

**THE
CORONAVIRUS
CRISIS
AND THE
WELFARE STATE**

SOCIAL EUROPE DOSSIER

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PREFACE

The coronavirus crisis has highlighted the flaws in European welfare states, which can spur their renewal and reinforcement after decades of cuts and privatisation.

It has foregrounded how increasingly threadbare social safety nets and precarious labour markets have left many marginalised and even destitute. This has strengthened the claim of those who have argued that we need a ‘social investment’ welfare state, rather than one focused on the rescue of individuals downstream. Universalism in welfare is also shining through, with social-insurance systems failing labour-market outsiders and market-liberal systems failing more still: Denmark has seen no excess deaths due to the coronavirus whereas the UK has suffered one of the highest excess-deaths ratio in the world.

The pandemic has further spotlighted the gender assumptions behind all welfare-state discussions. The fact that the home has been far from a safe haven during the crisis for

women experiencing intimate-partner violence has only been one of the ways the interaction of the public and the private spheres has been made manifest. And with so many on short hours or ‘furloughed’, how non-socialised domestic labour is shared becomes a live issue.

This series addresses what a 21st-century welfare state should look like for all of Europe. Underpinning all these considerations is a vision of a welfare state which provides equal autonomy for all to pursue their life goals, in solidarity with others. That means developing a new progressive narrative which can consolidate a social coalition behind the new vision, in the way ‘the people’s home’ allowed Swedes to picture in their minds the national welfare state of their (then) future.

How can EU member states arrive at one such ideal form, given their different starting points, and how can the union offer a lead in getting there? Social policy has conventionally been seen as a matter for the member states but the European Pillar of Social Rights has at least provided a rhetorical commitment to a social floor for the whole of the union, through which none should fall.

CARE, CAPITALISM AND POLITICS

KATHLEEN LYNCH

Capitalism is the dominant political-economic system of our time. In its neoliberal form, it is premised on giving primacy to the market in the organisation of social life. While it has been contested, it has retained a cognitive hegemony.

Neoliberal capitalism is not just an analytical framework for economic organisation—it is also normative, as it presents clear ideas as to how society should be organised, with the market providing the over-riding ethical context. It endorses an entrepreneurial individualism that is self-interested and, as it regards such traits as natural and desirable, is antithetical to care in deep and profound ways.

Neoliberal capitalism encourages individuals to be highly competitive, be it in relation to job security, material wealth, social status, personal relationships or moral worth. Within this frame, care is a subordinated, secondary value.

Money is the most widely used measure of success and the dominant indicator of competence and value—the great common denominator through which all things are made comparable and measured. Spending time caring for others who are not able to pay a high market rate for care (including children and poorer, invalidated adults) begins to appear very unwise, even quixotic, a waste of money-making time.

Yet life depends on care. It is essential for the survival of humanity and the planet.

Hierarchical thinking

The devaluation of care did not begin with capitalism. The distinction drawn by Descartes in 1641 between mind and body, *res cogitans* and *res extensa* (‘thinking things’ and ‘extended things’), encouraged binary and hierarchical thinking in relation to humans. Thinking things had control over extended things, namely nature. As women and indigenous people were part of nature, they were subject to what Descartes called the ‘masters and possessors of nature’.

Care thus became defined as part of nature rather than society and, as such, an exploitable thing—an essential or instinctual quality of women, something they did ‘naturally’. And, as it was assumed to be an innate female disposition, care was not seen as work requiring recognition or reward.

The belief that caring was not human-defining work was translated over time into a view, in Europe and elsewhere, that it was not citizenship-defining work. TH Marshall's influential concept of citizenship centred on the idea of the citizen as an individual who held civil, political and socio-economic rights (under the protection of the state). Citizenship was not equated with having caring responsibilities or being in need of care.

While caring was recognised in the postwar period in Europe—including through child welfare payments and publicly-funded care for children and older people—much of the economic security which accrued to people in adulthood, and especially in old age, remained tied to their prior employment status. In the European Union Charter of Fundamental Rights and the Lisbon treaty, promotion of employee rights is the primary concern in this regard.

Yet the holes in welfare systems in Europe became very evident in the Covid-19 pandemic. The high rates of deaths in nursing homes showed that older, vulnerable people were not a priority, and neither were their carers.

Denigrated dependency

Being an adult and a citizen remained in the post-industrial era closely aligned with the ideals of independence and autonomy; there were no 'good' dependencies for adults. Children and adults without employment, for whatever reason, were and are assigned a denigrated dependency status—albeit this is changing slowly and some countries

are recognising unpaid family caring for insurance purposes.

The pervasiveness of this perspective is evident in the institutionalisation of forms of ‘active’ and ‘responsible’ citizenship in contemporary Europe. Everyone is expected to be an active economic agent, including people with disabilities. The unemployed and ‘the poor’ are subjected to moral appraisal and punishment when they fail to activate and become valuable employed citizens.

Because being dependent is shameful, by extension, caring for those who are dependent and in need of care has become shaming by association. Caring is not seen as real work, especially if undertaken without pay within families.

Homines curans

Capitalism is not without morality. But, being governed by money-making, it not only enables violence and killing in organised warfare for profit; it also allows people to die from neglect, be it through poverty, homelessness and/or lack of healthcare.

Yet while people are self-interested, they are not purely self-interested. They have relational ties which bind them affectively to others, even to unknown others—they are also altruistic. Things matter beyond money, status and power, because the desire to love and care parallels the desire to consume and to own: *homines curans* (caring people) are as sociologically real as *homo economicus*.

One of the things we have learned during the pandemic is that humanity is deeply interdependent. This relatedness feeds into morality: our need of others enables us to think of others. People can identify morally appropriate behaviour in themselves and others and these orient and regulate their actions. The pandemic has taught us that, in times of illness, care is not an optional extra: it makes the difference between life and death.

New narrative

To bring *homines curans* to life politically, however, the concept must first be brought to life intellectually. This requires a new narrative, one that is framed ‘outside the master’s house’ of mainstream, male-dominated thinking about social change. There are ‘cultural residuals’ of hope, which can be reclaimed intellectually for politics.

One of the sites of these cultural residuals is the affective domain of love, care and solidarity—the relationships that concern people and give their daily lives purpose. Although talk of care discourses is politically ‘domesticated’ if not silenced, affirming the nurturing values which underpin care relations can help reinvigorate resistance to neoliberalism. It can create a new language and a new set of priorities for politics.

Building political models on the presumption that decisions are made simply in terms of economic and social self-interest (which is the norm in party politics) fails to do justice to the ties, bonds and commitments which bind

people to one another in defiance of self-interested calculation. It undermines the solidarity and other-centredness shown in many local communities during the pandemic.

It is time to frame a new politics of care and affective justice which contests the narrative of purely self-interested politics. This is necessary, not only due to the pre-eminent importance of care as a political ethic, but because people need an intellectual and political pathway to counter the narratives of fear, hate and aggrandisement that govern a world guided by capitalist morality.

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GREATER EQUALITY: OUR GUIDE
THROUGH COVID-19 TO SUSTAINABLE
WELLBEING

KATE PICKETT AND RICHARD WILKINSON

The living standards of the poor differ dramatically between low- and high-income countries. In India, living in poverty may mean living in a one-roomed shack with no sewerage, whereas in Norway it may mean living in a three-bedroom, centrally-heated flat with many modern appliances.

But the overriding subjective experience of poverty is substantially the same, regardless of those differences. Interviews with those regarded as poor in richer and poorer countries found: ‘Respondents universally despised poverty and frequently despised themselves for being poor.’ By being poor, they felt that they ‘had both failed themselves and that others saw them as failures’ and their sense of shame ‘was reinforced in the family, the workplace and in their dealings with officialdom’.

Inequality and hierarchy

That poverty should make people feel so shamed, devalued and humiliated, despite such different material circumstances, highlights the overriding importance of relativities and of inequality itself. Inequality brings hierarchy into social relationships.

The material differences in a society, the ‘vertical’ inequalities of income, wealth and power, are foundational. They are the inequalities through which the various ‘horizontal’ inequalities of ethnicity, gender, sexuality and disability are expressed and experienced. They create the social distances of class and status, of superiority and inferiority, exacerbating the downward prejudices and discrimination experienced by women, black, ethnic and other minorities. How large the overall ‘vertical’ inequalities are across a society—from the heights of privilege to the depths of deprivation and degradation—the scale of material inequality tells us how far societies are from treating all members as of equal human worth.

Larger material gaps in a society make class and status differences more important. They increase the prevalence of a wide range of health and social problems associated with low status. Most of the problems that we know are related to status within societies become more common when bigger income differences make the differences in social status larger. Examples include health, child well-being, violence, social cohesion, social mobility, imprisonment rates and the educational performance of schoolchildren.

Crucial importance

The coronavirus pandemic has focused attention—once again—on the crucial importance of the scale of income differences. In a comparison of 84 countries as well as among the 50 states of the USA, coronavirus death rates have been found to be higher where income spreads are larger (after controlling for confounding factors).

Societies with female political leaders have been more successful than others in limiting the pandemic. This appears to be because more equal societies are not only more likely to elect women to leadership positions but also, due to their greater equality, were already healthier and more cohesive *before* the pandemic.

Although inequality increases violence (as measured by homicide rates), there are not yet studies of whether the rise in *domestic* violence during the Covid-19 lockdown has been greater in more unequal societies.

Welfare system

One of the most crucial functions of welfare states should therefore be to reduce inequalities in income and wealth. But that does not tell us much about what kind of welfare system is most desirable.

As Gøsta Esping-Andersen and others have shown, bigger welfare states do not always produce greater equality. The relationship between different welfare-state systems and

inequality is more complicated than might at first be imagined. The same system applied to different populations may produce different levels of inequality—depending, for instance, on the proportion of elderly or single parents in the population.

Large-scale redistribution, through progressive taxation and generous social-security systems, is however essential. That is necessary not only to support the economically inactive population but also because the inequalities of pre-tax (‘market’) incomes are intolerably large.

Over the last 40 years, inequality has increased in so many countries mainly because income differences before taxes and transfers have widened so dramatically—particularly as a result of the take-off of top incomes. It has thus also become increasingly important to reduce income differences before tax.

The picture is broadly similar in many countries: the historic strengthening of the labour movement and social-democratic parties led to a decline in inequality from sometime in the 1930s. That continued through to the late 1970s, to be followed—because of the rise of neoliberalism and the decline of the labour movement—by the modern rise in inequality from around 1980. The politics behind these changes is illustrated clearly by the way trends in inequality in different countries almost exactly mirror changes in trade union membership.

Economic democracy

We need to develop new means of bringing top incomes under democratic constraint. Perhaps the most promising are forms of economic democracy—not only substantial and increasing employee representation on the boards of larger companies but also incentives to expand the small sector of more thoroughly democratic models, such as employee co-operatives and employee-owned companies.

As well as smaller income differences, more democratic forms of management have many other advantages, including improvements in productivity. That is in stark contrast to conventional companies, in which those with the largest pay differentials perform less well than those with smaller differentials.

Extending democracy into the economic sphere may have the important additional advantage of underpinning our political democracies—which have become increasingly dysfunctional—and embedding equality fundamentally in the social structure. Because some multinational corporations not only have revenues bigger than the gross domestic product of smaller countries but also exercise high control over the lives of hundreds of thousands of employees, they inevitably raise issues of democratic accountability. The same ethical justifications used historically to replace political dictatorships with democracy are just as relevant to the demand for economic democracy today.

Reining in consumerism

Greater equality is also key if, over the next 10 or 20 years, we are to rein in consumerism and waste and achieve carbon neutrality. Research has shown that inequality intensifies the status competition that drives consumerism. Inequality makes money more important: it becomes the measure of the person—so much so, that people living in more unequal areas have been found to spend more on status goods, including ostentatious cars and clothes with designer labels. Not only that but borrowing tends to increase with inequality and bankruptcies become more common.

The pandemic has shown that our societies are more flexible, and their populations more vulnerable, than most people had previously recognised. Given the urgency of making the transition to sustainable wellbeing, these are valuable lessons. Greater equality has been shown to be a powerful asset, in increasing society's flexibility and in reducing our vulnerability to Covid-19.

The prize of sustainable wellbeing requires that populations of high-income countries abandon the goal of economic growth, which no longer improves the health or wellbeing of their populations, and turn their attention instead to improving the quality of the social environment. We know that social relations are powerful determinants of health and wellbeing—and both can be improved by reducing inequality.

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THE GLOBAL FUND FOR SOCIAL
PROTECTION: AN IDEA WHOSE TIME
HAS COME

OLIVIER DE SCHUTTER

The Covid-19 pandemic and the workplace closures adopted by governments to limit the spread of the virus have imposed an unprecedented ‘stress test’ on social-protection systems across the world. Hours worked worldwide decreased by 10.7 per cent worldwide in the second quarter, potentially translating into the loss of 305 million jobs.

The most severely affected have been workers in the informal sector and in precarious, ‘non-standard’ forms of employment: respectively 1.6 billion and 0.4 billion workers globally and together three out of five. Because women are over-represented in the most affected categories—and because they shoulder most of the burden when families have to make up for the inability of public services, including healthcare, to support those in need—the crisis also represents a massive setback in progress towards gender equality.

Major limitations

Responding to this unprecedented economic and social crisis, governments have set up new cash-transfer schemes or extended existing ones—for instance, to cover informal workers or to loosen the conditionalities attached. They have increased support for workers who have lost their jobs or families facing destitution. And they have expanded cash-for-work programmes. By September, some 1,407 measures had been adopted by some 208 countries and territories, providing critical relief to individuals and families in need. While hugely important, these measures suffer, however, from two major limitations.

First, many of the responses are short-term—temporary fixes, put in place for the lockdowns or, at best, until the economy starts recovering. Yet, when the member states of the International Labour Organization, together with the representatives of workers and employers, unanimously adopted Recommendation 202 on Social Protection Floors in June 2012, they pledged to ‘establish and maintain ... social protection floors as a fundamental element of their national social security systems’. In line with the International Covenant on Economic, Social and Cultural Rights as well as with other ILO instruments, this entailed a commitment to put in place standing, rights-based, social protection floors, defining beneficiaries as rights-holders with entitlements they may claim.

Short-term, charity-based measures, including cash transfers, can be vital in times of crisis. But they are not a substi-

tute for permanent social protection floors. These ensure access to healthcare, guarantee basic income security for children, protect people from the risks of unemployment, sickness, maternity or disability and ensure older persons receive a pension guaranteeing an adequate standard of living.

Secondly, while governments worldwide have dedicated at least \$12 trillion to speeding up the global recovery—including by investing in social protection—by far the most important contributions, in absolute terms or as a proportion of their gross domestic product, have come from rich countries. While the European Union has adopted a €750 billion recovery plan (equivalent to 6 per cent of its GDP) and Japan's amounts to \$1.1 trillion (22 per cent of GDP), the fiscal response of low-income, developing countries has been limited to 1.2 per cent of GDP on average.

Significant cut

Developing countries, and particularly low-income countries, face high external debts, aggravated today by capital flight depreciating their currencies. Many also face a significant cut in remittances, expected to be 20 per cent lower in 2020. Comprising in total \$350 billion in 2018, such transfers are the most important source of income from abroad for these countries—greater than foreign direct investment, portfolio investment or official development assistance.

Developing countries also have a limited capacity to mobilise domestic resources and are currently affected by

the low prices of commodities on which their export revenues often depend. Hence they lack the fiscal room for manoeuvre to put in place social protection floors, effectively preventing their populations from falling into poverty.

Moreover, the 47 poorest and most vulnerable countries, most of which are in Africa, face an additional constraint: they are small and have poorly diversified economies. This exposes them to high risk from ‘covariate exogenous shocks’—whether economic, climatic or health-related, such shocks affect a large number of households or even entire communities and regions at once, resulting in massive additional burdens on whatever social protection systems exist.

Greater resilience

We need to support these countries’ efforts to put in place robust social protection floors, to ensure greater resilience in anticipation of future shocks. It is high time that we moved beyond emergency cash transfers when a crisis unfolds—which is like starting to recruit firefighters when a fire breaks out. Instead, we need to make standing, rights-based, social protection floors universal—like well-trained and well-equipped fire brigades, ready to intervene at all times.

International solidarity is essential. Already in 2011, the Report of the Social Protection Floor Advisory Group recommended that ‘donors provide predictable multi-year financial support for the strengthening of nationally defined

and determined social protection floors in low-income countries within their own budgetary frameworks and respecting their ownership'. The 2012 Social Protection Floors Recommendation itself refers to international co-operation to complement efforts at domestic level. International human rights law also recognises a special responsibility for states in providing for international assistance and co-operation in the fulfillment of social rights in other states with limited resources. In 2012, in this spirit and building on these pledges, two independent United Nations human rights experts proposed a Global Fund for Social Protection, to support efforts of low-income countries seeking to guarantee social protection floors to their populations.

Social protection floors are affordable. ILO experts describe their cost as 'negligible' when set against the total incomes of donor countries. According to the most recent estimates, taking into account the pandemic, developing countries would need to invest an additional \$1.2 trillion—equivalent to 3.8 per cent of their GDP—to provide the full range of entitlements associated with social protection floors. The financing gap for low-income countries is \$78 billion or 15.9 per cent of their GDP. By way of comparison, in 2019, total official development assistance from members of the Organisation for Economic Co-operation and Development amounted to \$152 billion, and \$78 billion represents about 0.15 per cent of the wealth created in rich countries in 2019.

Financial incentive

This new international financing facility would not be a tool to ensure rich countries pay for social protection in poor countries. Donors would contribute matching funds, providing a financial incentive for poor countries to invest more in social protection—ensuring that domestic resource mobilisation gradually expands so that, in time, international support becomes unnecessary. Moreover, the new mechanism could provide an essential risk-insurance mechanism for low-income countries with poorly diversified economies—countries fearing liquidity problems in times of crisis would be strongly incentivised to invest in standing social protection schemes, to protect their populations over the life cycle.

The pandemic has led to numerous calls to ‘build back better’. Now comes the reality test. Strengthening the resilience of social protection systems across the world should become a political priority and international solidarity should be put at the service of this objective. The crisis is unprecedented and its human impacts huge—if we can at least learn its lessons, it shall not be entirely wasted.

Olivier De Schutter is the United Nations special *rapporteur* on extreme poverty and human rights.

IS THE CORONAVIRUS GOING TO RESHAPE THE EUROPEAN WELFARE STATE?

STEFANIE BÖRNER

At the beginning of the pandemic, strong government interventions and border closures unleashed a debate on the ‘renationalisation’ of politics. Yet, several months on, it is quite clear that the coronavirus crisis is strengthening not the nation-state but the welfare state. The question is: what will remain of this insight in the long run?

Will austerity and privatisation leave the global stage and make room for a welfare rebound? Will the awareness of the most socially vulnerable labour-market groups last, or will economic considerations overshadow these groups’ needs over time, given the negative economic impacts of the pandemic? Will renewed state-market relations arise from the coronavirus crisis, thus redefining the ‘nightwatchman’ role of the neoliberal state?

The answers to these questions will indeed be partly national ones. But this would not be the complete story: it

would simplify the complexities of today's multi-level governance in Europe, including the roles of the subnational and supranational levels.

Three stages

With respect to infection numbers and policy responses, Europe witnessed two initial stages of the pandemic. With the onset of autumn, Europe has entered a third stage, marked by a steep rise in infections, moderate policy responses and regional rather than nationwide restrictions.

During the first stage, when infections were highest—and strict policy responses, such as lockdown and social distancing, were required—social policies were oriented towards direct support, with temporary expansions or facilitation of eligibility, provisional increases to some benefits and suspension of conditionality. During the second stage, when infections were lower during the summer and lockdown measures were eased, social and labour-market policies, such as the one-off German child bonus, were tailored towards stimulating the economy and getting people back into work.

States, such as the UK, which have long favoured deregulation, privatisation and 'market efficiency' have had to make greater efforts than generous welfare states, such as Sweden, Denmark or Germany. While Sweden was spared the painful experience of closed kindergartens, schools, shops, restaurants, it is still unclear whether it is better off

economically in the long run, compared with those countries that faced lockdown periods. Yet the path taken by the Scandinavian country emphasises a personal autonomy which also belongs to the DNA of social citizenship.

By European standards, Sweden and Denmark have provided the most generous allowances for short-time working. While short-time work allowance is still the instrument of choice, its long-term effectiveness might be limited, given the severity of the slump and the prospective expiry of short-time contracts. Therefore, the list of economic and company support measures has lengthened: corporate grants, credit schemes, tax cuts, deferrals and temporary reductions of value-added tax.

Since not only the ‘big spenders’ but all welfare states rely on taxes and social benefits, this focus on economic recovery and the workforce is understandable. Yet it misses out on important lessons the pandemic-induced crisis has taught.

Health and social risks

While during the first stage those directly affected by the lockdown and the so-called essential sectors received a great deal of attention, not much is left of this attentiveness months later. As a recent UK study shows, the much-praised essential workers face the most pandemic-related health and social risks because they do not work at home, belong to the low-paid sector, are ‘over-represented in

temporary and part-time work' and are at risk of unemployment and social deprivation. So the question as to how to shape the future of work is not limited to the much-discussed digitalisation, but must take in income stability, the inclusion of precarious workers and a revaluation of the social-service and care sector as well.

A second (linked) question is how to prevent the most vulnerable from being excluded. Existing and adjusted stage-two measures benefit especially the better-off workforce and render labour-market participation the major gateway to social participation. Surprisingly few countries have reacted to the fact that the coronavirus crisis deepens income divides. The Spanish government, for instance, finally approved of a long-debated, guaranteed-minimum-income scheme in May. In Belgium social-assistance recipients have received a monthly supplementary payment of €50 for six months. Both approaches strengthen citizens' social rights by weakening 'deservingness' considerations.

Thirdly, the pandemic provides an opportunity to rethink the connections between climate neutrality, a sustainable economy and social security. Denmark was among the first states to link economic development to the expansion of climate-neutral technologies and sustainable corporate investments, such as climate-neutral housing and renewable energy. In May, Norway launched a green-transition package, which aims to invest in hydrogen, renewable energy and a circular economy. And although less ambitious than needed, the European Union's €750 billion recovery pack-

age includes stimuli for member states to make green investments.

Transnational solidarities

Last but not least, the pandemic reveals nothing more clearly than the transnational interrelatedness of social life and the economy on the one hand, and the multiplication of territorial levels crucial to social politics on the other. The struggle against Covid-19 could act as a motor of international co-operation, transnational solidarities and supranational policy solutions. Conversely, the crisis bears the risk that significant EU achievements could get lost: migrants' rights, free movement within the single market or international student mobility.

Especially since all these are Europe-wide phenomena, political leverage and foresight could turn the pandemic experience into a multilevel approach, combining national, sub- and supranational action in the (interrelated) areas of social minima, work, the green transition and public health. Taken altogether, this would comprise a comprehensive and sustainable European social citizenship.

In contrast to previous crises, the coronavirus crisis poses challenges in all welfare fields—health, labour-market and unemployment policies, social services, family and the elderly—without questioning the role of state intervention. The pandemic made us rediscover society, as the sociologist François Dubet has put it.

The lockdown has made us aware not only of the social division of labour, the functioning of organisations and the way we depend on each other, but also how this intersects with personal autonomy as well as fundamental and social rights. Each society (in Dubeat's traditional sense of national society) is deeply intertwined with its domestic welfare regime: the ways we plan our careers, look at certain social groups and consider questions of solidarity and justice are shaped by how social security and education are organised and work is regulated.

Nordic model

From the perspective of social citizenship, the Nordic welfare model is an especially thorough method of linking the state to the lifeworld of individuals. It is relatively generous and woman- and family-friendly and offers free or highly-subsidised services. There is however no standard recipe, given European countries' extreme divergence on economic and labour-market performance, not to mention exposure to Covid-19.

The experience of the pandemic rather calls for a great transformation and modernisation of social citizenship: universal social rights, which end the exclusion of those in precarious employment; transnational rights, from free movement to social entitlement, which endure amid shocks; and the goal of climate neutrality aligned with social imperatives. The question is thus not whether the European

welfare state ‘might be here to stay’, but which path it will take.

Stefanie Börner is an assistant professor at the Department of Sociology, University of Magdeburg. Her areas of interest include European integration, social and employment policies and social theory.

FIXING CARE: REFOCUSING ON THOSE
WHO NEED IT AND THOSE WHO
DELIVER IT

OLIVER ROETHIG AND ADRIAN DURTSCHI

The collective effort to protect those most at risk from the coronavirus is unprecedented. Through changes to their everyday lives, an overwhelming majority of people are showing a commitment to putting human lives ahead of their usual comforts.

Similarly, nursing-home workers have kept on going, through truly traumatic situations. For too many of them this effort has cost them their life. After ten of the residents she had been caring for passed away, Marie-Madeleine was among the first of these workers to succumb in Brussels—the very city where European Union decision-makers can now take decisive action.

Today, workers across Europe are mobilising for the Global Day of Action for Care. We join them in remembering the fallen and fighting for those still on the front line.

Caring for the most vulnerable is a value that unites people across Europe. Yet, mirroring the experiences of others on the front lines, the crisis has stretched our increasingly precarious nursing homes to breaking point.

Staggeringly under-prepared

Nursing homes were staggeringly under-prepared for this crisis. Across the European Union member states, their residents have accounted for 30-60 per cent of Covid-19 deaths.

While viruses stem from nature, the factors facilitating their spread within nursing homes are products of human choices. The results of the drive towards unsafe staffing levels, chronic equipment shortages and cuts in personnel training are nothing short of a disaster. Quality of care has long been sacrificed at the altar of quantity. Corners have been consistently cut to prioritise the saving of money over the saving of lives.

These choices are symptomatic of a deeper crisis—the crisis in workplace democracy. When working people have a say over decisions in their company, they use it to ensure safety and improve their conditions. After years of undercutting each other, including for public contracts, nursing homes are among the workplaces with the worst working conditions and least receptiveness to collective bargaining.

Procurement lever

Sectoral collective bargaining gives workers the ability to drive up conditions across the whole industry and must be part of the solution. There are signs the EU is waking up to the underlying structures that suppress workers' conditions. Just yesterday, the European Commission released the draft of the Minimum Wage and Collective Bargaining Directive. If the EU is serious about addressing the situation, decision-makers must start by requiring that public procurement—a major lever when it comes to the care sector—limits eligibility only to those companies that respect workers' collective-bargaining rights.

Investing in care means improving staffing levels, so patients can receive the dignified care they need. Long-term care facilities with higher staffing ratios have better resident outcomes and workers are more likely to feel confident about the care they are providing. When care is rushed, residents feel dehumanised and workers report forgetting or having to omit tasks due to lack of time. Understaffing leads to high anxiety and burnout, mostly because workers fear injury to themselves and residents.

Workers in the care sector are some of the lowest paid: many direct caregivers work at minimum wage or well below the living wage. The pandemic has revealed that our nursing homes had not provided the necessary training associated with infectious disease management. Staff often lacked the training to use personal protective equipment properly—even when this was available.

Heavy resort to agency and temporary staff in long-term care has presented a particular challenge in terms of training. For better disease management, we need better jobs. Driving down conditions, to the extent that people need to find multiple jobs at multiple facilities to make ends meet, can no longer be an option. Decent conditions are essential for those who do this essential work.

Wealth extraction

Paralysis gripped nursing homes during the pandemic. Under-staffed, under-trained and under-equipped, they lacked any slack to adapt to the exceptional circumstances. The problem is not a lack of money. The money is there but it is being redistributed upwards—as share buy-backs, debt-servicing, dividend payments and other forms of wealth extraction.

Private-equity investors, in particular, are snapping up what they see as ‘attractive opportunities’. Typical approaches involve loading nursing homes with debt and sale-and-leaseback of the properties (as exemplified by the recently signed deal by Orpea). While the real-economy nursing-home business is burdened with these new payment requirements, the investors are allowed to extract the money and invest it elsewhere. In the worst-case scenario the nursing home will go bankrupt but these predators know that governments will be forced to step in beforehand, as they cannot let elderly people become homeless.

It is crucial that the EU targets its interventions and policies at improving care, rather than safeguarding these destructive practices of wealth extraction. These structural problems, in one of the world's most developed regions, are manifest policy failures. As well as resulting in better resident outcomes, higher staffing ratios would lead to the creation of jobs rooted in the communities care homes serve.

In addition, because this industry is primarily female, investing in care could reduce the gender wage gap by as much as 5 per cent. Investing in pay also reduces the need for workers to work more than 40 hours per week, leading to less burnout. Investing in decent jobs, staffing, training and equipment would align pursuit of economic recovery with improved long-term care.

Protecting the vulnerable

Care cannot be fully explained by numbers: its physical and emotional aspects demand that we regulate in a way that protects the most vulnerable in our communities. In the EU, the creation of a health union is being discussed. It would include stress tests on health systems and common minimum standards. These are all positive improvements—but until policies and funds can be explicitly connected to worker conditions and resident environments, there are no guarantees for those living and working in the system.

Better working conditions are achieved through sectoral collective bargaining. By working together, unions,

employers and governments can support each other to ensure decent work, as well as raising the standards of care. Workers in the sector need to be able to form and join unions. Through sectoral bargaining we can raise the bar for everyone at the same time.

Beyond an issue for trade unions alone, improving conditions for care is increasingly recognised as an objective towards which all caring organisations, including the charitable and faith-based, are working. One easy way to do that is to redirect public procurement from incentivising companies to cut corners to driving up care quality instead.

The coronavirus recognises no borders and care needs are not fundamentally different from one country to the next. Investment combined with sectoral bargaining can ensure that care workers in all European countries, in private or public facilities, have decent working and living conditions. We have the opportunity to create a better future—a care system which protects everyone and builds a shield against the coronavirus for all.

Oliver Roethig heads UNI Europa, the European service workers' union. He was elected as regional secretary of the seven-million-strong union for a second consecutive term in 2016.

Adrian Durtschi is head of UNICARE, which represents more than one million workers worldwide in the care sector.

WOMEN AND WELFARE: INTERVIEW
WITH MARY DALY

MARY DALY

Mary Daly tells Robin Wilson (Social Europe) that the coronavirus crisis has exposed the partial and limited nature of gender-equality gains.

Robin Wilson: In writing a book like *Gender Inequality and Welfare States in Europe*, you are obviously highlighting how the literature on the welfare state has often been, in your assessment, gender-blind. What have been the key blindspots?

Mary Daly: I think the first blindspot has been in what it is about the welfare state that is studied. Most of the literature has studied social-insurance benefits—so unemployment payments, pensions, accident and illness payments. These are, of course, important, but they're classically

men's benefits, and they're actually only a part of the welfare state.

What hasn't been in the literature as much as it should be is what we call social-assistance benefits. That is, benefits that are discretionary, so people have to have a need of some kind, and have that need legitimised by the statutory authorities to get these benefits. It's primarily women who have—historically, anyway—used those benefits.

Another thing that has been less studied generally in welfare states, though it's important from a gender perspective, is social services. Most of our literature on the welfare state comes from studying income support, how the welfare state guarantees incomes. We have far less literature on how the welfare state provides services and, indeed, how the welfare state is an employer.

This emphasis on social insurance, what's called 'men's welfare state', has meant that we know most about the welfare state as a settlement between social classes, in particular between workers—organised workers, through trade unions, for example, or perhaps through political parties—and employers. That literature has sought to understand and explain the welfare state in terms of the ways it tries to manage this conflict.

Of course, that overlooks the fact that the welfare state is also very much engaged in managing relations between women and men and between generations and, indeed, between the family and society, or the family and the state,

or the family and the market. So there are a number of blindspots, but these seem to me the most important.

Now, you said there that the welfare state has been, to some degree, about managing relations between women and men. You do say in your book that there have been some changes in the welfare state which have addressed gender concerns, but you say they tend to have been confined to labour-market participation by women. What has been lacking in that regard?

It depends on the length of history you look at. Historically, certainly from the 1970s or 1980s on, the welfare state, or particular welfare states—the European Union social policy, for example—did problematise gender inequality or women’s disadvantage relative to men.

So it was part of a project. Gender inequality was part of a bigger project for a certain period of time, but over the last 20 years the gender-equality dimension of the welfare state has come to focus more and more on employment and, in particular, on increasing the number of women in employment.

While having everyone in employment is important, it’s not a solution to gender inequality. What has happened is that women’s lives have become more like men’s and men really haven’t been required to change, or the institutions around male lives have not been required to change in the way that women have been required to change.

You can see this in the indicators. We now measure gender equality, primarily, by wage gaps. We know that wage-gap data tells us there is, depending on the country you look at, a 15 to 20 per cent wage gap between women and men in general.

But that gap in itself is much too narrow as a measure of gender inequality. Employment is important but it's not the only thing. We need to think about power. We need to think about women's access to decision-making, at whatever level we're looking at, whether it's in the workplace or whether it's in the home or in the public institutions, like parliaments or local councils or whatever. Power is one dimension that we haven't really focused on sufficiently.

Another is time. In my book I say there are really three things that we need to be measuring equality around, in relation to the welfare state. One is employment. The second is income, and not just income from employment but income from all sources: the welfare state, wealth, whatever. The third is time. How much time do people have available to them? How much choice do they have around using the time they have and, in particular, the time distribution between women and men—not just in the paid labour market but also in the home?

That issue of time that you've raised does bring in the distinction you highlight in the book between public and private, and how that is taken for granted. That leads to a disproportionate share—still very disproportionate share—of care work for

women, as you've said in talking about the double burden that employed women typically face. How can we encourage a rethinking of that public-private distinction, so that women's choices aren't so constrained?

We've probably started that, actually, already. In the last ten years or so, we've seen the emergence of a work-family balance perspective, which has concerned itself with not just the amount of hours that people work and are paid for in the paid economy but also, to some extent, [with the principle] that people shouldn't be overburdened in the private domain.

You've seen a growth of leave from employment, for example, for family-related purposes. We've always had maternity leave, but increasingly we've had paternity leaves and parental leaves. They're a step in that direction of recognising that equality doesn't stop in the public domain. You also need to intervene in the private domain.

That's one first step, but when I look at the measures that have been taken around Covid I'm very struck by this public/private domain [issue] again—that has been quite prominent, because what most governments did was lock down. They locked down people, basically, in their own homes. They put nothing—or hardly anything—in place to support people in their own homes.

The services were all cut, for example, and the welfare state intervened mainly in what you might think of as the public domain, around supporting employment, trying to keep

jobs going, through furlough schemes and so forth, and also through some income support measures. But the things that we had put in place around private life and trying to ensure that private life—or so-called private life—functioned well, they’ve actually more or less stopped. That’s interesting. Feminists, historically, have developed this idea of a public-private divide as one of the institutions, if I could use that word, that actually kept inequality—gender inequality particularly—going.

And there is some evidence, in terms of what you’re saying, that the coronavirus crisis has exacerbated existing trends around that public-private divide because it has meant that women have been doing additional hours of caring work—while men have been doing some more additional hours, they haven’t been adapting nearly as much to the crisis as women have. Of course, there has also been the extreme scenario of women exposed to domestic violence and so on, on a greater scale. Is your sense of it, at this early stage, that the coronavirus crisis has, perhaps, been less of a shock to the system in terms of gender roles than it might have been?

Of course, we haven’t got enough research yet to know. But a shock is always an interesting experience, because it is an opportunity to change on the one hand, yet it also reveals the fundamentals of the system on the other.

My sense is that coronavirus has revealed, in some ways, how shallow our architecture for gender equality is, particularly in the last ten years, because what we've based gender equality on is women being able to move into employment, and an architecture of childcare services to support that. Sometimes those childcare services are dependent on low-income, low-paid jobs, and migrant workers—particularly when we think also of eldercare.

Coronavirus has stopped all of that and so what we see, when we look at who's caring for the children and who's caring for the older people, [is that] it is, in the first instance, family based. We have a return to family, which was something that we tried to change when we moved towards gender equality.

Also, within families, the evidence suggests that it is women, as you say, who have borne the main burden of childcare. The statistics that I see for the UK suggest that, on average, during the height of lockdown, families had about 40 hours more childcare to undertake and women did about three-quarters of that.

It depended a bit on whether men were home-based or not and, indeed, whether women were home-based or not, so there's some variation there. We need to be really careful about how we understand it. As I said, I don't think we have yet got the evidence to really be clear about it, but in general I think it has kind of reverted to the old pattern of women having the primary responsibility for childcare and men having a secondary responsibility in that regard.

You've said already that you think we need to understand that private-public divide from a gender perspective to engage in any critique of the welfare state as it has developed. But when it comes to developing an alternative perspective, what you seem to be suggesting is that, rather than focusing on labour-market risks implicitly to men, the starting point should be the idea of the 'care economy'. Can you explain what implications that change of perspective would have, including both for the socialisation and sharing of domestic care, as well as for those women—mainly they are women, as you've said—working in paid care roles, often in precarious contexts?

The care economy is a particular concept, developed by feminist economists in the main. We need to pay attention to the 'economy' aspect of it. There is a whole other literature that just generally talks more about care as a social value, as a way of relating to each other. So we need to understand that the care economy is nested within that broader sense that care matters.

If we start with the care-economy concept, the core sense of it is that we would value the work that goes into caring—paid caring, also unpaid caring, but paid caring for those who need care in our societies: children, but also vulnerable adults, for example, and, of course, older, fragile adults. We would actually value that. We would see it as a sector of the economy that has value and that should have good conditions of work. Certainly in the so-called 'liberal' welfare

states—the UK, US, to some extent Australia and so forth—that work tends to be low-paid, [with] very little [by way of] conditions around people needing to be trained for it, but also generally ignored as a poor sector of the economy.

That isn't universal. In other countries—like the Scandinavian countries, the continental European countries, for example—people have a high level of training for that work. They have to go formally and train for it and it's not considered a low-paid sector. It's probably undervalued in many countries but it's not quite undervalued to the extent that it is in the UK and the 'liberal' economies.

We will have to think of the care economy and care as a sector of value. We will have to overturn the poor conditions and reward people better for it. Some countries did that. For example, France increased the payment rates or salaries of care workers during the pandemic. Scotland also tended to increase or bring forward a pay raise for that sector of the economy. Covid was really an opportunity to actually treat these workers better and I don't think it's an opportunity that has been taken up.

So, resource the care economy much better, but also in terms of care as a broader moral value in society. We had some examples during the early days of lockdown, when people really started to care about each other and to care about the people in their local neighbourhoods, for example—those who might be living alone, who might have needs

that couldn't be met because of service cutbacks and so forth.

There was some evidence there of a change or a return to the interpersonal values: 'Is my neighbour okay? Is my neighbourhood okay? Are my family okay?' Feminists would say, or care ethicists would say, that that's actually a way towards a better society generally and that Covid was an opportunity—is still an opportunity—to return to making us care more about each other, making us care more about our environment, for example.

It's interesting. In the newspapers today in Britain, the government is calling on people to report their neighbours if they break lockdown and so forth. I wonder if that's a further movement away from caring, actually—it's a very different perspective to actually care about what's happening next door and try to understand what's happening next door, rather than running to police your neighbours.

With the exception of Sweden, the Nordic welfare states certainly seem to have performed much better.

Yes, they do seem to have performed much better. It looks like their economies will recover quickly—more quickly—but the Nordic welfare states are quite different, while Sweden is an exception. Finland seems the one that has really performed the best, from what I see of the statistics.

Those countries have protected vulnerable sectors of the population better. They haven't had the virus rampage that we've had in the UK and the US has had—and Canada, indeed, has had—through care homes, killing older people in large numbers.

They haven't had that, which is really good, and it's a measure of the point I was making earlier about valuing care, valuing those who need it and valuing those who provide it, paying them properly, having good conditions, having good monitoring in care homes—or, indeed, in people's own homes—should they need care.

There are interesting differences there that we're just beginning to learn about. It's about the nature of the economy and the nature of the welfare state in particular—and also, I suppose, public values about what matters.

You seem to be saying that we need to think about a welfare *society*, as well as a welfare state, where certain values and forms of behaviour just become spontaneous, in a more solidaristic, less selfish kind of way. How do you think those values are best stimulated in society, in a way that obviously isn't authoritarian or overly punitive?

I start with the welfare state, because the welfare state is the best institution we have of solidarity. That's its origin and it developed in different ways in different countries and has different nuances, but it is, in almost every country—particularly if you include the health system, the education

system, housing etc—the institution we have that is most oriented to social solidarity.

The welfare state has received a really bad press in many countries as neoliberal thinking has taken hold and, as I said, [with] the emphasis on the market. The rationale for it, over the last ten years, in times of austerity, trying to recover from the recession of 2008, has primarily been to shepherd people—or push people, in some countries or in some cases—into employment. So it's this social-investment perspective, which is bigger than just pushing people into employment, it must be said, because it's also about child-care and so forth, investing in the youngest generation. But generally the welfare-state function has been to be a hand-maiden to the labour market, to enable people to be self-supporting in the labour market.

Now it's interesting to think, in the context of Covid, whether that kind of welfare state is sustainable. It doesn't seem to me that it is, because it depends on where people were pushed or where benefit recipients were pushed. Generally, [it was] into low-paying, part-time jobs, which for many people required another earner. You needed to have households that are dual-earning. In fact, one person in that household needed to have a full-time job, so it comes back a little bit to the shallowness of the recent settlement that we've had.

Going forward, it's not clear we'll get those low-paying jobs back. It's not clear we should want to get them back.

Perhaps we need to think differently about a welfare state that's much more about equality.

So [it's] not about cheap solutions, in a way—put everybody into employment—but much more about problem[solving]. What is the problem of gender inequality or black and ethnic-minority inequality, or inequalities as intersecting? What is that problem? Where does it start? That we actually try to understand that, rather than just see it as an outcome-related measure.

Okay, if we can come back, then, finally, to where we started, with the conventional understanding of the welfare state as about dealing with implicitly male risks in the labour market, what you seem to be talking about is a renewal or refoundation of the welfare state, on the principle of rights—rights defined in a very broad range of ways, including not just rights of individuals as conventionally assumed ('breadwinner' workers) but also, obviously, rights of women, rights of members of ethnic minorities and other vulnerable individuals. How do you think that it's possible to change the political debate about welfare in the way that, for example, in Sweden was done with the phrase 'the people's home', when suddenly people thought about what welfare was in a different way? How can that discourse about welfare be changed, away from the neoliberal one that you mentioned—where it's just seen as a burden and a distraction—to something that's

embraced more positively as a route to universal wellbeing?

That's a difficult question, particularly in such divided political times as we have, where people who are often most deprived of rights move towards populist parties and so forth. I like the concept of social protection generally, and that's an old concept. It's one of the fundamental principles of welfare states.

In it is there's an idea of rights. Rights probably have been damaged during the coronavirus crisis. I'm thinking here, for example, of some of the legislation that was brought in [in England] with the lockdown in March. That said that local authorities need only provide care for those who don't have it if [they would otherwise] breach their human rights.

That's a huge step back from the previous legislation, which said that local authorities had an obligation—full stop—to provide care for those who need it. We've had no new rights that I can think of during Covid, so we could start a conversation around rights. We could start a conversation around social protection and the renewal of the welfare state, given that we live in a very different world to what we lived in before. But risks also have to be part of that conversation, because social protection, historically, is about protecting against risks.

Yes, the way we conceived of the risks, historically, was male risks around the labour market—not being able to work and men not being able to earn a so-called family

wage—but Covid brings all new kinds of risks. I've talked about some of them: the fact that those jobs, those low-paying, part-time work jobs—particularly in the service economy—won't be available.

If they're not available, how do we enable people to earn an income? Should we think about universal basic income in that regard, for example? But [there are] also risks around people not being able to access care. We know that the health systems have been fully occupied—more than fully occupied—to deal with the health problems associated with Covid. They've had priority in most countries.

That means that [with] other health-related risks and care which doesn't require medical intervention—care for older people, care for those who are ill, care for children—huge gaps have been developed, so we have to also think about how we're going to respond to those needs.

I don't have a magic bullet but it's really important to recognise that the policies adopted during Covid were a choice and to critique them for the kind of choice they were. Did they attend to rights sufficiently? What kind of risks did they cover? How could they have been better—and how can we be better, going forward?

Mary Daly is professor of sociology and social policy at the University of Oxford. Her most recent book is *Gender Inequality and Welfare States in Europe* (Edward Elgar).

NEGLECTED, SACRIFICED: OLDER
PERSONS DURING THE COVID-19
PANDEMIC

ISABEL ORTIZ

Covid-19 is devastating for older persons. The numbers are staggering: more than 80 per cent of the fatalities due to coronavirus in the United States and east Asia have occurred among adults aged 65 and over. In Europe and Australia, the figures are even higher: 94 and 97 per cent of the deaths respectively have been among persons aged 60 and above.

Yet as the contagion spread, older persons were denied access to beds and ventilators, despite being the most vulnerable group. Human-rights experts were alarmed by decisions made around the use of scarce medical resources in hospitals and intensive-care units—discrimination based solely on age. Despite being helpless and most at risk, older persons were not prioritised: they were in effect sacrificed, denied treatment and emergency support.

‘Older people have the same rights to life and health as everyone else. Difficult decisions around life-saving medical

care must respect the human rights and dignity of all,' said the United Nations secretary-general, António Guterres, deeply concerned about events during the pandemic.

Underestimation

About half of the coronavirus casualties in high-income countries have been in care homes, though this is an underestimation because originally official death tolls did not include those who had died outside hospitals without a Covid-19 test.

Most countries reported insufficient protective equipment and testing in care homes for both residents and care workers. Thousands were infected by the coronavirus in nursing homes and, while some staff heroically worked in dangerous conditions, others did not. Staff absenteeism added to real horror stories.

For example, in a nursing home in France, 24 persons passed away in just five days; they died alone in their rooms of hypovolemic shock, without food or water, because 40 per cent of the staff were absent. In Canada, a criminal investigation was launched after 31 residents were found dead, unfed and unchanged at an older persons' residence. Following other such disturbing cases, the Canadian military had to be deployed to assist and the government is considering taking over all private, long-term care institutions.

In Sweden, protocols discouraged care workers from sending older persons to hospitals, letting them die in the care homes. In Spain, when the military were deployed to disinfect nursing homes, they were shocked to find people ‘completely abandoned or even dead in their beds’. Spain has launched criminal investigations into dozens of care homes, after grieving relatives of thousands of elderly coronavirus victims claimed ‘our parents were left to die’.

Lawsuits

In Italy’s Lombardy region, a resolution offering €150 euro to care homes for accepting Covid-19 patients, to ease the burden on hospital beds, accelerated the spread of the virus among health workers and residents. Coffins piled up in nursing homes. Families are filing lawsuits claiming mishandling of the epidemic.

In the US, more than 38,000 older persons have died in residences because of Covid-19 and many families have filed lawsuits against nursing homes for wrongful death and gross negligence. In the UK, families of care-home residents who died from Covid-19 are suing the health and social care secretary, Matt Hancock. The claims accuse the government of breaching the European Convention on Human Rights, the National Health Service Act 2006 and the Equalities Act.

Long-term care is a lucrative and powerful industry. Europe’s care sector is concentrated in the hands of a few large private groups, often run by pension and investment

funds. In the US, 70 per cent of the 15,000 nursing homes are run by for-profit companies; many have been bought and sold in recent years by private-equity firms.

There, nursing homes and long-term care operators have been lobbying state and federal legislators across the US to pass laws giving them broad immunity, denying responsibility for conditions inside care homes during Covid-19. Nineteen states have recently enacted laws or gubernatorial executive orders granting nursing homes protection from civil liability in this connection. Nobody is responsible for the suffering of thousands of older persons who have died alone in care homes.

More investment

Due to the rapidly ageing population, all countries should invest more in health and long-term care services for older persons. Health-system capacity is however strained because of austerity cuts in earlier years.

It was the shortage of beds, staff and equipment that made doctors discriminate against older persons and prioritise the younger, with more chance of survival from Covid-19. Governments and international financial institutions must stop mean budget cuts which have condemned many to die, and instead invest in universal public-health and social-protection systems.

Countries must also invest in quality long-term care services for older persons. Half the world's elderly lack access to

long-term care. At the moment, governments spend very little on it; instead, they have allowed private care services to develop, with minimal regulation. As a result, most older persons have to pay up to 100 per cent of the costs of long-term care out of their own pocket and most cannot afford quality services—a highly unequal system.

Societies have failed older persons during the Covid-19 pandemic. Countries must redress this neglect and support survivors by properly regulating, inspecting and investing in quality care services for all older persons.

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THE COVID-19 WAKE-UP CALL TO BUTTRESS SOCIAL INVESTMENT

ANTON HEMERIJCK AND ROBIN HUGUENOT-NOËL

Barely having had time to absorb the economic and social aftershocks of the Great Recession, the world is confronted with an even more disruptive exogenous shock—the coronavirus pandemic, costing above all human lives but also causing massive dislocation. As employment opportunities for Millennials are undermined, low-wage stagnation for essential workers is reinforced and work-life balance stresses for women are intensified, the resilience of the European welfare state is under scrutiny.

Yet this reappraisal comes as a surprise. Ever since the late 1970s, politically and intellectually, social policy had been on the defensive. Leading economists repeatedly argued that Europe's 'feather-bedded' welfare states—based on high taxes, with generous pensions, high unemployment benefits, trade union influence and insider-biased job protection—set the stage for economic and political

decline. These claims held sway despite the absence of evidence to sustain them.

The pandemic, as with the Great Recession, indeed reaffirms solid evidence supporting the opposite contention—that social policy is a productive investment in times of uncertainty and that a more supportive macroeconomic environment is needed in the Europe Union for welfare states to flourish. Amid the human clouds have come three inter-related silver linings:

- an explicit revaluation of competent (welfare) states and resilient healthcare systems,
- a rekindling of normative argument about social fairness, linked to existential awareness of human fragility, and
- emergence of more effective EU co-operation and (fiscal) solidarity.

Crucial role

Public-health relief and traditional sick leave and unemployment insurance—as well as ‘furlough’ schemes and short-time working—have undeniably played a crucial role in mitigating the impact of the pandemic. As these social programmes stepped into the breach, to address the immediate health emergency and to buffer economic security, they also proved politically effective in the maintenance of social distancing and acceptance of lockdown measures.

Already the Great Recession exposed the utility of resilient welfare provision. In hindsight, Europe's inclusive welfare state should be considered its unsung hero. The most inclusive, high-spending welfare states of north and western Europe admirably cushioned household incomes during the downturn. By contrast, the more segmented welfare states of southern Europe, especially pension-heavy Greece and Italy, were less proficient in buffering shocks and mitigating inequalities.

Key to success since the 1990s has been a shift from a predominantly passive welfare state, narrowly focused on here-and-now redistribution, to a more active regime, oriented towards social investment and supported by renewed commitment to the centrality of paid work. This approach breaks the intergenerational transmission of poverty through interventions which help individuals, households and societies acquire the capacity to respond to the changing nature of social risks. It entails investing in human capabilities from early childhood through to old age, while improving gendered work-life balance for families.

The Covid-19 pandemic has brought into view the fundamental relationship between health and social and economic participation. Achieving high levels of employment, to fund the welfare state, requires not only a well-skilled workforce but also a *healthy* one. Health risks and job precariousness and unemployment are inter-related. The welfare state not only provides a social safety net to protect citizens against income loss as a consequence of

illness; equally important is healthcare provision strengthening and safeguarding physical and mental capacity across the life course.

Social vulnerability

The deep sense of social vulnerability which Covid-19 generated across European societies, the consciousness of human frailty, inspired a reawakening of reasoning about ‘social fairness’. For the pandemic will surely reinforce the clustering of social disadvantage, accelerated by consequential shifts in the economy, relating to (less) commuting, (more) home-working, digital servicing and delivery (expansion) and (less) international travel. From a social-investment perspective, personal wellbeing cannot be defined in terms of social—working and living—conditions at any snapshot moment. We have to take the long view of the prospects of every citizen to *sustain* wellbeing over heterogeneous life-course transitions.

At the EU level, the renewed interest in questions of social justice in a *dynamic* perspective can be traced back to the endorsement in 2017 by the European Council of the European Pillar of Social Rights. This set of 20 principles, supporting fair and well-functioning labour markets and welfare systems, covers a well-balanced portfolio of ‘level-playing-field’ social services and employment regulation as *secure* capabilities for all.

From a governance point of view, the social pillar represents a quintessential EU support structure for (active)

welfare states to progress. Yet, so far, this normative framework has remained constrained in practice by the 1990s design of economic and monetary union (EMU) as a ‘disciplining device’ for ‘wasteful’ welfare states.

Game-changer

The progressive emergence of a new economic governance in the EU may prove a game-changer. The EMU arrangements were negotiated at a time when the ‘supply-side’ revolution in macroeconomics, disdaining Keynesian demand management, was riding high, translating into the ‘no-bailout’ clause and other stringent fiscal rules. With the benefit of hindsight, the euro was always headed for trouble.

Yet the very fact that the Great Recession did not end in a deep depression, as in the 1930s, may be attributed to EU policy-makers ultimately daring to challenge the doctrines enshrined in the treaties. And the paradigmatic turnaround by the former president of the European Central Bank, Mario Draghi, inspired his successor, Christine Lagarde, to act swiftly, albeit with some hesitation, in early March, in the face of exponential Covid-19 contagion—especially in Italy, Spain and France—to contain interest-rate spreads across the eurozone.

The real novelty, a *force majeure*, is EU *fiscal* policy at long last stepping into the breach. On July 22nd, after four days of bickering, the heads of government agreed a €750 billion recovery fund, composed of grants (€390 billion) and loans

(€360 billion), largely targeting weaker member states. The deal suggests an historic breakthrough, allowing the EU as it does to borrow in the markets to fund union expenditures.

Fiscal footprint

Yet will this be enough? A critical Covid-19 aftershock will be the fiscal footprint of all the health-emergency and economic-support measures. High deficits will have to be managed over time and many will advocate spending cuts to bring down debt.

Social investment should be seen as an alternative. Low interest rates ease the short-term fiscal burden of investments with longer-term returns, allowing governments to engage in productivity-enhancing measures which provide for gradual fiscal consolidation, rather than imposing further austerity shocks.

Proposals to manifest greater EU solidarity and support crucial social investments will undoubtedly face (some) domestic resistance. Yet, to the extent that large majorities in virtually all member states wish to live in a ‘protective’ and prosperous EU, European citizens can be convinced that, in an interdependent union, the (market) opportunities of some largely rely on the (welfare) capabilities of others.

How can we align the social pillar to the new macro-economic-policy consensus? In a forthcoming report for the

European Commission, we propose a concrete way to discount ‘stock’ public expenditures—social investment in human capital rather than the ‘flow’ of spending on services—from the fiscal criteria of the Stability and Growth Pact. This would enable countries with a social-investment deficit to secure future-proof financing of their social infrastructures, from lifelong education to public-health systems, without trampling *per se* on eurozone governance agreements.

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MAKING WORK FIT FOR WORKERS AFTER COVID-19

ESTHER LYNCH

Covid-19 has radically transformed workplaces, turning offices into empty shells and homes into offices, and imposing demanding hygiene and distancing requirements in sectors ranging from culture and catering to manufacturing and distribution.

What can society learn from the experience of recent months, and use to adapt work and workplaces to the real needs of modern workers? What measures should trade unions press for, so that the return to more ‘normal’ arrangements also brings a more human dimension and makes work more flexible, smarter, and more appropriate to the lives of European citizens?

All the evidence points to the key importance of involving workers and their trade unions in the design and implementation of measures that will shape the post-Covid-19 world of work. Social dialogue and collective bargaining at all levels are key to ensuring a safe return to work, and social

dialogue has proved it can prevent or reverse the negative effects of virus-driven restructuring.

Working-time reduction

Some 45 million people—around a quarter of the EU workforce—are on short-time work or similar schemes, an idea promoted by trade unions and negotiated by the social partners. Short-time work arrangements should always be agreed with unions and should not only maintain jobs but also protect workers' incomes. As well as redesigning work organisation, moving to post-pandemic workplaces must mean new skills training and could include agreed working-time reduction. The four-day working week may seem a radical concept now but trade unions are beginning to put it firmly on the table for the medium term.

Germany's largest trade union, IG Metall, has proposed negotiating a four-day week to secure jobs against economic fallout from the coronavirus crisis and structural shifts in the automobile industry. In Ireland, research by the trade union FORSA has shown that 77 per cent of workers support a four-day week—defined as same job, same salary, same productivity but over four days rather than five.

Under cover of the pandemic, it was to be expected that some employers would abuse the vulnerability of workers, for example firing and then rehiring on worse pay and conditions. This unacceptable practice must be ended, and in particular governments should not offer financial support to companies that implement this or similar policies.

In Austria, under a scheme agreed by the social partners, no employees can be laid off for business reasons during short-time work. In addition, any employee who has participated in short-time work cannot be let go for a further month after it ends. If a termination is necessary for personal reasons, the employer has to hire a new worker.

Flexibility, not insecurity

Some initiatives already under way could help to shape the post-coronavirus workplace. Trade unions involved in Germany's *Arbeit 2020* project have challenged standardised, monotonous work patterns, because 'future work will require highly qualified workers able to operate independently'.

Greater flexibility or autonomy must not mean greater insecurity. Research confirms that social protection and income security increase, rather than reducing, platform workers' autonomy, and their interests must also be included in post-virus recovery plans. In Belgium, the SMart cooperative, set up to support freelance workers, offers a model of democratic management in which all members take part in decision-making, increasing their collective capability.

The pandemic has coincided with a period of rapid change in work organisation, moving away from 'factory-style' patterns towards more flexible options. All the more reason to ensure these innovations assist workers and do not make their lives more arduous or difficult.

Working from home

Since the beginning of the year, millions of people across Europe have been working from home. Trade unions supported this move to protect workers from contact with the virus. But teleworking can blur the line between professional and personal, especially for those who are new to it. Employers must not now take advantage of future changes in work organisation to demand longer hours or constant availability.

By 2015, around one-fifth of workers were already doing some form of telework or ICT-based mobile work (TICTM), but a European Working Conditions Survey found that those working regularly from home were twice as likely to work 48 hours or more a week than those working at their employer's premises—and six times more likely to work in their free time. According to European Parliament research, long-range managerial monitoring and demand for constant availability can create psychosocial health risks, stress and isolation.

TICTM can be good for work-life balance, enabling people to adapt their working time to their private and family needs. However, even workers with high levels of autonomy can suffer greater work pressure—a problem known as the autonomy paradox. A 2020 European Foundation for the Improvement of Living and Working Conditions (Eurofound) study found that few countries had implemented regulations to protect TICTM workers' well-being.

Red lines

Since 2002, social partners at EU level have had a blueprint for negotiating good practices.

The ETUC and European employers' Social Partner Framework Agreement on telework establishes important principles and red lines which should be respected, including equal pay and employment conditions and normal working hours. Teleworkers are entitled to reimbursement of additional expenses such as equipment, Wi-Fi and the increased cost of home utilities. Employers must provide skills training and technical support and ensure workers do not become isolated, while workers must have their right to disconnect fully respected. It may be time for the social partners at EU level to discuss stronger enforcement of this agreement.

Recent experience has conclusively debunked the old myth that teleworking is tantamount to taking time off. Organisations and systems have continued to function and workers have adapted to new applications for online contacts. Now these innovative ways of working must continue to be available for workers as part of the collective agreement.

A sample of interviews in Ireland found that 87 per cent of staff would like to continue to work all or some of the week from home after the pandemic. The International Labour Organization's guide to teleworking during the pandemic and beyond recommends focusing on results and not on the number of hours worked. Keeping the workload manage-

able and setting realistic expectations enables workers to organise their own tasks and to balance work obligations and personal lives.

During lockdown, it was primarily women who shouldered the burden of juggling homeworking with care for children off school or dependants showing signs of infection. The pandemic is not gender-neutral and the socio-economic consequences of the virus have hit women worst—most notably low-paid frontline workers. In future, women’s work must enjoy the pay and status it deserves, coupled with real opportunities for work-life balance.

Workplace autonomy

What should a return to ‘normal’ work look like? Since it has been demonstrated that workers can be trusted to work at home, they should also have more autonomy within the workplace. Another Eurofound study shows that enabling employees to take initiatives and contribute to organisational decision-making increases motivation and encourages skill development. This is a key element of the quality jobs the ETUC has long been demanding.

Workplaces with high employee involvement perform better. The study found 29 per cent of employees in the EU, Norway and the UK enjoyed a high level of employee involvement. Nearly half (47 per cent) felt highly engaged in their work—almost double the proportion in low-involvement organisations (24 per cent). Highly engaged employees are more positive about their jobs, less often

absent and report higher levels of wellbeing. High involvement also promotes informal skill development and innovative thinking and means high- and lower-skilled employees develop their abilities at more equal speeds.

Finally, it is time to end the use of intrusive worker surveillance tools, such as wristbands, thermal and security cameras and recorded footage. In the United States, a new survey suggests that Amazon uses such methods specifically to prevent union organisation. Data protection and privacy provisions should also be respected when it comes to tracking workers to see if they have been in contact with the virus.

The coronavirus pandemic has transformed the way people live and work in Europe and around the world, affecting health, social relationships and economic stability. The full impact on the labour market is only now becoming apparent but it is inevitable that the way work is organised will change permanently. The future must be built on equality, solidarity and collective decision-making.

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RENEWING WELFARE THROUGH
UNIVERSAL ENTITLEMENT: LESSONS
FROM COVID-19

MARY MURPHY AND MICHAEL MCGANN

The Covid-19 pandemic has drawn attention to the future shape and function of our welfare architecture. It has exposed the impacts of decades of privatisation and cuts to public services in market-liberal welfare states, while the more universal Nordic welfare regimes have fared best through the crisis.

Temporary responses offer a glimpse of the changes that may be to come. In many states the balance has swung from the compensatory, enabling, and regulatory dimensions of welfare back towards ‘decommodification’. Some income supports were, for a time at least, enhanced in value and coverage and decoupled from job-search conditionality and threats of sanctions.

Universalism became manifest not only in widened coverage via expanded access to short-time-work schemes and introduction of quasi-basic income payments, but also through the loosening of conduct conditions requiring

claimants to establish their *bona fides* as ‘good’ jobseekers— income support was instead provided on the basis of need. Universalism in this sense of decommodifying conditionality must be pivotal to any progressive reconfiguration of entitlements.

While welfare regimes differ in their effectiveness as safety nets, they all start from a background of labour as a commodity and are essentially productivist, attempting to reconcile social security with an agenda of economic growth and subsuming welfare within production for the market. Women, migrants, people with disabilities and others however suffer when labour-market participation is the primary pathway to inclusion and income support. Even the paragon of ‘enabling’ welfare models, the social-investment state, tends to legitimise expenditure that develops a future higher-productivity labour force.

Shared characteristic

The normative principle of universal entitlement, recognising the shared characteristic of individual human dignity, can guide a realignment of social security with patterns of participation that value care and sustain essential, reproductive work.

Jochen Clasen and Daniel Clegg present the spectrum of welfare conditionalities. Conditions of *category* restrict entitlements to sub-groups of citizens (those with disabilities, the unemployed and so on), conditions of *circumstance* restrict access to those eligible (means-testing or social-insurance

contributory thresholds) and *conduct* conditions limit entitlements by behaviours (evaluated parenting practices or job search). These create stigma and barriers to income support, as do paternalistic narratives of ‘deserving’ and ‘undeserving’ poor, which also position claimants as dependent citizens unable to help themselves.

The degree to which welfare systems are universal or targeted varies along these axes: some ‘screen in’ only the poorest; others ‘screen out’ only the wealthiest. Residual systems are characterised by tight conditions of conduct and eligibility which, as Bo Rothstein argues, can engender vicious social traps. Self-perceived contributors (taxpayers) are averse to helping claimants (perceived as ‘scroungers’), while clients must navigate an opaque and miserly system. More universal entitlements, with fewer conditionalities of conduct and eligibility, conversely engender virtuous circles of social trust, which support higher levels of taxation and greater investment in quality public services. Everyone pays in, according to means, and everyone benefits, according to need, in a transparent system.

Political feasibility

Despite such merits, there remains debate about the political feasibility of universal entitlement. From a range of ideological perspectives, universal basic income (UBI) is seen as its pinnacle, removing any conditions of circumstance or conduct. A particular advantage is how it promotes choice, offering ‘income, free from stigma, sanc-

tions and control’—an enviable objective for any income-support system.

UBI is however often oversold as a panacea for the crises of work and care. There are also questions about its affordability, whether it facilitates meaningful decommodification and whether it might supplement or substitute investment in public services. If the latter, UBI could actually intensify citizens’ reliance on market participation to meet essential needs.

This focus on income reinforces the commodity basis of welfare, mistaking its proper ‘currency’. After Amartya Sen, ‘capabilities’ theorists argue that flourishing is better defined as real freedoms across a multitude of dimensions than one level of economic resources—income equality is no guarantee of equal freedom in this substantive sense.

Participation income

A more politically feasible variant of universal entitlement is found in the half-way house of participation income (PI), a goal in its own right which can also leave open the door to UBI. The late Tony Atkinson proposed PI as a political compromise between UBI and the then-emerging dominance of the ‘workfare’ model. The key difference is PI’s retention of an element of conduct conditionality.

Critically, however, PI’s requirement for social contribution is far more encompassing than the narrow, work-related forms of conditionality of market-liberal welfare regimes.

The range and variety of what is recognised as meaningful includes education, giving care, voluntary work, political participation, social reproduction, satisfying essential needs unmet by the market and environmental reproductive work. This is reflected in and valorises the social and community-based acts of solidarity evidenced during the pandemic: an ethic of care is promoted while decommodifying the conditions of conduct.

Although Atkinson perceived PI as a universal payment, to which people were entitled regardless of circumstance, other accounts allow of limiting access on the basis of need. Atkinson's key objection to means-testing was its application at household level in male-breadwinner systems. This is particularly negative for women, denying them individual entitlement, a prerequisite for autonomy and equality. Liberal welfare regimes apply means-testing to residualise welfare by targeting entitlements on those below or around the poverty line. This stigmatises claimants, leading to lack of coverage of those who most need support through limited take-up.

Important principle

Ensuring an absence of stigmatising, means-testing barriers to income supports is an important principle. Universal entitlement to services is often enacted as 'free at the point of access', where recipients repay through general taxation (in the case of universal health) or targeted taxation when a

specific income threshold is reached (in the case of student loans).

Certain Covid-19 income supports demonstrate how eligibility can be assessed *ex post* and delivered without behavioural requirements. This was true of the relatively generous Irish Pandemic Unemployment Payment, automatically paid to all individual applicants, and Canada's Emergency Response Benefit (CERB), a temporary programme aiding 7.3 million Canadians lauded as a bureaucratic miracle.

Similar characteristics are found in Sarah Arnold's call for a guaranteed income, based on minimum-income standards and without 'conditionalities' or 'jumping through hoops', so it is paid without means-testing at the point of access, with assessment *ex post* and any adjusting payment on a tapered basis if monthly earnings exceed €2,500. Such a modest-to-high income threshold is essential if the welfare payment is not to be residual or to 'otherwise' recipients as impoverished dependents. *Ex-post* application of eligibility conditions removes barriers to getting support to people who need it quickly, while also enhancing affordability and political feasibility.

Social reciprocity

While Atkinson defended conditionality on grounds of political expediency, it also aligns normatively with principles of reciprocity in social co-operation. PI's retention of an element

of behavioural conditionality could, if poorly designed or implemented, foster paternalism, limit autonomy and be a source of stigma. However, if co-created and delivered in partnership with citizens it can enable flourishing by promoting what Francesco Laruffa calls ‘navigational agency’: the design should allow ‘individuals to refuse jobs that they do not value’ and engage in reproductive activities such as care-giving and political participation instead of, or alongside, employment.

While not unreservedly universal, a PI would go far towards decommodifying and de-stigmatising benefits, aligning entitlements to Ulrich Beck’s notion of ‘a multi-active’ society. In this sense, a PI is conceptually distinct from an employment-oriented, active-labour-market policy while trying to balance the dual objectives of universalism and social participation.

Our version of PI decouples social security from *market* participation, avoids the stigma of *ex-ante*, means-tested, household assessment and affordably complements universal basic services, enabling men and women to live, work and care differently in a more equal and flourishing society. Universal entitlement and collective provision, based on the right of access to services and income, flows over into citizen participation, local control and diverse models of ownership—reinforcing equity, efficiency, solidarity and sustainability.

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INCLUDING THE PRECARIAT

VALERIA PULIGNANO

In late May the International Labour Organization called for urgent and large-scale policy responses to prevent long-lasting damage from the Covid-19 pandemic, particularly to young people, fearing multiple shocks leading to a ‘lock-down generation’. Lack of social and human rights (including to collective bargaining and participation) and little or no social protection (including adequate unemployment and sickness benefits) accounted for their ‘precarious’ conditions.

In a contribution to an academic volume on *Precarious Work*, I defined as a ‘regime of competition’ the neoliberal setting that has informed the concrete changes to employment relations and welfare policies which have fostered growing precarity across the European landscape in recent decades. Their effects become evident during the 2007-08 crisis and have been exacerbated by the 2020 pandemic: Covid-19 has magnified the distortions imposed by the regime of

competition on an already highly unstable socio-economic system.

‘Constitutional asymmetry’

Fritz Scharpf’s early conceptualisation of the process of European integration, as marked by ‘constitutional asymmetry’ between policies promoting market efficiencies (accelerated) and policies guaranteeing social protection and equality (retarded), is key to understanding how the European Union permitted the regime that encouraged and institutionalised precarious work. The underlying economic principle is that a more intensive rivalry among firms, and indeed among the employed themselves within these firms, as well as between the employed (insiders) and the unemployed (outsiders), helps to reduce the ‘reservation wage’—the threshold of work acceptance—via lowering not only the incomes of the employed but also the benefits received by the unemployed.

This is in line with neoliberal arguments considering protection through welfare and social entitlements an unaffordable luxury and obstacle to economic growth. The result is an increase in the incentive to do whatever is possible to push people into work. This has been done by the deregulation of employment conditions, under growing internationalisation and marketisation, and by encouraging a reduction in social protection while fostering ‘supply-side’ employment policies, aimed at marketing and matching existing skills rather than developing new ones.

The result has been a reorientation of the employment relationship from protection of, towards *competition for*, employment. Its justificatory order is the promise to raise employment by fostering what is in effect a war among the poor, delivering the precarious young generation we can now see.

Crucial question

Amid the insistent threat of the pandemic, the crucial question however becomes: how can welfare states ensure they include that precarious generation—or, better, prevent it being locked into precarity? This requires a courageous progressive narrative which repositions the value and dignity of work, wages and working conditions at the centre of the political agenda of governments and policy-makers, at European, national and local levels.

If stagnant ‘human capital’ is combined with reduced income protection, unemployed people—of whom unemployed youth still represent a very high proportion in the EU (with peaks of more than 30 per cent in several countries)—risk becoming more precarious and poorer, without having improved their labour-market chances. This is exactly what happened during the 2007-08 crisis and must be avoided now.

At that time, national policy reforms eroded labour’s capacity to mobilise resources, while the retreat of public policy—with cuts in social protection and investments in human capital—saw welfare turning to ‘workfare’. Precar-

ious work hence manifested itself in not only an increase in (often involuntary) temporary work but also the imposition of reduced and increasingly unpredictable working hours, low wages and less advantageous working conditions—all of which workers, particularly the young, had to accept to remain employed at all. Activation policies fostered in-work poverty among people pushed to engage in low- (or unpaid) precarious occupations, as the way to retain their right to a minimum income given the increasing conditionality of benefit payments.

Self-employment, informal work and casual work have all increased. These are commonly associated with precarity as they offer to workers lower entitlements to protection and lack of employment rights, often reflecting lower bargaining power and greater economic dependency.

For example, ‘self-employment’ often describes a relationship of unequal power, where though the offer of work is dependent on a relationship with a single source, rather than a range of clients, individuals are hired for work only where they are prepared to declare themselves as own traders. In comparison with the contracted worker, self-employed workers are more highly exposed to the effects of the regime of competition, since they must handle all the risks employers had previously assumed, within a context of asymmetry of information.

Rebalancing this asymmetry requires that the state regain control by re-embedding market forces through antitrust measures and the strengthening of regulation. For instance,

governments can impose new privacy controls on corporations and co-ordinate actions on their tax avoidance.

Investing resources

A radical and indirect way to intervene is also through investing the state's vast resources in public goods, such as via public utilities. A recent study on digital platforms, for example, argues that there is no reason why the technologies on which platform services are based could not be used in ways that contribute to the improvement of working conditions, the development of local economies or the quality of local services, in line with broader European public policies.

How to achieve this is neither straightforward nor simple. All economic transformations create disruptions for both winners and losers, yet who will be the winner and who will be the loser in markets depends on who can participate and on what terms and conditions. And without rules there are no markets. A degree of public control is required to support and sustain the quality of goods and services, and to increase workers' and citizens' voice by guaranteeing good wages and working conditions.

In this regard, policy encouraging labour-market arrangements that facilitate innovation and provide protection for workers cannot disregard collective-bargaining institutions and representation rights, essential components of a decent (and non-precarious) work agenda. Such arrangements can ensure all workers are suitable trained and qualified, health-

and-safety standards are met and workers are properly compensated, with employment rights, decent working conditions and entitlements to maternity, paternity and parental leave, sick leave, holidays and pensions.

These policy initiatives could be complemented by other steps which would include clarification of employment rights and reform of social-protection systems, for example to protect the self-employed better. Since these workers often work with digital platforms, we need rules that constrain the scope of platforms to engage in ‘digital-regime shopping’ by recruiting workers in the global south, where labour costs are markedly lower, and putting them in competition with workers in the global north. Sanctions in case of breaches to such rules might also be desirable.

In line with Scharpf’s diagnosis, social policy has always been considered a member-state competence within the EU. Overall, and more than ever, however, this new agenda requires prompt intervention and cross-national co-ordination by governments and EU-level institutions.

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SHIFTING THE BURDEN: CAN COVID-19 DO IT FOR WOMEN'S UNPAID WORK?

BHARATI SADASIVAM

‘It took a global pandemic for my husband of 20 years to enter the kitchen and start cooking,’ a friend in Istanbul told me recently. A full-time professor, she was not alone in making this discovery. And her experience suggests Covid-19 might succeed, where decades of advocacy have failed, in transforming the realm of unpaid work.

A nationwide survey conducted in Turkey in May shows that, in couple households, men’s unpaid work time went up nearly five-fold during the pandemic. The increase was highest for men who switched to working from home during lockdown: they spent 50 per cent more time on domestic chores and care work than men who continued working at the workplace.

The survey, supported by the United Nations Development Programme in Turkey, covered more than 2,400 respondents in couple households during a lockdown week. Time-

use questions, devised by the economists İpek İlkkaracan (Istanbul Technical University) and Emel Memiş (Ankara University), were included in a regular household survey, with the findings published in a UNDP report in August.

The increase in men's unpaid work time was a striking departure from the norm—in a country with one of the highest gender gaps in unpaid work globally, where women's workforce participation is the lowest among member countries of the Organisation for Economic Co-operation and Development.

Big implications

The shift has big implications for gender equality in the world of work.

First, it suggests that bringing in more flexible forms of work in the workplace and shorter workdays for men in the formal workforce can result in more equal sharing of unpaid work at home. The shift also dents gender norms by getting employed men to assume 'breadwinner' and homemaker roles simultaneously. Most of all, it helps employers and employees think more expansively about flexible forms of work, and not associate them solely with maternity and child-rearing.

In short, the involuntary changes to the workplace brought about by the Covid-19 lockdown could erode the gendered demarcation of paid and unpaid work, with better

outcomes for women and men, in terms of shared labour, leisure and income.

Equally promisingly, the survey shows that a large share of both women and men believe in a more gender-equal division of household labour: 85 per cent of all women and 65 per cent of all men supported men's obligation to share housework equally with women.

Shouldering the burden

To be sure, women in Turkey still indicated they shouldered most of the burden of unpaid care and domestic work, doing more than four times as much as men (4.5 hours to 1.1 hours per day). With paid and unpaid work combined, women's work increased from 7.7 hours per day pre-pandemic to 9.2 hours during the lockdown—almost 80 per cent of this increase was due to unpaid work. Employed and higher-educated women spent almost as much time on unpaid work as less-educated and unemployed women.

By contrast, employed men had more or less the same combined workload before and during the lockdown (7.7 hours). For women who continued to be employed at the workplace (as 'essential' workers), however, total daily work hours went up to more than 10 hours per day. One in every two women—compared with less than a quarter of men—reported feeling overwhelmed by their workload during lockdown.

‘Under pandemic conditions, while the market economy slowed down substantially, economic activity in the care economy both in its paid and unpaid components has intensified,’ said Ilkkaracan and Memiş in their report. ‘Women, especially employed women, have served as the main absorber of this demand shock by increasing their paid *and* unpaid work hours.’ (Their full paper will be in *Feminist Economic Perspectives on the Covid-19 Pandemic*, a forthcoming special issue of *Feminist Economics*.)

Care economy

The care economy globally, comprising both paid and unpaid care work, underpins and sustains the market economy. Unpaid work accounts for 16.4 billion hours a day, three-quarters performed by women—as the International Labour Organization reports, this is equivalent to two billion jobs. Paid care work, 11.5 percent of global employment, encompasses 381 million workers, two-thirds of whom are women.

Lockdown conditions have thrown into stark relief these entrenched gender inequalities in care work. Extended school closures, overstretched health systems and housework and care responsibilities for the young and old have exponentially increased women’s workdays.

A study in Jordan, for example, estimated that female healthcare workers experienced a doubling of their paid and unpaid working hours—from 45 to (a staggering) 92 hours a week.

Virtuous circle

The findings of the Turkey survey are similar to unexpected changes reported in other countries with high gender gaps in unpaid work. With the right policy support, a virtuous circle of cascading impacts can be created.

The shift in the gendered distribution of unpaid work could become widespread with new forms of virtual working in today's digital transition. Employers can play their part, by ensuring that employees of different genders can avail themselves of flexible forms of work—such as family-friendly work schedules, telecommuting and paid, use-it-or-lose-it, care leave for parenting and other long-term care responsibilities.

With more equal sharing of unpaid work, more women can take up jobs. In turn, this will create more demand for quality care services—for children, the elderly, the disabled and the long-term sick—which are the basis of a genuine care economy. Feminist economists have shown that public spending on social-care infrastructure does several things at once: it generates decent jobs for men and women, improves worker productivity and safety, reduces poverty and decreases labour-market inequalities by gender and skill.

The Turkey time-use survey shows why investing in a care economy must become foundational to Covid-19 recovery and 'building back better'.

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