box 2: From a Dual-Breadwinner to a Dual-Earner-Carer Model

In the context of demographic ageing, labour market participation of men and women has been supported and family caregivers have been expected to follow the norm of an adult worker model. Employment ensures also access to social protection and is

¹⁹ German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ). 2020. *Who takes care of children, household and the elderly?* <https://www.bmfsfj.de/bmfsfj/meta/en/publications-en/who-takes-care-of-children--household-and-the-elderly-/160284> (17.12.2020).

²⁰ German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ). 2018. *Summary of the Second Gender Equality Report*. <https://www.bmfsfj.de/bmfsfj/meta/en/publications-en/second-gender-equality-report/122440> (17.12.2020).

²¹ German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ). 2020. *The Federal Government's gender equality strategy*. <https://www.gleichstellungsstrategie.de/rgs-en> (24.03.2021)

important for both financial and psychological reasons. As a consequence, policies aiming at supporting working family caregivers are urgently needed.

Families need to be able to live in dual-earner-carer arrangements (universal adult worker model) without being overburdened or exposed to the risk of facing financial hardship. This balance can be achieved if both partners can flexibly arrange their working hours such that they can both contribute to care responsibilities, therefore sharing paid as well as unpaid work. In addition, formal care services should be strengthened to ensure support from formal care providers is available when needed in order to respond to frequent or high-intensity care needs. The government should reshape employment and care work to create good framework conditions that enable women and men to allocate and divide their employment and care work.

2.2 Legislation on reconciling paid work and LTC

In Germany, the political discourse on long-term care started in the mid-1980s, with a strong focus on long-term care financing. Two principles dominated the political debate: 1) the understanding that the responsibility for care provision to older individuals lays primarily with families and local communities rather than with the State; and 2) the belief that long-term care can and should be operated as a competitive, although highly-regulated, market. Debates on long-term care insurance took place between 1991 and 1993 in the context of healthcare policies. The resulting legislative process introduced a compulsory LTC insurance for all German residents in 1995.

More recently, both the Caregiver Leave Act (*Pflegezeitgesetz*) and the Family Caregiver Leave Act (*Familienpflegezeit*), include provisions for family caregivers. The Caregiver Leave Act (2008) ensures the right to a complete or partial release from work for up to six months in order to care for a close relative in need of care at home. The Family Caregiver Leave Act (*Familienpflegezeitgesetz*) (2012) sets up a Family Caregiver Leave - a legal claim to partial release from work for up to 24 months with a minimum working time of 15 hours per week. During this time, caregivers may request an interest-free loan from the Federal Department for Family and Civil Society Affairs (*Bundesamt für Familie und zivilgesellschaftliche Aufgaben – BAFzA*). However, the take-up of this form of financial support is quite low, as only 1,472 applications have been submitted so far, and 1,190 have been approved – compared to about 93 000 take-ups of caregiver or family caregiver leave in one year (2019). Moreover, in 2015, the Act to Improve Reconciliation of Family, Care and Work, introduced a Carer's Grant, which covers a wage compensation benefit (up to 10 days) that can be claimed when an employee needs to take time off work to support a close relative at short notice.

In response to the situation created by COVID-19, changes were made to the Caregiver Leave Act and to the Family Caregiver Leave Act for a limited period. These include: an absence from work combined with the Carer's Grant for up to 20 working days for situations where acute care is required, the flexible use of caregiver's leave and family caregiver's leave and the exclusion of months with a reduced income due to the COVID-19 pandemic in the calculation of the amount of the interest-free loan applicants are entitled to claim during the leave.

While most caregivers in Germany are middle-aged or older adults, around 479,000 children and young people nationwide take care of relatives who are chronically ill or in need of care²². In this context, the project 'Pause – Sometimes, those who help

²² Witten Herdecke University, 2018. *Die Situation von Kindern und Jugendlichen als pflegende Angehörige*, <https://www.bmfsfj.de/blob/140498/5a89859642a4090e414b68c36d36ae8c/abschlussbericht-pflegende-kinder-und-jugendliche-data.pdf> (17.12.2020).

others need help themselves' provides counselling services targeting children and young people who provide care.

Box 3: Young carers and the project 'Pausentaste'

The project 'Pause – Sometimes, those who help others need help themselves'²³ (*Pausentaste – Wer anderen hilft, braucht manchmal selber Hilfe*) has established low-threshold counselling services specifically for children and young people who provide care. 'Pause' aims at helping them to take a break, reflect and make use of offers to assist them or to speak about their individual situation –if preferred, anonymously. Services offered include the website www.pausentaste.de, telephone counselling and email counselling. Since the end of October 2019, the service has been expanded to include webchat counselling.

The services offered by 'Pause' are mainly geared towards caregiving children and adolescents. The project also seeks to make teachers, home care providers, social services at schools and hospitals as well as youth organisations and the public aware of the issue. In support of the project, a network of various stakeholders was launched, who meet at least once a year for professional exchange. Members receive regular internal newsletters within the network.

2.3 The Independent Advisory Board on Work-Care Reconciliation

In accordance with the 2015 Act to Improve Reconciliation of Family, Care and Work, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth appointed an Independent Advisory Board on Work-Care Reconciliation (*Unabhängiger Beirat für die Vereinbarkeit von Pflege und Beruf*). The main function of the Board is to deal with issues concerning work-care reconciliation, monitor implementation of relevant laws and advise on their impact and effects.

In its first period of tenure, the Board focused its advice on the further development of the legal framework, options for financial support and working time sovereignty (i.e. ensuring employees have control over the use of their time, for example in a flexible working scheme). It also dealt with issues relating to improving support services, expanding advisory services in a transparent manner and ways to use digital and technical products to reduce the burden of care.

In its first report²⁴, the main recommendations of the Board were the following:

- to improve public awareness of the situation and needs of carers who work;
- to promote the perception of long-term care as a societal responsibility;
- to provide support for family carers²⁵, so that they do not need to leave their jobs and to adopt measures to promote gender equality in reconciling work and care. The Advisory Board also discussed several models for wage compensation benefits and working time sovereignty (e.g. a budget model, a tax-funded wage compensation benefit and a fixed amount model) and recommended to set up a model similar to parental allowance for up to 36 months, replacing the provision of a loan as a means of financial support.

²³ <https://www.pausentaste.de/>

²⁴ *First Report of the German Independent Advisory Board on Work-Care Reconciliation*, 2020. <https://www.bmfsfj.de/bmfsfj/meta/en/publications-en/first-report-of-the-german-independent-advisory-board-on-work-care-reconciliation/161680> (16.12.2020).

²⁵ The Advisory Board defines close relatives/family members as defined in Section 7 (3) of the Caregiver Leave Act: parents and step-parents (stepmother and stepfather), parents in law, grandparents, spouses, life partners, partners living in a marriage-like or life-partner-like household, siblings' spouses and spouses' siblings, siblings' life partners and life partners' siblings.

2.4 The role of employers

The Independent Advisory Board on Work-Care Reconciliation recommends employers to take a more proactive approach to work-care reconciliation. The support provided to employees in reconciling caregiving responsibilities with work commitments is reflected in collective bargaining agreements, company agreements, and individual case-by-case solutions, which often go beyond prevailing statutory provision. The Advisory Board highlighted that an open corporate culture that addresses the issue of reconciling work and care, ensures that those involved can work together to find solutions that meet the needs of all.

In this context the Federal Ministry for Family and the Association of German Chambers of Industry and Commerce (DIHK) have drafted guidelines for companies and human resources managers that include information about the situation of employees who have to reconcile work and caregiving, as well as tips and checklists for the companies' internal practice.

3 Key Peer Review discussion outcomes

This Peer Review discussed the factors that lead to gender inequality in (informal) long-term care provision and how informal carers can be better supported to reconcile work and care obligations, such as care leave arrangements and flexible working options, including job-sharing, flexi-time and tele-working. Furthermore, participants reviewed initiatives by employers to encourage gender equality in informal care provision.

3.1 Factors that lead to gender inequality in informal long-term care provision

Informal carers represent a hidden workforce with huge responsibilities and personal challenges.

Across the EU, women provide the majority of unpaid care, with the largest difference between men and women in working age. The gender gap in unpaid working time ranges from 6 to 8 hours in Northern European to over 15 hours in Italy, Croatia, Slovenia, Austria, Malta, Greece and Cyprus²⁶. This means women have less time for paid work and to plan their career. As a result, they are more likely to reduce their working hours or leave their job entirely when care responsibilities arise. For instance, in the Czech Republic, 18 % of women stated that they are not in employment because they are unable to combine employment and care obligations, in contrast to 0,5 % of men. Next to already existing disadvantages on the labour market, women therefore face additional wage loss, career breaks and reduced access to social protection, especially pension entitlements.

Family caregivers often cannot afford to reduce their working time due to financial constraints and find themselves under increased pressure and stress. They face the burden to balance unpaid care and professional responsibilities, resulting in long working hours with severe consequences for their health and wellbeing²⁷. Results from the Good Work Index, a survey done by the German Trade Federation, showed that employees spend an average of 13 hours a week on caring for a relative, in addition to their professional activities. Three-quarters of those surveyed complain about

²⁶ Eurofound (2018), *Striking a balance: Reconciling work and life in the EU*, <https://www.eurofound.europa.eu/publications/report/2018/striking-a-balance-reconciling-work-and-life-in-the-eu> (17.12.2020).

²⁷ See Thematic Paper, available here: <https://ec.europa.eu/social/main.jsp?langId=en&catId=1024&furtherNews=yes&newsId=9841>

reconciliation problems, including a third of respondents who stated they face severe difficulties. Women who are in full-time employment feel particularly burdened.

These inequalities in care provision are influenced by an uneven allocation of paid work and unpaid care work between men and women which develops over the life course. Care responsibilities are likely to vary over a person's life, for example when they become parents or carer for their older relatives. For long-term care, the chances to become a caregiver increase with age. In Germany, for instance, almost one of five employees over the age of 60 looks after a person in need of care. At this point in their lives, traditional role models usually prevail, also due to lacking childcare or gender-specific pay gaps in their earlier lives. Even if both partners are in full time employment, the income gap between the male and the female partner has already widened markedly to the detriment of the woman. When faced with the decision on who provides care and who remains in employment, some couples will consider the financial impact and opportunity costs for the household as a whole, which could also result in part-time work for both partners. In other cases, the role of care provision falls on women due to traditional role models by default, as such division of tasks seems easier to organise. This often results in deciding on full-time employment of men, and part-time or marginal employment of women.

Prevailing social norms in Europe still reflect traditional gender roles which place the expectation to provide care to older people with wives and daughters and see women as the ideal caregivers. While many men provide informal care to relatives and among very old population groups the gender gap in care narrows considerably, male carer role models remain the exception rather than the norm and caregiving is broadly perceived as incompatible with male identity and masculinity. Furthermore, there is little public awareness or appreciation for care for a dependent relative. Social recognition, which fathers who take parental leave now enjoy to some extent, has yet to extend into the area of long-term care.

Moreover, decisions to take on care responsibilities are also guided by the availability, quality and affordability of formal long-term care services, and support measures that help carers to reconcile work and care. Long-term care policies focus on supporting older people in their homes and complement the support provided by family members. The mix of formal and informal support facilitates those in need of care to remain in their home environment for as long as possible while containing costs for the long-term care system. Especially countries with a 'familistic model' have limited formal long-term care services available and place care with the family, which in turn reinforces traditional role models of the male breadwinner.

Most older Europeans express a preference for receiving care in their homes, but support for family carers and home-based formal care services remain underdeveloped in many Member States. While leave schemes, cash benefits or services are more widely available for childcare and adults with disabilities, work-life balance measures for family carers of older people with support needs have not (yet) been recognised to the same extent. However, there is growing recognition throughout Europe of the need to strengthen home and community-based care as well as carer support and this is reflected in on-going long-term care reform processes. For example, in Slovenia, where formal long-term care is still mostly provided in institutions, a new long-term care system is planned based on formal community based long-term care services that would relieve family carers.

Gender equality in long-term care provision can hence only be promoted if a suite of measures that cover employment, health, gender, family and long-term care policies are considered. Those policies aim to support working family carers, while considering the whole family and unpaid and paid work at the same time, as outlined in the Dual-Earner-Carer model above.

3.2 Policies to improve the reconciliation of care and work and the equal sharing of informal long-term care between women and men

3.2.1 Measures to support family caregivers

Many countries have developed various care leave schemes in recent years that support family carers in combining unpaid care with paid employment. These leave arrangements and the possibility to regulate working time in a flexible way support informal carers to balance work and care better, whilst remaining in employment.

Many countries have care leave schemes, but the financial compensation ranges from a compensation based on the salary to limited or no financial compensation²⁸. In Germany, the wage compensation benefit, the Carers' Grant, combined with the release for up to 10 working days allows to organise care in acute situations, next to the complete or partial release from work with the Caregiver Leave and the Family Caregiver Leave (combined with an interest-free loan). Similar to Germany, there is also the option of shorter and longer caregiver leave in the Czech Republic. In a sudden need of care, a household member can stay away from work for up to nine days, receiving 60 % of their wages. The long-term caregiver leave allows a carer to interrupt work for a maximum of 90 days, following the discharge from hospital of a family member, whilst receiving 60 % of his or her salary. In 2019, there were 10,939 beneficiaries of this leave and there is still a significant gender difference between the recipients of this benefit; only 22, 6 % beneficiaries were men²⁹. In France, the Adaptation of Society to Ageing Act from 2016 gives carers the possibility to interrupt their work temporarily for up to three months, whilst receiving a daily allowance. In Latvia, there is currently a discussion on how to implement caregiver leave.

Wage compensation benefits are an important aspect to protect carers' incomes and to encourage more men to take up unpaid care work. Leave arrangements, part-time working and job-sharing policies are mostly taken up by women, linked to the need to balance unpaid care work and paid work. This in turn further increases the gender pay gap and is likely to translate into reduced social protection, especially a pension gap between men and women. As men are underrepresented among the group of working family caregivers, they represent a group of potential family caregivers that could relieve women from their role as primary caregivers. Concrete approaches could be transferred from existing parental leave arrangements. For example, the German Advisory Board recommends to replace the existing interest-free loans with the establishment of wage compensation benefits for working family carers, similar to the parental allowance for up to 36 months. In addition, another proposed measure could be part-time leave schemes with adequate financial compensation that would allow carers to keep working part-time and still be financially rewarded for the caring time, therefore not taking a severe cut in income. They could also be an incentive for men to take care leave as it would not involve a career break and all the related difficulties of returning to the labour market. However, part-time leave with adequate wage compensation rarely exist.

An increase in the remuneration for formal and informal care would reflect the economic value of care and increase the attractiveness of the professional care sector and the recognition carers (both formal and informal) receive for their work. If informal and formal care work would be remunerated (better), more men would be incentivised to provide it, narrowing the gender care gap. In informal care, this can be achieved through setting informal carer benefits as a rate of income rather than as

²⁸ Spasova, S., Baeten, R., Coster, S., Ghailani, D. Peña-Casas, R. and Venhercke, B. (2018). Challenges in long-term care in Europe. A study of national policies, European Social Policy Network (ESPN), <https://ec.europa.eu/social/main.jsp?catId=1135&intPageId=3588> (17.12.2020)

²⁹ In total amount 10 939 beneficiaries were 2 469 men and 8 470 women. Source: https://www.cssz.cz/documents/20143/208838/4Q_2019_Ukazatele_prosinec.pdf/dd368ea8-9da1-6fd6-9351-e20ab311700a. (17.12.2020)

fixed benefits, but it is important to acknowledge the considerable fiscal implications of such a scheme.

Wage compensation also increases the financial independence of family carers. This is connected to the fact that the support for informal carers has long remained unrecognised by policy-makers, who rather focused on the people who need long-term care³⁰. Only few countries provide cash benefits payable directly to carers, while in many countries the person in need for long-term care receives cash benefits to purchase formal care or household services or to support the informal carer. While this provides service users with choice and control over their care arrangements, it can also further accentuate gender gaps, as informal (female) carers remain dependent on income support directly provided to the person in need of long-term care. Ideally, long-term care benefits are complemented by the remuneration arrangements for informal carers described above.

Due to ageing societies, the need for female labour market participation, work-life balance problems of middle-aged workers and the subsequent gender pay and pension gap, as well as the associated costs of formal and informal long-term care provision, support for informal carers is increasingly becoming more important on the political agenda. For example, France foresees an increased investment of public spending targeted at informal carers in the 'Old Age and Autonomous Plan'. In Portugal, the newly introduced 'Informal Care Statute' promotes informal carers' work-life balance and further support measures that acknowledge the contribution of informal carers.

Box 4: The Informal Caregiver Statute, Portugal

The Informal Caregiver Statute was approved in 2020. Caregivers of working age will receive a support allowance, which is subject to means-testing. The main informal caregiver needs to be a family member, who lives in the same household and who does not receive any remuneration for professional activity or for the care he/she provides.

Moreover, the informal carer status establishes a number of support measures, such as training for family carers and psychological support by health professionals within the scope of a specific intervention plan. This is combined with counselling, information, monitoring and guidance provided by the competent social security services, taking into account the rights and responsibilities of the informal caregiver and the person receiving care. This includes also the referral to formal home care provision and residential care services, if needed, and access to respite formal care. Caregivers participate in self-help groups to share experiences and facilitating solutions.

There are also measures to facilitate the (re-) integration of the caregiver into the labour market, such as the validation of skills by the National Association for Qualification and Professional Education. The Informal Caregiver Statute is currently being piloted in 30 municipalities.

As mentioned above, the availability, affordability, and quality of formal long-term care services matters significantly for family carers. Especially in countries with fewer available services or strict eligibility criteria to formal long-term care services, most care provision falls on informal carers. A focus on prevention and rehabilitation and quality care provided at home can relieve family carers. At the same time, prioritising home-based care over residential care provision will 'enhance financial sustainability'

³⁰ Eurofound, 2020. *Access to care services: Early childhood education and care, healthcare and long-term care*, Publications Office of the European Union, Luxembourg.
<https://www.eurofound.europa.eu/publications/report/2020/access-to-care-services-early-childhood-education-and-care-healthcare-and-long-term-care> (17.12.2020)

of European care systems. This is also the objective of upcoming reforms of the Slovenian long-term care system.

Box 5: 'Caregiver of a Family Member', Slovenia

In light of demographic ageing, the planned reform of the long-term care system has been widely debated in Slovenia. This is also connected to an above average provision of long-term care in institutions, and the slow development of integrated community-based services. However, a comprehensive reform of the long-term care system is still pending. Piloting aimed to prepare a change in the country's long-term care system included new and free of charge community services. Such services include drug preparation and administration, rehabilitation services and e-care services. Another important measure is the introduction of new services to support beneficiaries to remain independent at home for longer periods, such as psychosocial support services, post-diagnostic support services for people with dementia and counselling services for home adaptations. Delaying the onset of marked or severe care needs will not only improve quality of life for older people but is also expected to relieve family members (mostly women) from care tasks and reduce the length of informal care provision.

The future legislation includes also the status of a 'Caregiver of a Family Member'. Similar to the new formal status of informal carers in Portugal, this aims to formally acknowledge the family caregiver who lives in the same household. They will receive partial income replacement, have the right to 14 days of respite care per year, will be covered by social insurance and will receive training and professional advice, also via a care diary (which also aims to keep track of working hours and leisure). This status can be split between two 'Caregivers of a Family Member'. Similar to the approach in Portugal, suggested legislative approaches are piloted in urban, rural and semi-rural areas to gain feedback from carers and public acceptance.

Next to a further investment in quality, community-based formal long-term care services, technology has the potential to support people in need of long-term care and their families. For example, assistive technology such as alarm systems or time sharing apps are highly relevant for combining unpaid care obligations with paid work. Communication technology helps to stay in contact or to get in touch with other family carers.

Support for family caregivers is also linked with increased attention in EU Member States towards respite care³¹. However, respite care is mostly focused on the person receiving care and very few countries provide respite support for the carer, such as short breaks from care giving enabled by professional care, day care or home help. In many countries, the purpose is to support family carers by support from professional care³².

Furthermore, people in need of long-term care and their carers need support and guidance. Long-term care needs arise often suddenly and it takes a lot of time and effort to get to know all the regulations and submit an application for help. Very few people look at these services unless they have a concrete reason, and in acute cases of care many feel disoriented and overwhelmed. As a first step, counselling on services, finances and support for carers can help to make decisions on care and work arrangements. For instance, along with the planned reform of the Slovenian long-term care system, plans to set up single points of access will allow families to receive all

³¹ Eurofound (2020) Access to care services: Early childhood education and care, healthcare and long-term care, Publications Office of the European Union, Luxembourg.

<https://www.eurofound.europa.eu/publications/report/2020/access-to-care-services-early-childhood-education-and-care-healthcare-and-long-term-care>

³² Bouget, D., Spasova, S. and Vanhercke, B. (2016), Work-life balance measures for persons of working age with dependent relatives in Europe. A study of national policies, European Social Policy Network (ESPN), Brussels: European Commission. <https://ec.europa.eu/social/BlobServlet?docId=16325&langId=en>

necessary information. They will also be guided by a care-coordinator, who is responsible for the organisation of different services and navigates through the system of support services. Phone hotlines, like the German 'Care phone' (*Pflegetelefon*) allow families to reach out from their home and in their own time, an important aspect in the recent COVID-19 pandemic. Moreover, peer support in internet forums or networking in the community provide help, particularly in acute or stressful situations.

3.2.2 Addressing gender equality over the life-course

Gender equality in long-term care provision is strongly linked to an equal sharing of paid and unpaid work over the life course. As mentioned above, the decision who should reduce or to stop working because of long-term care obligations is often grounded in the desire to minimise income loss for the household and it is in many cases the women who earn less than their spouse or have more limited career prospects. Hence, wider policies to address the gender pay gap play a role. In the Czech Republic, the 22 % TO EQUALITY project focuses on addressing the gender pay gap. The project encompasses a coalition of political actors, non-profit organisations and employers to analyse the gender pay gap and its causes, chiefly among them insufficient opportunities to reconcile work and family obligations and stereotypical career choices for women and men.

Finally, gender equality can be promoted by a wider social debate and appreciation of the challenges of reconciling work and unpaid care. Care for a dependent, often older, relative has yet to receive the societal recognition that it deserves. It was noted that in Germany, this lack of awareness may also lead to barriers for men to provide long-term care, whereas it may seem easier for fathers to take time to care for children. Projects to promote understanding for the situation of carers, for example as in the German project "Pause – Sometimes, those who help others need help themselves" above hence support public awareness.

Here, education plays a part to increase knowledge of gender issues in long-term care provision. In Portugal, gender equality and care provision are on the curricula. It would be further desirable to ensure the context of everyday family life is included in long-term care education for professionals, but also in wider adult education, with the focus on generations living together.

3.3 Measures taken by employers to encourage the gender-equitable distribution of care

Even as long-term care and labour policies are changing to meet the needs of Europe's ageing societies, gender equality in paid and unpaid work crucially hinges on progress being achieved also in the prevalent values, attitudes and practices on labour markets. Employers play a key role in promoting work-life balance measures for men and women by recognising the value of retaining a skilled and productive workforce. Trade Unions are moreover important partners to raise work-life balance issues and to set up collective agreements that provide options to reconcile work and care.

3.3.1 Measures for and by employers

Policies such as the above-described leave arrangements and sufficient remuneration, access to social protection during leave and flexible working time arrangements aim to set standards for employees with caring responsibilities and are hence legal obligations for the employer. Reductions in working time and short-term absence from work must be established tools within the company and existing legal rights to leave and compensation must be available to all employees. Such measures do not generate considerable additional costs for the employer, as they are tax-financed, but can be effective in reducing the number of caregivers who leave the labour market. Moreover, it is beneficial for the employer to retain well-trained staff, rather than recruiting new employees.

With regards to working time, caregivers must be able to plan their time and have the possibility to adapt working hours in order to meet arising and often unpredictable care responsibilities. When a caregiver will be needed, for how long and for what tasks is often difficult to plan (in contrast to childcare) and such care needs are likely to change over time. For informal carers it is hence important that their working time is predictable and that they can change hours when long-term care needs change. In order to meet care demands while maintaining employment that can ensure sufficient income (i.e. close to full-time employment particularly for lower paid jobs), working carers require flexible leave and working time arrangements, for example via working time accounts, flexible work schedules or teleworking. The COVID-19 pandemic has shown more flexible and mobile working arrangements are possible in many sectors. In order to maintain this flexibility in the future a right to remote working arrangements should be defined and legally recognised as a support measure to promote a work-life balance and reconciliation of work and care. Teleworking helps working carers by reducing commuting and travel time, as well as overnight absences.

Next to regulatory frameworks, certain labour market policies can encourage and incentivise employers to go further in terms of work-life balance measures. For example, the German 'Monitor of Corporate Family Friendliness' that is funded by the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth surveys employees and gives account of company measures to reconcile work and family life.

Moreover, labour market measures specifically targeted at carers and employers assist with the re-entry into the labour market. In Slovenia, the above-mentioned mandatory support to informal carers aims also at the re-integration of carers into the labour market. It is envisaged that the training and the skills and knowledge gained from care provision can be validated with a recognised certification, leading to employment opportunities in the formal care sector. The re-integration into the labour market, as well as raising awareness around gender-sensitive HR policies is also the objective of the German programme 'Perspectives Re-entry'. In addition, advice for full-time carers on ways to return to the labour market needs to be available.

Box 6: 'Perspective Re-entry - developing potential', Germany

The programme 'Perspective Re-entry - developing potential' by the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth and the German Federal Employment Office aims to support women and men to return to the labour market after absences related to family care. The programme, funded by the European Social Fund, was implemented across Germany by project partners, combining information, guidance and networking. At the same time, employers are contacted and made aware of women and men who want to return to formal employment. Skills are developed in e-learning possibilities and there is also a specific focus on returning to the labour market to work in the personal services or household-related services sectors³³.

The size of the company, the type of sector (low- vs highly-skilled, labour intensiveness, shift-working etc.) impacts on the ability of employers to offer flexible working and leave schemes. Here, social partners are key to agree on sector-specific arrangements. Trade unions play an important role to acknowledge equality measures in collective agreements. For example, in Slovenia, approximately 40% of collective agreements focused on caring for children, but there is still very little recognition of caregiving roles for older dependent people. The German example below showcases how caregiver responsibilities are taken into account in a collective agreement.

³³For further information, please see here: https://www.perspektive-wiedereinstieg.de/Navigation/DE/startseite_node.html

Box 7: The IG Metall Collective agreement in Baden Württemberg, Germany

Motivated by an employee survey in which workers stated the need to reconcile work and care better, the trade union IG Metall negotiated work-life balance in a collective agreement in Baden-Württemberg. Employees who care for children or a dependent relative can choose between eight additional days of leave (two are financed by the employer) or additional pay. More and more employees are opting for the eight additional days off; from 260,000 employees in 2019 to 340,000 in 2020. In 2020 17,000 employees took advantage of the eight days off because they needed to reconcile work and care.

According to estimates by the Federal Statistical Office, only about 80,000 people nationwide had taken advantage of caregiver leave and family caregiver leave by 2017. This illustrates the extent to which the successful collective bargaining agreement of IG Metall is oriented towards the needs of the employees – i.e. time and money – and the significant impact that company level initiatives can have on supporting reconciliation of work and care.

Moreover, it is crucial that part-time work in the company does not result in less demanding tasks or professional stagnation. 'Part-time leadership' can be an important signal, especially to men, that their career advancement will not end if they work fewer hours a week for a limited period of time.

3.3.2 Company culture

The economic and societal value of long-term care provision is still insufficiently recognised by the public and employers alike. Raising awareness about the contribution and the challenges of informal caregiving is therefore an important step towards increasing recognition and support for caregivers. On company level, anonymous employee surveys can be an effective way to assess who provides unpaid care, under which circumstances and what exactly carers need in order to be able to fulfil their professional obligations and care responsibilities at the same time. The surveys not only shed light on the situation of family caregivers, but also highlight the employers' interest in this topic, and their commitment to societal responsibility and to improving work-life balance. The information obtained through such surveys can help employers ensure their workforce is stable and supported to maintain high productivity and work satisfaction.

At the same time a shift in values is necessary. Corporate culture should reflect appreciation for employees who take the time and responsibility to care for others and encourage all employees, irrespective of their gender, to take up care responsibilities when needed. Employment practices of working more than 40 hours a week or requiring employees to be available around the clock should not be encouraged or promoted as company standards. Rather, working arrangements that allow sufficient flexibility for male and female employees to reconcile caregiving responsibilities with work should become the norm. Caregiving and the challenges associated with work and care balance should be openly discussed at company level in order to increase the understanding of the situation of caregiving colleagues and show solidarity with them. This in turn also values the benefit that family caregivers bring to society and builds confidence to look after a person in need of care in the future.

Especially male caregivers can act as role models, such as the Irish example of Dublin Bus where employees alternate weeks and used 'weeks off' for care provision³⁴. Across Europe, the number of fathers taking parental leave is increasing, which may be a

³⁴ See Thematic Paper, available here: <https://ec.europa.eu/social/main.jsp?langId=en&catId=1024&furtherNews=yes&newsId=9841>

start to continue addressing gender stereotypes and a conversation around care responsibilities throughout the life-course, especially in later life.

Such initiatives are most effective when combined with career promotion for women, diversity training to address gender stereotypes and HR departments providing advice on the reconciliation of unpaid care and work. Signposting of relevant services and information sources not only reduces the burden for employees with care responsibilities but also signals the employers' commitment to support their workforce. To increase awareness, 'care specialists' can be appointed in employee boards or in each department or branch. In Germany, 'care guides' (*Pflegelotsen*) within companies support carers who are currently in employment and those on care leave, using also national manuals and websites as guidance.

Awards, benchmarking schemes or certificates are useful to encourage employers to follow certain commitments and to promote good practices. For example, in Germany and the Czech Republic, companies receive awards for their work-life balance measures. In Germany, the Otto Heinemann Prize³⁵ is rewarded for examples of good reconciliation of care and work (in three categories according to the size of the company). In the Czech Republic, an NGO and the Ministry of Labour and Social Affairs is going to organise the first year of Friendly Company Competition for companies, who will receive an award and a certificate for their work-life balance measures³⁶.

3.4 Conclusion

In Europe's ageing societies more people will need long-term care, which is potentially combined with a shrinking workforce, especially in the formal care sector. This puts pressure on family carers, especially those in employment. As mostly women provide informal care, they are more likely to face the challenge of combining work and care. As a result, they often reduce their working time or opt out of the labour market entirely, which continues to worsen labour market disadvantages for women and their future pension entitlements. People who take on responsibility for long-term care are usually over 45 years of age. At this point in a woman's life, traditional gender roles have often been established already due to lacking childcare or gender-specific pay gaps, resulting in full-time employment of men, and part-time or marginal employment of women.

In order to promote gender equality in the provision of informal care and ensure individuals with care responsibilities have sufficient support and flexibility to reconcile work and care, concerted policies and measures must be adopted both on the labour market and in the long-term care sector. This includes:

- While most countries have leave arrangements in place, the level of remuneration plays a crucial role in the allocation between paid and unpaid work between men and women. Sufficient remuneration of formal long-term care and wage compensation for informal carers are important aspects to encourage more men to take up unpaid and paid care work. In addition, part-time leave schemes with adequate financial compensation and regulations to share care leave arrangements between both partners could be financially rewarded.
- Moreover, an investment in community-based formal long-term care services is also needed to ensure quality care and to support people to stay in their own homes and as independent as possible. An investment into formal care services also contributes to the quality of life of family carers, may attract more men to

³⁵ See also here: <https://berliner-pflegekonferenz.de/otto-heinemann-preis-teilnehmerinfos/>

³⁶ So far, a similar competition has been organised by non-profit organisations and by some regions. The Ministry of Labour and Social Affairs participates for the first time in the organisation of such a competition in 2021.

work in the care sector and can reduce gender inequalities. This however requires comprehensive service provision at home. For example, a focus on well-developed in-home services improves the quality of life of people with care needs and the work-life balance of women³⁷.

- While informal care has long remained unrecognised, the need to recognise informal care and ensuring their access to social protection is increasingly becoming more important on the political agenda. For instance, in Slovenia, the planned reform of the long-term care system includes the status of a 'Caregiver of a Family Member' who will receive partial income replacement, will be covered by social insurance and will receive training and professional advice. Portugal introduced a new 'Informal Care Statute' in 2019 which is currently being piloted to support family caregivers via an allowance and a caregiver plan.
- Furthermore, people in need of long-term care and their carers need support and guidance. As a first step, counselling on services, finances and support for carers can help to make decisions about care and work arrangements. The COVID-19 pandemic has also shown that hotlines are important, so people can reach out from their home. Moreover, peer support in internet forums or networking in the community provide help, particularly in acute or stressful situations.

Policy-makers, employers and social partners, as well as individuals all have important and complementary roles to play in changing attitudes, practices and expectations to challenge gender stereotypes, this can be done via:

- Public interventions can set standards for employment that regulate for family carers to remain in employment, such as leave arrangements.
- Publicly funded programmes that provide advice for employers and on the re-integration of full-time carers into the labour market, as well as raising awareness around gender-sensitive HR policies.
- Employers can create conditions that promote a work-life balance for men and women, whilst remaining in full time employment (rather than part time work) in order to ensure working carers can maintain a decent income. Flexible working conditions, such as additional leave for care, variable work schedules, work accounts or tele-working are important to ensure that family carers do not reduce their working time, but can reconcile work and care obligations.
- Cooperate culture needs to encourage more men to take up care responsibilities and to facilitate career progression also for family carers. This can be done via promoting male carers as role models, career models based on part time working, career promotion for women, women in leadership positions and HR departments providing advice on the reconciliation of unpaid care and work.
- Social partners (trade unions and employers organisations) and social dialogue are moreover important to raise work-life balance issues and to set up collective agreements that provide options to reconcile work and care. They also help to create conditions that support sector- specific agreements, taking into account the particular requirements from the employer and employees.

The Covid-19 pandemic and the imposed lock-down measures have disproportionately affected women and have put significant pressure on formal and informal carers. This highlights the importance of addressing gender equality in unpaid care and supporting carers with urgency, but also opens the way for expanding work flexibility for large

³⁷ Bouget, D., Spasova, S. and Vanhercke, B. (2016) Work-life balance measures for persons of working age with dependent relatives in Europe. A study of national policies, European Social Policy Network (ESPN), Brussels: European Commission. <https://ec.europa.eu/social/BlobServlet?docId=16325&langId=en>

parts of the workforce. Some people may have to combine years of care and work, so it needs to be possible for women and men to generate sufficient income from work and unpaid care and to be covered by social protection over their whole life course. Hence long-term care is a societal task and public responses and resources are needed to support people in need of long-term care and their care-giving family members.

