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The situation of domestic workers of migrant origin in times of Covid-19: analysis and perspectives¹

Sònia Parella Rubio. Department of Sociology. CER-Migracions, Autonomous University of Barcelona (UAB)

sonia.parella@uab.cat

Paid domestic and care work has been, and continues to be, largely unregulated, with much lower levels of protection in terms of social and employment rights than other sectors, and is characterised by discriminatory pay and working conditions and high levels of informal employment. It is an extremely segmented sector, and is marked by gender, class and ethnic/racial inequalities. There is no doubt that the pandemic caused by the coronavirus (Covid-19) has sharply highlighted the importance of care for sustaining life, and at the same time the lack of visibility, appreciation and recognition suffered by the sector within our society. This article focuses on migrant domestic workers, many of them in an irregular situation, and who as a result are working in the informal economy. It analyses the impact of the type of regulation in force with regard to this kind of work on living conditions and access to employment rights for women workers of migrant origin. The text concludes with a section containing recommendations for dignifying this work, and ensuring that it is recognised, with a particular emphasis on the role of local government.

1. Introduction: Care in times of multiple crises

Paid domestic and care work has been, and continues to be, largely unregulated, with much lower levels of protection in terms of social and employment rights than other sectors; it is characterised by discriminatory pay and working conditions, and high levels of informal employment. It is an extremely segmented sector, and is marked by gender, class and ethnic/racial inequalities. There is no doubt that the pandemic caused by the coronavirus (Covid-19) has sharply highlighted the importance of care for sustaining life, and at the same time the lack of visibility, appreciation and recognition suffered by the sector within our society.

Sociologist Alain Touraine (2020) stated in an interview that “this crisis is going to raise the profile of care workers”. In reality the effect of the health crisis has been to stretch the care sector to the very limit; it has deepened to an even greater extent what is known as the “*care crisis*”. Therefore, in order to assess the current domestic and care work situation and move towards a new, fairer and more egalitarian model of care, it is necessary, for the purposes of analysis, to separate the

1. This article is a shortened version of the following text: PARELLA RUBIO, S. “*El sector del trabajo del hogar y de cuidados en España en tiempos de COVID-19*”. [The domestic and care work sector in Spain in times of Covid-19]. *Anuario CIDOB de la Inmigración 2020* (2021), pp. 102-114.

two “crises” and reflect on their respective scope, both from the perspective of the caregiver and from that of the recipient of that care.

This article focuses on the migrant domestic workers who provide care, some of whom are in an irregular situation, and who as a result are working in the informal economy. They are workers who face violations of their employment rights, and also in many cases of other fundamental rights (discrimination, sexual harassment, human trafficking, etc.) as well. Women of migrant origin are especially (but not solely) concentrated in the least visible and most precarious sectors, which means that they are caught between the lack of employment rights inherent in these sectors, and the impact of immigration legislation. These pages examine the paid domestic and care work undertaken by those who fall into the category of “domestic workers”, whether in the formal or informal economy, which excludes workers in home care services, care homes and other services linked to the care sector, who are registered in the General Social Security System and who enjoy a collective agreement that guarantees their rights.

1.1. On the health crisis

There is no doubt that the current dangers that we face, such as the impact of climate change and Covid-19, which has spread all over the planet at uncontrollable speed, and that open up a panorama characterised by global, universal risks almost impossible to predict. This situation, far from being new, is one that fits with sociologist Ulrich Beck’s theory of the risk society (1986). According to the central thesis of Beck’s work originating in the mid-1980s, with the advent of advanced or reflexive modernity, risk becomes “democratised” in the sense that it unexpectedly affects people and groups who had until now enjoyed life conditions perceived as stable, and more or less “safe”.

However, from a feminist angle Joan Tronto (2020) reminds us that the majority of such analyses that focus on global crises have a strong bias: they concentrate on the effects on the societies that have for many years been considered the centre of the world: Europe and the USA. According to Tronto this means that the new forms of risk conceptualised by Beck could be considered to be limited in the sense that they reflect a point of view that is at the same time both ethnocentric and androcentric. And in that sense, she sees risk and loss of trust not so much as side-effects of modernity, but rather suggests that it is precisely the absence of trust that provokes the feeling of greater risk. Such an assertion undoubtedly implies a radical change in the way of thinking about risk itself. Therefore, as the author points out, “forming part of a society within which all individuals take care of each other in order to identify and analyse collective problems, create the conditions necessary for the recognition of these dangers, and deal with them with greater honesty” (Tronto, 2020: 34), in such a way that “risk would look different in a society that was organised around the principle of care” (*Ibid*, 2020: 33).

For the moment, contrary to the predictions of Tronto (2020), the current global health crisis has not yet been translated into an opportunity to advocate care as an essential human value, as an integral part of human life. The pandemic has contributed to increased pressure on care sector workers (domestic workers, care home workers, cleaners and home carers), which has led to the reinforcement of patterns of injustice and inequality. The International Labour Organisation (ILO) has identified the domestic and care work sector in particular as one of those most affected, due to the significant risk of job loss that threatens domestic workers around the world, as well as the drop in income due to lockdown and the lack of effective social security coverage that characterises the sector (ILO, 2020).

1.2. On the “care crisis”

According to Dowling (2021), the “care crisis” is structured around two key issues: i) the fact that more and more people, due to age and/or dependency, have limited autonomy when it comes to performing basic daily activities and are unable to manage their physical, material, emotional and social well-being independently. Many of these people receive insufficient help and assistance (resources or support) in order to be able to do so, and ii) the fact that those who provide care for

others are unable to do so in a satisfactory manner, and under dignified conditions that are comparable with those working in other occupations. In short, there is a growing gap between the need for care, and the resources available to provide it. This shortfall in provision depends on how the roles of families, communities, the market (corporations and agencies, domestic service) and the state are articulated.

We must bear in mind, as with any true crisis, that in the case in point:

- We should not only be concerned about its effects, but also recognise the need to look at the catalysing impact it has on issues that had not previously been taken into account, and that had not been resolved in a satisfactory way. Bringing this crisis to an end requires transforming the conditions under which care is provided, and rethinking how that care is valued. The undervaluing of care work is even greater when it comes to caring for the elderly, according to Federici (2013), as it is an activity that is stigmatised, not regarded as a task that impacts on the reproduction of the labour force and, as a consequence, no added value is ascribed to it.
- Since we live in an unequal world, it does not affect everybody in the same way. As Tronto (2020) points out, throughout most of human history care work has been assigned to women, and to the most marginalised and excluded groups.

In the present context, from the perspective of the privatisation and commodification of care, our care system is based on social divisions structured around inequalities of gender, social class, ethnicity/ race (Lutz, 2018), without forgetting migratory background (nationality, migratory status) which is a key factor (Pérez-Orozco and López-Gil, 2011; Dowling, 2021). The active recruitment of migrant women under the pressure of market forces has been shaping global care chains (Hochschild, 2020) over recent decades, from the countries of the Global South and Eastern Europe to the Global North, without any revision of the sexual division of labour and at the cost of an intensification of the inequalities between women within the context of globalisation. Global care chains are chains that cross borders and that are formed for the purpose of sustaining life on a daily basis; care work is transferred by individuals and households along lines that reflect differences in power within society, including gender, class, race/ethnicity and place of origin (Pérez-Orozco, 2007: 4).

The outsourcing of care with no modification of the pillars of a society within which care is not based on a principle of **a co-responsibility between different social actors constitutes an** escape strategy that Emma Dowling (2021) calls a “care fix”. She uses this expression in the same sense as the term “fix” is used by authors such as sociologist Beverly Silver (2003). For Silver, “fix” denotes the way in which capital has historically managed to circumvent (not resolve) successive crises by installing itself in new spaces and through technological or financial reorganisation, with the aim of safeguarding the profits of the capitalist system without shaking its foundations. In short, according to Pérez-Orozco (2010), our care system is characterised by a series of characteristics that reinforce the systemic care-inequality-precariousness nexus:

- Insufficient social responsibility is taken for care (in terms of both welfare benefits and public services), and the way in which such tasks are allocated to women within the home (unpaid work), or in the form of paid work within the framework of a global market that guarantees low labour costs. According to Ezquerro (2018), the care system in Catalonia and in Spain is characterised by a historical lack of development of public policies in relation to care, which has led to a depoliticisation of caregiving and consequently the “naturalisation” of families (a euphemism for women) as the main care providers.
- To the extent that care is commodified, access to care depends on people's economic status, which means that the way in which care is organised in society exacerbates social inequalities.

- To the extent that the recipients of care are the ones who hire those who provide it, labour relations become more precarious and informal, which affects the most vulnerable members of the workforce, and those with the least social bargaining power.

2. The impact on living conditions and access to rights among domestic workers with migrant backgrounds

When the EAP closed for the fourth quarter of 2020, there were 563,100 people employed as domestic workers in Spain, 88% of them women. If we compare these figures with the number of people registered with the Social Security System, at the end of January 2021 we see that there were 382,509 people registered with the Special System for Domestic Workers within the General System, 95% of them women. This means that approximately one third were therefore employed in the underground economy.

For Catalonia and the province of Barcelona, Table 1 shows the general data on registration with the Special System for Domestic Workers as of 29 January 2021. A total of 57,469 people were registered, 82% of them in the province of Barcelona. Registration in the province of Barcelona shows the same pattern of feminisation as in Spain as a whole: almost 95% are women.

Table 1. Registration with the Special System for Domestic Workers in Catalonia, by sex and province (29 January 2021)

General Social Security System - Special System for Domestic Workers				
	Men	Women	No response	Total
Barcelona	2,657	44,627	0	47,284
Girona	516	4,065	0	4,581
Lleida	76	1,994	0	2,070
Tarragona	193	3,340	1	3,534
Catalonia	3,442	54,026	1	57,469
Total Spain	17,049	364,094	8	381,151

Source: Social Security Statistics, Ministry of Inclusion, Social Security and Migration.

Focusing specifically on new registrations of foreign nationals on the Special System for Domestic Workers for the whole of Catalonia, there were a total of 28,935, which represents just 6% of all registrations. When broken down by sex, these registrations represent 13% of the overall number of foreign women workers registered. By nationality, Honduras accounts for 17% of the total number of registrations with the Special System for Domestic Workers in Catalonia, followed by Bolivia (7.5%), Romania (7%), Morocco (7%) and Ecuador (3.5%). The province of Barcelona accounts for 82% of the total number of registrations of foreign workers. Of the total number of registrations in the province of Barcelona, 93% are women.

Table 2. Registration with the Special System for Domestic Workers in Catalonia, by sex and province (29 January 2021)

	General Social Security System - Special System for Domestic Workers			Total Registrations		
	Men	Women	Total	Men	Women	Total
Barcelona	1,734	22,001	23,735	203,393	157,387	360,780
Girona	330	2,014	2,344	32,636	19,666	52,302
Lleida	48	937	985	22,523	11,236	33,759
Tarragona	137	1,734	1,871	25,741	16,144	41,886
Catalonia	2,249	26,686	28,935	284,293	204,433	488,727
Total Spain	9,741	153,828	163,568	1,172,497	873,134	2,045,639

Source: Social Security Statistics, Ministry of Inclusion, Social Security and Migration.

Comparison of tables 1 and 2 shows that 50% of all registrations with the Special System for Domestic Workers in Catalonia correspond to foreign nationals. In the case of the province of Barcelona, the proportion is the same.

In order to address the impact of the pandemic on foreign women employed in the sector, we will use information taken from the manifestos and statements made both by trade unions (CCOO and UGT) and by various associations that defend the rights of domestic workers throughout Spain, via their websites, Facebook pages and media declarations². We will now look at the most salient impacts identified, depending on whether care work is carried out in the formal or informal economy.

2.1. Lack of equality in terms of rights is inherent in the regulation of paid domestic work in Spain

A lack of equal rights is inherent in the regulation of paid domestic work in Spain. There was clear discrimination against women workers who were paying Social Security contributions at the beginning of the pandemic: neither their rights nor the level of protection they received were comparable with those of other workers. Royal Decree 1620/2011 (together with some positive amendments introduced by Royal Decree-Law 29/2012) regulates the current level of domestic workers' social security contributions, levels of state protection, types of contract, minimum wages, work breaks, and the obligations of employer households.

Based on this legislation, as of 1 January 2012, the former Special Social Security Scheme for Domestic Workers was established as a special system within the general scheme. Continuing to be a Special Scheme means that workers' rights the degree of protection in this sector differ from those that other employees have. Basically, domestic workers are not entitled to unemployment benefit, the right of the employer to withdraw the contract remains, which means that workers can be dismissed at any time without there being any obligation for them to state the reason for dismissal. The legislation itself provided a grace period until 2019, when equality with other employees in the General System was to be established. However, just as the deadline was approaching, an amendment in the 2018 General State Budget (6777), postponed the integration of the two systems until 2024.

Under Royal Decree 1620 / 2011, full-time domestic workers must be paid at least the national minimum wage (NMW, or SMI in Spanish). A full-time position is based on a 40-hour week, and if the employee should work fewer hours, s/he will receive the amount proportional to the number of hours worked. Following the 22.3% increase in the NMW in 2019, and the subsequent 5.5% increase in 2020, the NMW now stands at €950 per month/ 14 payments (which is equivalent to a total of €1,108.33 per month, and an hourly rate of €7.43). The Labour and Social Security Inspectorate (ITSS in Spanish) launched an action plan and awareness-raising campaign, the first phase of which was completed on 31 March 2021. This campaign consisted of sending letters to employers alerting them to the current irregularities in terms of salaries and social security contributions, offering technical assistance and information to enable them to proceed with the regularisation of salaries that are below the NMW. The Ministry of Labour and Social Economy reported that by the end of this first phase (31 March 2021) the employment situation of almost 30,000 domestic workers had been regularised, a figure that represents around 60% of the cases reported. The data shows that regularisation has only resulted in a reduction of the declared working hours in 15% of cases, which means that for the vast majority it has resulted in an increase in wages.

2. These are the associations, listed in alphabetical order, whose activities have been included: Asociación de Mujeres Migrantes Malen Etxea; Asociación Intercultural de Profesionales del Hogar y de los Cuidados (AIPHYC); Grupo Turín: Servicio Doméstico Activo (SEDOAC); Mujeres Migrantes Diversas; Mujeres Pa'lante; Senda de Cuidados; Sindillar/Sindihogar: Territorio Doméstico, y Trabajadoras no Domesticadas.

Surprisingly, among the measures adopted by the Spanish government in Royal Decree 8/2020 of 17 March in response to the state of emergency, which included urgent measures regulating new procedures for the suspension of employment contracts, unemployment benefits, cessation of activity in the case of the self-employed, etc., there is no mention of this special employment relationship, despite the fact that paid care work has been defined as an essential activity. However, thanks to constant demands and pressure from associations dedicated to fighting for the rights of these workers, the government issued Royal Decree 11/2020 of 1 April under the slogan *No vamos a dejar nadie atrás* [We're not going to leave anyone behind]. This makes it possible for domestic workers who were registered with the social security system and who have lost their employment contracts to receive state benefit. This subsidy allows them to claim up to 70% of their salary, up to a maximum of €950, which corresponds to the minimum wage for 2020. It is aimed at workers who have been made redundant as a result of Covid-19, or who have had their workload reduced. They must have been registered with the social security system before 14 March, and be able to prove the losses caused by the crisis.

Faced with the fact that thousands of registered workers had not actually received the benefit, various campaigns and mobilisations conducted by the Domestic Workers Political Action Group (which comprises 10 different associations and domestic workers' unions) led to an announcement by the government in early July 2020 to the effect that the Public State Employment Service (SEPE) was committed to speeding up payments³. However, according to data published by *elDiario.es*, of the 32,000 applications submitted since the application period opened on 5 May, only 17,200 had been approved by the end of August, which indicates that almost half were still pending⁴. According to Otxoa (2020), this inefficiency was not so much due to technical difficulties associated with managing the subsidy (for example, many applicants did not appear in the SEPE registers, as their contracts had not been registered with the Social Security), but rather to a lack of political will and as a way of saving on social spending. On the other hand, the associations consider that the subsidy, which constitutes 70% of salary, is insufficient for a sector that is characterised by its precarious nature, and in which the basis for social security contributions frequently does not correspond to the actual salary⁵.

Table 3 shows that, between January 2020 and January 2021, the number of foreign nationals registering with the Special System for Domestic Workers in Spain fell by almost 1,500 within the country as a whole. However, the impact of the health crisis has not been as pronounced as the abrupt downward trend observed in the previous period (2015-2020), which will be discussed in the next section. From the perspective of foreign nationals, the loss of registration with the Social Security System not only means an immediate lack of income; dismissal also puts a person of migrant origin (a foreign national) at risk of falling into an irregular situation in cases where stable employment is a requirement for the renewal of work and residence permits.

In order to address a decrease or total loss of income among women workers in this position, which impacts on their own quality of life and that of their families (both in Spain and in their countries of origin, where there may be family members dependent on their remittances), women's associations and organisations have issued reports on women who have been active in getting organised. They have provided *cajas solidarias* (solidarity funds), as well as virtual spaces or WhatsApp groups in order to provide advice, and to be able to respond to demands and needs⁶.

3. See: "Victoria de las trabajadoras de hogar: el SEPE abonará sus subsidios", *El Salto* (2 July, 2020). www.elsaltodiario.com/laboral/victoria-de-las-trabajadoras-de-hogar-el-sepe-abonara-sus-subsidios

4. See: "Miles de empleadas del hogar siguen sin cobrar el subsidio de paro: se ha reconocido a 17.200 y otras 14.800 aún están a la espera", *elDiario.es* (9 September, 2020). www.eldiario.es/economia/miles-empleadas-hogar-siguen-cobrar-subsidio-paro-reconocido-17-200-14-800-espera_1_6209854.html

5. Furthermore, the process for applying for the subsidy is excessively complex and not very accessible for some groups of people, for example due to the technological gap – a digital signature is required to apply for the subsidy.

6. For example, www.interdependientes.org

Table 3. Evolution of registration with the Special System for Domestic Workers in Catalonia, by sex and nationality, 2015-2021 (31 January 2021)

	Foreign persons			Total registrations		
	Men	Women	Total	Men	Women	Total
2015	15,202	190,952	206,158	21,827	405,197	427,030
2016	14,348	185,545	199,899	21,503	406,291	427,801
2017	12,738	173,281	186,026	20,580	402,917	423,505
2018	11,453	167,045	178,508	19,330	396,526	415,868
2019	10,494	160,889	171,395	18,238	386,639	404,890
2020	9,680	155,407	165,088	17,205	374,250	391,456
2021	9,741	153,828	163,568	17,049	364,094	381,151

Source: Social Security Statistics, Ministry of Inclusion, Social Security and Migration.

2.2. Paid domestic work in the informal economy

The subsidy for domestic workers who are registered with the Social Security System has been of no benefit to those working on an informal basis who have been left with no income. Around a third of domestic workers have no employment contract, many of them foreign women in an irregular situation who have little in the way of a support network.

Domestic worker associations note that there have been many more job losses among domestic workers than among care workers, due to the nature of their work. There is also evidence of employers taking advantage of the pandemic situation to offer poorer pay and working conditions to workers who find themselves “trapped” in the informal economy, not only in terms of working conditions, but also in terms of pay. For example, live-in workers paid just €500 a month with only two hours per week of free time, or live-out workers receiving €3 an hour. Some live-in care workers have seen their working hours increased, and their right to days off restricted. This has often meant that they have become isolated in the homes where they work, which poses a risk to their own health as well as being a cause of anxiety and anguish, and making it impossible for them to balance their own work and family lives. In the case of live-in workers, it should be borne in mind that when they lose their jobs, they also lose their homes. In any event, the kind of acute job insecurity faced by these workers will always have a negative impact on health, possibly leading to the development of serious physical and psychosocial conditions that are frequently not even recognised as being occupational illnesses (CMIB, 2017).

When we speak of the informal economy in domestic service, it should be noted that the consequences are particularly alarming for foreign women who find themselves in an irregular situation, and who are even more vulnerable to violations of their rights. On the other hand, it must be acknowledged that it is one of the few ways of earning an income without an employment contract, as so much of this work is carried out within the underground economy. It is also one of the few points of entry to the labour market for women seeking asylum whose applications have been rejected, and who are left without any form of protection⁷. Moreover, regularising residence in Spain as a domestic worker is the route most frequently chosen by many foreign women, mainly due to the difficulty of finding a job with a company that is willing to go through the necessary procedures. When applying for legal residence on the basis of “**social roots**”⁸, the applicant needs to be able to show that they have lived in Spain continuously for a period of three years immediately prior to their application, and that they have a “pre-contract”, the offer of a full-time (40 hours per week) job. This is an offer that will only become valid if the application is finally approved with a work and residence permit being granted for one year. Women working in the care sector who have several different employers find it difficult to fulfil these conditions.

7. See: “Domésticas y sin papeles: entre la espera, el temor y la esperanza”, *El Salto* (11 February, 2021). www.elsaltodiario.com/precariedad/trabajadoras-hogar-esenciales-sin-papeles-espera-esperanza

8. Article 31 of LO 8/2000, of 22 December, an amendment to Organic Law 4/2000, of 11 January, establishes the possibility of granting a temporary residence permit to foreigners who can prove that they have established roots in Spain.

One of the problems for those applying for residence on the basis of social roots is that permits are valid for 12 months, are limited to a specific geographical area, and to the type of work specified in the employment contract (in this case domestic service), which means that during the first year it is not possible to move to another sector. The risk of falling back into an irregular situation after that first year is high, and it is precisely then that the worker must apply for a change in the type of residence and work permit; to do so they must fulfil the standard requirements for the renewal of all work and residence permits for employed persons. If a migrant woman is unable to renew her domestic service contract or present another job offer, it will be difficult for her to gain a work and residence permit.

3. Recommendations for moving towards improved working conditions in the care sector

As a first step, there is an urgent need to put the Special System on a par with the General Social Security System (contrary to the stipulations of Amendment 6777 of the General Budget), in terms of rights and benefits, particularly with regard to the possibility of claiming unemployment benefit. Unemployment benefit is one of the main stumbling blocks that explains why the Spanish government has yet to ratify the International Labour Organisation's Domestic Workers Convention, 2011 (No. 189) and Recommendation 201 on decent work for domestic workers. Convention No. 189 was signed at the 100th ILO⁹ Conference in Geneva in June 2011, and it recognises paid domestic work as an activity that is undervalued and invisible, and one that is mainly carried out by women and girls, many of whom are migrants or members of disadvantaged communities, and who are particularly vulnerable to discrimination in terms of contractual and working conditions, as well as other abuses of human rights. Its ratification, long called for by trade unions and associations within the sector, would ensure a commitment to the highest international standards with regard to employment rights for these workers. In order to ensure equal rights, an amendment to national legislation would be necessary.

Any progress in terms of social and employment rights for this group has implications that go beyond the purely legal, as in this case it is families rather than companies who have to register workers. Without state funding, it is not possible to make most of these rights a reality. Some of the economic measures implemented by the Spanish government in this respect have proved to be insufficient, such as the 20% reduction in Social Security contributions (which ceased to be applied as no express extension was included in the 2017 budget) or the 45% bonus for large families. The sharp 3.41% fall in the number of people registered in the Special System for Domestic Workers between 2018 and 2019 cannot be attributed solely to the 22% rise in the NMW and the consequent increase in social security contributions from January 2019. It is a situation that has multiple causes, and the decline began in mid-2016 (see Table 3). However, although the increase in the NMW cannot in itself explain the downward trend in the number of registrations, it could certainly explain why this has been so acute¹⁰.

To that end, it is worth highlighting a pioneering initiative in Spain, promoted by the Government of Catalonia Secretariat for Equality, Migration and Citizenship, inspired by the Universal Employment Cheque Service (CESU in French) which has been in place in France since 2006. This is a programme of grants for the creation of new jobs in the field of care work in the home¹¹. It consists of a financial subsidy that covers the cost of social security contributions for a period of 12 months (around €2,685 if the contract is full-time), aimed at employers or non-profit organisations. The adoption of this measure makes it possible to:

- Promote the creation of jobs with contracts in a sector where the underground economy plays a major role.

9. See: www.ilo.org/dyn/normlex/es/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:C189

10. See: "El Gobierno asegura que la caída del empleo agrario y doméstico no se debe solo al SMI", *NIUS Diario* (22 de enero, 2020). www.niusdiario.es/economia/empleo/Gobierno-asegura-agrario-domestico-SMI_18_2887245375.html

11. See: https://canalempresa.gencat.cat/es/01_que_voleu_fer/mesuresempresesiautonomes/mesures-economiques-i-socials-per-a-empreses-i-autonomes/ajuts-i-prestacions-per-empreses-i-autonomes/subvencio-treball-domiciliari-cures/.

- Guarantee payment of the national minimum wage.
- Facilitate the regularisation of those foreign nationals who meet all the requirements for “social roots”.

This type of initiative undoubtedly contributes to the recognition and dignification of care work, especially in a context such as the present, marked by a health crisis that has meant an increase in vulnerability and precariousness for a significant number of people working in this sector. However, there are a number of obstacles here, including the fact that it is impossible for many potential claimants (mostly retired people) to prove that they have sufficient financial resources to be able to pay the national minimum wage.

There is no doubt that the pandemic and its effects have helped to strengthen the whole of the activist network that has been developing in recent years and is focused on the struggle of domestic and care workers to gain both rights and visibility. An extensive network of organisations and associations has progressively gained prominence in the media, while at the same time intensifying protest activities and political advocacy campaigns aimed at protecting rights and taking the struggle forward (Almena Cooperativa Feminista, 2019). Multiple groups, organisations and social movements have concentrated their efforts on vindicating the rights of domestic and care workers, and have been developing their own agenda when it comes to making their demands known to public institutions in order to improve conditions in the sector, in terms of both employment and citizenship rights (Carrillo, 2018). Despite these undeniable advances, many female employees are still unaware of their employment rights, have little time to obtain the necessary information, and find themselves alone or with a limited support network, especially when those in question are foreign nationals in an irregular situation. And there continue to be employers who either avoid their responsibilities and obligations, or are unaware of them.

Here, associations and trade unions have a very important and commendable role to play. For example, the Information Centre for Foreign Workers (CITE) of the CCOO trade union in Catalonia launched an information campaign on social and employment rights for domestic and care workers, with the collaboration of various associations and the Barcelona City Council (Reyes y Bertrán, 2020). This initiative stems from the union's observation of a steady increase in the percentage of women from Central American countries who are all too frequently in an irregular situation, and are employed as domestic workers in the domestic and care sector.

Another interesting civil society initiative supported by Barcelona City Council and the trade union organisations CCOO and UGT, was the constitution of the “Committee for the defence of the rights of domestic, cleaning and care workers in the city of Barcelona”, created in 2018 by four organisations, Libélulas, Mujeres Pa'lante, La Asociación de Mujeres Migrantes y Diversas and Sindillar/Sindihogar (the first independent trade union of female domestic and care workers in Spain). The main task of this committee was to press for the Spanish government to ratify ILO Convention 189, and to denounce the fact that the labour reforms passed in 2011 and 2012 have not only failed to bring rights into line with other employment sectors, but also continue to exclude many women working in the informal economy, most of whom are of migrant origin.

The need to recognise and dignify this type of work and to assume political responsibility is also becoming increasingly evident in local government. It is within this context that various policies, both municipal and supra-municipal, have proliferated at local level in recent years (Carrillo, 2018).

With regard to Barcelona City Council, it is worth noting that the Barcelona Municipal Immigration Council (CMIB) chose “dignifying and raising awareness of the field of domestic and personal care work” as its main focus for 2017, following a proposal by various organisations aware of the unfairness of the situation of those working in the sector in terms of the lack of social and employment rights, most of whom are women, with many being female migrants. This is a participatory and consultative entity created in 1997 comprising associations of migrant groups,

organisations working in the areas of reception, refuge and asylum, neighbourhood, local civic, cultural and trade union bodies, experts, as well as the municipal political groups. A diverse range of initiatives were developed, and a “Manifesto for the dignification of domestic and care work” was collaboratively produced and subsequently approved by the CMIB as a whole on 26 September 2017. It includes the following proposals (CMIB, 2017: 49-51):

1. Ratification of ILO Convention 189 by the Spanish State.
2. Elimination of the Special Social Security System for Domestic Workers and their immediate incorporation into the General Social Security System.
3. To grant workers in the sector the same rights to Social Security cover as all other workers within the General System.
4. To include maternity cover under the same conditions as in the General System.
5. The right to receive benefits in the event of temporary incapacity for work, under the same conditions as in the General System.
6. Introduction of remedial measures in terms of Social Security contributions in order to guarantee the right to a decent retirement.
7. Elimination of the right of the employer to terminate the contract at will without the need to give a reason – which is equivalent to “free dismissal” – and to guarantee the protection of workers’ fundamental rights in this area, especially the right to effective legal protection.
8. Compliance with the obligation for all contracts to be in writing.
9. That greater control to be exercised by the Labour Inspectorate or other government bodies to ensure compliance with regulations, particularly in the case of employment agencies and private entities (parishes or associations that act as intermediaries).
10. To develop incentives for hiring domestic and care workers on contracts, and reinstate and improve aid to families through taxation policy. This had previously been done in a policy that provided a 20% reduction in Social Security contributions that was in place until July 2017.
11. Adoption of measures to prevent, report and punish gender violence against women in domestic work, with an emphasis on sexual abuse, trafficking and exploitation in the workplace.
12. Promotion and creation of a specialised service offering comprehensive support to domestic workers, including making it possible to report all types of abuse, using simple resources that are available to all (a hotline).
13. More flexible requirements and procedures to be established within the framework of the Alien Status Act for obtaining and renewing residence and work permits.
14. Ensuring compliance with the regulations governing live-in work, in terms of working hours, salaries, and other rights, taking into account the fact that this can effectively involve a 24-hour work period that includes overnight stays.
15. Organisation of training courses on occupational risks.
16. Analysis of the situation within the sector, and the working conditions of domestic and care workers.
17. To work with doctors' surgeries and the emergency services in order to ensure that illnesses or accidents suffered by domestic, cleaning, and care workers are correctly identified as resulting from working conditions where this is the case.
18. Recognition of domestic work as part of the care economy.
19. Incorporation of an intercultural and gender perspective in recruitment policies, with the aim of eliminating rumour, discrimination, segregation and prejudice based on origin, ethnicity, age or gender.
20. Promotion of initiatives aimed at giving domestic and care work greater visibility and enhancing its perceived value, empowering workers, raising awareness in society in general, and in each of the sectors involved.

Finally, it is clear that although from the beginning of this text we have excluded an analysis of the employment situation of people working in at-home care, in care homes, and in other care-related services who are registered in the General Social Security System, there is no doubt that any reflection on how to tackle the roots of the “care crisis” and to move towards a re-evaluation of the care sector in order to create decent working conditions will require the implementation of

measures that reach beyond the boundaries of domestic service. According to Labour Force Survey data provided by UGT (2019: 3), Spain is the second country in the European Union in terms of volume of this type of work (considering households as employers of domestic staff), both in absolute terms, and as a percentage of the total number of jobs in each member state. However, when it comes to care in residential establishments and the provision of social services where no accommodation is provided, the data places Spain at the bottom of list of European Union countries. There is still a long way to go in this sense, and the public funding of these services is essential.

Within Barcelona City Council's commitment to promoting public procurement measures as a means of defending rights and working conditions in the sector, it is worth highlighting the Home Care Service (SAD) pilot project, which has taken the Buurtzorg model (Buurtzorg is a Dutch organisation providing health services in the home) as a reference point¹²: the social superblocks. The starting point is the recognition of the fact that the current model of SAD provision shows signs of severe strain both in terms of service quality (due to overload) and the working conditions of the professionals employed. The Buurtzorg model is being applied in four of the city's neighbourhoods (Marina, Sant Antoni, Vilapicina and El Poblenou), with two SAD superblocks being set up in each. This is a new form of service provision, based on the creation of teams of professionals who provide a service to a group of users living in a superblock, and who have a high degree of autonomy in terms of how work is organised, decision-making, etc. In this way, continuity, proximity, and the personalisation of care can be improved. The Buurtzorg model was created in 2006 by a group of community nurses in the Netherlands who decided to set up a community care group of their own in order to address the centralisation and depersonalisation towards which the Dutch system was drifting (Word Economic Forum, 2017). It has now been extended throughout the country, and is being replicated in many European and Asian countries. The results show that in this way it is possible to improve both working conditions and the degree of personal satisfaction experienced by caregivers, as well as the quality of life of those who use these services.

To this end, in April 2019, Barcelona City Council created the "Barcelona Cares"¹³ space, with the aim of highlighting existing care resources in the city, and establishing a point of reference for citizens (professional carers and those caring for family members, people receiving care, and the public in general) where where information on all the available services and resources can be found. An additional goal here is to promote networking and exchange. The centre aims to become the following:

- A place to find information and comprehensive guidance on existing resources within the city.
- A meeting point for all those involved in care in the city.
- A space for coordination and networking between people, professionals and organisations.
- A centre for raising awareness of issues around care, and the dissemination of information on the subject.

4. In conclusion

Contrary to the predictions of Tronto (2020), the assessment of the situation presented in this article does not suggest, for the moment at least, that the current global health crisis has translated into an opportunity to advocate care as an essential human value, as an integral part of human life. Furthermore, all the recommendations outlined here are just a sample of how much remains to be done to successfully address the situations of exploitation, precariousness, vulnerability and defencelessness experienced by some of these women workers. These situations are the result of a series of shortcomings linked both to the still discriminatory (mis)regulation of domestic work in our legal system (despite progress made in recent years) and to the voracity of a market that in the absence of any other care system operates on a global scale by recruiting women workers from

12. See: <https://ajuntament.barcelona.cat/dretssocials/es/innovacion-social/supermanzanas-sociales>

13. See: www.barcelona.cat/ciutatcuidadora/es/espacio-barcelona-cuida/que-es.

certain backgrounds, and is based on job models that facilitate employment relationships that are all too often rooted in labour exploitation and informality.

There is only one way to resolve the “care crisis”. This involves a combination of two strategies: granting people time so that they can take on unpaid care tasks as part of their daily lives if they so wish, and the creation of an infrastructure by the public administration that supports well-paid jobs in care, and that is accessible to all. If this does not happen, according to Dowling (2021) our system will continue to move towards the discourse of personal responsibility for care, which translates into the expansion of opportunities for commodification and funding by market forces. Managing care needs based on the principle of personal responsibility means fostering job insecurity, the invisibility of the workforce and the deterioration of care standards, as well as turning access to care into a “luxury” accessible only to the wealthiest sectors of society. Solving the “care crisis” by expanding the care economy within the logic of market forces comes involves all these risks, as this is the only way that capitalism can extract added economic value from a sector that is, by definition, labour-intensive. Such a structure is also extremely vulnerable to health crises such as the one we are currently experiencing, as has all too clearly been seen.

The ILO has placed care work at the centre of its initiatives in recent years (ILO, 2018). To this end, it argues that if decent jobs in care are to be created, the process needs to be supported by transformative policies in five areas of public policy: care policy, macroeconomics, social protection, employment and migration policy. These policies will have a transformative impact to the extent that they build on what the ILO calls the “triple Rs” - recognising, reducing and redistributing care work. The ILO recommends a number of measures, including the specific circumstances of workers with a migrant background: (i) regulating and enforcing decent working conditions, and guaranteeing equal pay for work of equal value for all care workers; (ii) ensuring a safe, attractive and stimulating work environment for all care workers; (iii) enacting legislation and adopting measures to protect migrant care workers (ILO, 2018).

There is no other way that the words of sociologist Alain Touraine (2020) with which we began this chapter (“this crisis is going to raise the profile of care workers”) can become a reality that will allow us to enjoy both a present and a future where there are *decent* jobs in care. And to conclude, a final thought as so clearly expressed by Karina Fulladosa-Leal *et al.* (2020: 8), “no hi podrà haver un projecte just que no tingui en compte tenir cura d’aquelles que cuiden” (there can be no project based on the principles of fairness that does not take into account the need to care for the carers).

Bibliography

ALMENA COOPERATIVA FEMINISTA. *Tras la puerta. Cómo informan los medios sobre el trabajo del hogar y los cuidados*. Barcelona: Almena Cooperativa Feminista/Oxfam Intermón, 2019.

BECK, U. *La sociedad del riesgo global*. Madrid: Siglo XXI, 1986.

CARRILLO, S. (coord.) *Abordant la crisi de les cures: polítiques, treballs i experiències locals*, Barcelona: The Institute of Social and Political Science, 2018.

BARCELONA MUNICIPAL IMMIGRATION COUNCIL. *Propuestas para la dignificación y sensibilización en el ámbito del trabajo del hogar y el cuidado de las personas*. Barcelona: Citizen Rights and Diversity Department, Barcelona City Council, 2017. https://ajuntament.barcelona.cat/consell-municipal-immigracio/sites/default/files/documents/doc.gt_llar_00.es.pdf.

DOWLING, E. *The Care Crisis*. London: Verso, 2021.

EZQUERRA, S. "Cartografiant la crisi de les cures en l'àmbit català: polítiques públiques, famílies i mercat". S. CARRILLO (coord.). *Abordant la crisi de les cures: polítiques, treballs i experiències locals*, 2019, pp. 10-45.

FEDERICI, S. *Revolución en punto cero. Trabajo doméstico, reproducción y luchas feministas*. Madrid: Traficante de Sueños, 2013.

FULLADOSA-LEAL, K., ET AL. "Sobre drets, reivindicacions i polítiques amoroses entorn de les feines de la llar i les cures". *Revista Eure*, Vol. 47, 2020.

HOCHSCHILD, A. R. "Global Care Chains and Emotional Surplus Value", in: W. HUTTON, W.; A. GIDDENS (eds.), *On The Edge: Living with Global Capitalism*. London: Jonathan Cape, 2000, pp. 130-146.

INTERNATIONAL LABOUR ORGANIZATION (ILO). *Care work and care jobs. For the future of decent work*. Geneva: 2018. https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_737394.pdf.

INTERNATIONAL LABOUR ORGANIZATION (ILO). "Livelihoods of more than 55 million domestic workers at risk due to Covid-19". *ILO News*, 16 June 2020. www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_748117/lang--es/index.htm

LUTZ, H. "Care migration: The connectivity between care chains, care circulation and transnational social inequality". *Current Sociology*, Vol. 66:4, 2018, pp. 577-589.

MARTÍNEZ BUJÁN, R. "¡El trabajo doméstico cuenta! Características y transformaciones del servicio doméstico en España". *Migraciones*, Vol. 36, 2014, pp. 275-305.

OTXOA, I. "El subsidio que no llega: una promesa incumplida". *El Salto*, (July 2020). <https://www.elsaltodiario.com/opinion/subsidio-trabajadoras-hogar-no-llega-promesa-incumplida-devaluacion-condiciones>.

PÉREZ-OROZCO, A. *Cadenas globales de cuidados*. Santo Domingo: UN-INSTRAW, 2007.

PÉREZ-OROZCO, A. *Cadenas globales de cuidados. ¿Qué derechos para un régimen global de cuidados justo?* Santo Domingo: UN-INSTRAW, 2010.

PÉREZ-OROZCO, A.; LÓPEZ-GIL, S. *Desigualdades a flor de piel. Cadenas globales de cuidados. Concreciones en el empleo de hogar y articulaciones políticas*. Santo Domingo: ONU Mujeres, 2016.

REYES, L., BERTRÁN, C. *Condicions de vida de les treballadores de la llar i les cures centreamericanes a Barcelona*. Barcelona: Information Centre for Foreign Workers (CITE), 2020.

SILVER, B. *Forces of labor*. New York: Cambridge University Press, 2003.

TOURAINÉ, A. "Alain Touraine, sociologist: "Esta crisis va a empujar hacia arriba a los cuidadores". *El País*. 2020. <https://elpais.com/ideas/2020-03-28/alain-touraine-esta-crisis-va-a-empujar-hacia-arriba-a-los-cuidadores.html>.

TRONTO, J. *Riesgo o cuidado*. Buenos Aires: Fundación Medifé, 2020.

UNIÓN GENERAL DE TRABAJADORES (UGT). *Trabajo doméstico y de cuidados para empleadores particulares*. 2019. <https://www.ugt.es/informe-trabajo-domestico-y-de-cuidados-para-empleadores-particulares>.

WORD ECONOMIC FORUM (WEF). *'Buurtzorg'. The Dutch word that could revolutionize healthcare*, 2017. <https://www.weforum.org>.