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**POSITION PAPER ON
INVESTING IN
SERVICES & WORK-
LIFE BALANCE TO
IMPROVE GENDER
EQUALITY**

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Social Platform is the largest civil society alliance fighting for social justice and participatory democracy in Europe. Consisting of 46 pan-European networks of NGOs, Social Platform campaigns to ensure that EU policies are developed in partnership with the people they affect, respecting fundamental rights, promoting solidarity and improving lives.

KEY MESSAGES

- I.** *Encourage Member State investment in high quality essential services and social infrastructure to improve women's employment and contribute to enhanced inclusive growth.*
- II.** *Develop an integrated approach using both legislative and non-legislative measures to improve women's and men's work-life balance.*
- III.** *Integrate a gender perspective in all aspects of health policies and services.*
- IV.** *Optimise the use of EU and international instruments encompassing all services aimed at victims of gender-based violence.*
- V.** *Guarantee integration between services and other active inclusion measures that foster social inclusion and alleviate inequalities.*
- VI.** *Implement EU and international instruments to protect the basic rights of female migrant carers.*

INTRODUCTION

Access to essential services is a human right, and everyone will be a service user at some point in their lives. Service cuts are disproportionately hitting women and the most vulnerable members of our societies; they have a detrimental impact on women's participation in the labour market and expose them to a heightened risk of poverty, homelessness, social exclusion, health issues and violence.

This paper highlights how service cuts are affecting women's rights, particularly in relation to employment, health, work-life balance and safety. It outlines recommendations to European Union decision-makers to demonstrate that investment in high-quality services contributes not only to the promotion of gender equality and work-life balance, but also to employment, social inclusion, better health and ultimately inclusive growth.

RECOMMENDATIONS TO EU DECISION-MAKERS

I. Encourage Member State investment in high quality essential services and social infrastructure to improve women's employment and contribute to enhanced inclusive growth

Why?

- In the EU, cuts to public sector jobs have had a drastic effect on women's employment as women constitute on average 69.2% of public sector workers. Public sector lay-offs push women towards precarious employment with limited income security, work-life balance options and pension benefits and worsen the overall quality of women's working conditions, cancelling out modest progress made in closing the gender pay gap.¹
- A lack of investment in quality care services such as childcare and long-term care disproportionately affects women with dependent family members, such as children, older relatives, family members with disabilities or those with illnesses. This puts pressure on them to reduce their working time, opt for part-time work or interrupt their careers. Ultimately this hinders women's participation in the labour market, as well as progression in employment and life-long learning. Lack of quality services also has an impact on children's personal development.
- While only two in five women between 55 and 65 are in employment, public employment services often lack specialised advisers and training opportunities for women in this age category, increasing the likelihood of premature retirement and long-term unemployment.² It is important that women and men are supported to put the needs of their families first when this is required but a duty should be placed on employers to ensure that their future employment and prospects for advancement are safeguarded.

¹ European Women's Lobby, *The price of austerity*, p. 4

² Eurostat, [Unemployment rates by sex, age and citizenship %](#).

Recommendations:

- Urge Member States to reverse service cuts to the social, care, health and education sectors through the European Semester's Country-Specific Recommendations (CSRs).³
- Encourage investment in high-quality social infrastructure and services, particularly in sectors with a high potential for job creation for women. This should be done by giving increased budgetary flexibility to Member States with shrinking public finances. The programming of the European Structural and Investment Funds (ESIF) should be targeted to improve service provision and investment in quality social infrastructure. ESIF should have a transformative role and should be used to complement – not replace – Member States' national budgets.⁴
- Drive reforms of Member States' taxation policies to ensure adequate public budgets for essential services. This should involve fighting tax evasion and avoidance and tackling corruption in public administration, as well as ensuring fairer redistribution. Undeclared work in the care and domestic sectors should also be addressed.
- Recommend Member States to improve access to training and active employment support for women and to respect and promote the principle of "equal pay for equal work".
- Use the European Semester and CSRs to advise Member States to take action to raise the level of minimum wage progressively towards at least 60 percent of national median wage. This should be a priority in sectors that are notoriously low-paid such as health, social and care work where the workforce is predominantly female.⁵

II. Develop an integrated approach using both legislative and non-legislative measures to improve women's and men's work-life balance

Why?

- 80 percent of care work in Europe is provided by informal carers, the majority of whom are women.⁶ EIGE's Gender Equality Index shows that unequal sharing of care and domestic responsibilities between women and men remains the most problematic area in terms of gender equality in the EU.⁷ As a result, cuts to care services have a gendered impact, particularly on women's work-life balance. This is exacerbated by increased deregulation of services and reduction in family, childcare and disability benefits, as well as changes in statutory leave.⁸
- There is a lack of sufficient services to support parents in countries such as Greece, Hungary, Latvia, Poland, Portugal and Romania. In many of these countries, there is little evidence of any increased effort to improve services in this area.⁹
- Despite the Barcelona Targets,¹⁰ some EU countries (Bulgaria, Croatia, Czech Republic, Greece, Estonia, Ireland, Italy, Lithuania, Romania, Slovakia, United Kingdom) still exhibit serious shortcomings concerning the availability, affordability or quality of early

³ For example, the [2015 CSR to Ireland](#) recommends addressing the poverty risk to children by tapering the withdrawal of benefits and supplementary payments upon return to employment and through better access to affordable full-time childcare.

⁴ For example, to develop quality criteria for specific services; to design training pathways for the workforce on specific users' needs; to design and pilot new services; to adapt existing services to the needs of specific target groups; to develop methodologies to involve users in the design, implementation and monitoring of services; and to spur innovation.

⁵ Social Platform, [Position Paper on Minimum Wage](#), p. 7.

⁶ COFACE, [European Reconciliation Package 2014: Year of Reconciling Work and Family Life in Europe](#), p.17.

⁷ EIGE, (2015), [Gender Equality Index 2015. Measuring gender equality in the European Union 2005-2012](#).

⁸ European Women's Lobby, [The Price of Austerity](#).

⁹ European Commission, [Social Investment in Europe: A study of national policies](#), p. 25.

¹⁰ European Commission, (2013), [Barcelona objectives. The development of childcare facilities for young children in Europe with a view to sustainable and inclusive growth](#). According to the Barcelona targets, childcare should be provided for 90% of children between 3 years old and the mandatory school age, and for 33% of children under 3.

childhood education and care (ECEC).¹¹ ECEC services must be understood as an entitlement for all children and be coupled with targeted support for those at risk of social exclusion.

Recommendations:

- Launch a legislative proposal to develop a coherent framework for all types of leave to address inequalities between women and men in paid and unpaid work, and promote the equal sharing of responsibilities and costs for care for all dependents.¹² To encourage more men to benefit from parental leave it should be fully paid or equal to at least 80-90 percent of their salary, and the principle of non-transferability should be applied.
- Set benchmarks concerning the provision of essential services through the European Commission's pillar of social rights. Benchmarks should not be limited to availability of services, and should drive the implementation of essential principles enshrined in Protocol 26 of the Lisbon Treaty, such as universal access, quality, safety, affordability, equal treatment and the promotion of users' rights. The voluntary [European Quality Framework for social services](#) of the Social Protection Committee and the [European quality framework for early childhood education and care](#) developed by the European Commission should be used as a reference in the development of benchmarks.
- Strengthen EU-level policy guidance by optimising the application of all possible instruments, such as the European Semester and ESIF. The latter should be used to improve provision of services, not to cover the cost.

III. Integrate a gender perspective in all aspects of health policies and services

Why?

- Cuts to health services contribute to health inequalities between men and women. Between 2010 and 2013, the Healthy Life Years Indicators regressed by 1.1 years for women and 0.4 years for men.¹³ Reductions in the availability and affordability of healthcare have gendered consequences, because women use these services to a higher extent than men as they have greater health and social care needs than men across their lives.
- Cuts in mental health services disproportionately affect women, who are between one-and-a-half to two times more likely than men to suffer from anxiety and depression.¹⁴
- Universal access to healthcare is not ensured across the EU. For instance, trans people, children¹⁵ and migrants continue to face systematic barriers in access to health services, both in law and practice. Services are not adapted to the specific needs of some groups, such as gender-affirming care services, notably due to cuts in national health budgets.¹⁶

Recommendations:

¹¹ European Commission, [Social Investment in Europe: A study of national policies](#), pp. 20-22.

¹² This proposal should improve provisions about parental leave, maternity and paternity leaves, adoption, carers and non-child related and filial leave, including the promotion of flexible working time arrangements by choice.

¹³ Eurostat, [Healthy Life Years \(from 2004 onwards\)](#).

¹⁴ WHEC, [Why women's health?](#), p.1.

¹⁵ The European Association for Children in Hospitals' Charter of Sick Children sets out children's rights to access to affordable and child-friendly healthcare.

¹⁶ Gender-affirming health services are the full range of medical services that trans people may require in order to medically transition including counselling, psychotherapy, hormone treatment, hair removal, initial surgeries such as a mastectomy, hysterectomy or orchidectomy, and a range of genital reconstruction surgeries. Source: The Open Society Foundations, (2014), [License to be yourself – Laws and advocacy for legal gender recognition of trans people](#), p. 54.

- Adopt the Equal Treatment Directive (COM(2008)426) to close the gap in protection against discrimination in access to goods and services, including healthcare.¹⁷
- Ensure that Member States provide quality health services specialised for victims of female genital mutilation (FGM) and psychological support to women whose sterilisation has been forced – notably in cases of Roma women and women with disabilities, as well as services related to gender reassignment for trans people.¹⁸
- Ensure that health services addressed to women or developed particularly for women are covered under public health services and are accessible through public health insurances. Universal access to pre- and post-natal care, breast and cervical cancer screening and treatment, sexual and reproductive health services and mental health services should be ensured.
- While reviewing occupational health and safety laws, pay particular attention to professions where the majority of the workforce is female and, in all professions, to the specific challenges to the health and safety of female workers.

IV. Optimise the use of EU and international instruments encompassing all services aimed at victims of gender-based violence¹⁹

Why?

- Austerity has curtailed services designed to end violence against women and support the victims of violence.²⁰ It is anticipated that reducing such services will lead to an increase in violence and demand for support.²¹
- Specialised services are essential as VAW always affects children too. This is also exacerbated by the fact that it is still predominantly women who care for children.²² It is important that these services are accessible (free of charge, geographically distributed, multilingual, disability friendly), sustainable in the long term, and delivered by staff trained to provide specialised VAW advice and support. These services need to be accessible to migrant, minority and asylum-seeking women regardless of their legal status, older women, LGBTI women and women with disabilities.²³
- On a pan-European level, the EU is failing to provide specialised immediate and long-term services for women survivors of domestic abuse and their children, as required by many international Conventions.²⁴ While the Council of Europe has recommended that there should be one refuge place for a mother and child for every 10,000 inhabitants only five Member States have met this target, indicating that there is inadequate service provision to prevent survivors of abuse from becoming homeless.²⁵ This is important as violence against women is the primary cause of women's homelessness.

Recommendations:

¹⁷ Religion or belief, disability, age and sexual orientation are covered by the Employment Equality Directive (2000/78/EC). Racial or ethnic origin is covered by the Racial Equality Directive (2000/43/EC). Gender is covered by the Gender Equality Directive (2006/54/EC).

¹⁸ Fundamental Rights Agency, *Being Trans in the European Union*, p. 20.

¹⁹ See more in general Social Platform, (2012), [Towards EU actions against all forms of violence](#)

²⁰ EIGE, (2012), [Violence against women: victim support. Review of the Implementation of the Beijing Platform for Action in the EU Member States.](#)

²¹ The Women's Resource Centre, [Factsheet: Women and the Cuts 2012](#), p.8.

²² WAVE, [Country report 2011 reality check on European services for women and children survivors of violence. A right for protection and support?](#), p.4

²³ EIGE, (2012), [Violence against women: victim support. Review of the Implementation of the Beijing Platform for Action in the EU Member States.](#)

²⁴ See Council of Europe Convention, [Protection of Children against Sexual Exploitation and Sexual Abuse.](#)

²⁵ Council of Europe, [Combating violence against women: minimum standards for support services](#), p. 18, footnote 34.

- Monitor Member States' implementation of the [Victims' Rights Directive](#) (2012/29/EU), particularly Article 8 (right to access victim support services).
- Take all appropriate legislative and other measures to implement the United Nations Convention on the Rights of Persons with Disabilities, with the aim of combating all forms of exploitation (Article 16), and ending violence and abuse against people with disabilities, in particular women (Article 6) and their families (Article 23). Ensure that appropriate forms of gender- and age-sensitive assistance and support for people with disabilities and their families and caregivers are in place.
- Promote the piloting of the Housing First Model - an innovative model with proven success rates for housing the chronically homeless - for survivors of abuse.

V. Guarantee integration between services and other active inclusion measures that foster social inclusion and alleviate inequalities

Why?

- Budget cuts have a high impact on women who are affected by multiple and intersectional forms of discrimination, such as those with disabilities, migrants, ethnic minorities, older women, single mothers and lesbian, bisexual, trans and intersex people.
- Women at risk of homelessness, because of financial reasons or domestic abuse, utilise homeless services in a different manner to men, mainly because such services are male-oriented. Women are far more likely to engage in coping strategies such as sofa-surfing,²⁶ sleeping rough, entering the sex trade or entering into an abusive relationship, rather than present themselves to homeless services.²⁷
- Despite increasing participation in the labour market in the majority of Member States, women are still disproportionately at risk of receiving inadequate income in old age; the gender pension gap currently stands at 40 percent.²⁸ Women have fewer opportunities than men to build up adequate rights under occupational and private pension plans as they are more likely to be affected by non-standard employment and have more career interruptions than men.

Recommendations:

- Work in partnership with service providers and users' organisations to ensure that the specific needs of all women and trans people are addressed in all social services. Particular focus should be given to the situation of vulnerable women, such as those with children, undocumented migrants, the homeless and victims of violence and abuse.
- Ensure that the 20 percent of the European Social Fund (ESF) allocated for social inclusion measures and social innovation projects provides support to local projects aimed at empowering women experiencing poverty and social exclusion.
- Develop more appropriate indicators at EU level to improve data collection and qualitative analysis to capture the gender dimension of poverty and social exclusion. Ensure systematic monitoring of the Fundamental Rights Agency (FRA) 2014 study on VAW.²⁹ Conduct a follow-up study to it, to analyse the links between domestic violence, VAW, extreme forms of poverty and homelessness; this would enable better planning of integrated services.

²⁶ Sofa-surfing refers to the situation of a person staying on the sofa of friends and relatives for a period of time. While they are not roofless during this period, they are considered homeless.

²⁷ Meyock, Parker and Sheridan, (2015), *Women, Homelessness and Service Provision*.

²⁸ European Commission, [The 2015 Pension Adequacy Report](#).

²⁹ Fundamental Rights Agency, (2014), [Violence against women: an EU wide survey](#).

- Promote better coordination among the different services of the European Commission to improve integration and consistency of policy areas – from design to implementation – that are crucial to address higher levels of poverty and other intersecting inequalities experienced by women.³⁰

VI. Implement EU and international instruments to protect the basic rights of female migrant carers

Why?

- Across the EU, the withdrawal of crucial public services combined with women's increased labour force participation has led to greater reliance on migrant women to provide the infrastructure that allows other women – especially those in medium and high-skilled occupations – to better reconcile work and family life.³¹ For example, in Cyprus, migrant domestic workers constitute an estimated eight percent of the total population and 97 percent of the total domestic work.
- In comparison to EU workers and other non-EU workers, female migrant domestic and care workers suffer from unequal treatment in terms of pay, health and safety at work, working time, leave and access to social security and essential services.³²
- Under conditions of austerity, employers (including families) face greater incentives to rely on undeclared, undocumented or low-paid labour. Migrant domestic and care workers' immigration status is typically linked to their employment, which puts them at increased risk of exploitation and becoming undocumented should their employer rescind or refuse to renew their employment.³³

Recommendations:

- Ensure that EU labour migration policies strengthen protection for all migrant workers engaged in domestic work, healthcare, care and social services, irrespective of their migration status. Policies should leverage international laws that guarantee equal access to rights such as healthcare services, prevention of violence services and homeless shelters and encourage Member States to review and reform laws and policies that restrict access to basic rights.
- Ensure that the proposed European platform against undeclared work prioritises the protection and rights of informal carers, regardless of migration status.
- Encourage Member States to remove all legal, administrative and practical obstacles to access to protection and redress for all women who have suffered exploitation and violence, regardless of migration status.
- Urge Member States to ratify International Labour Organization Convention 189 on domestic work, as recommended by the European Parliament.³⁴

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³⁰ For example, promote adequate income across the life cycle for all, including adequate minimum income and adequate minimum pensions in all Member States, to reduce the poverty gap between women and men. Promoting a system of "care credits" would increase the pension contributions of people who are outside the labour market.

³¹ Women and Global Migration Working Group, *Women and migration*.

³² In addition to this, the government allows employers to make deductions for food and accommodation expenses. Even then, this low wage is not observed by all employers. Source: PICUM, 'Undocumented'.

³³ For instance, in Denmark migrant women who get pregnant effectively lose their residence permits and are forced to return home. Copenhagen Post, "[Pregnant au pairs kicked out of Denmark](#)", 14 October 2014.

³⁴ European Parliament [resolution](#) of 14 March 2013 on the integration of migrants, its effects on the labour market and the external dimension of social security coordination (2012/2131(INI)).