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# **Job Quality and Industrial Relations in the Personal and Household Services**

Country report Czechia (based on the research report n.33 for project PHS-QUALITY)

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## **Key points**

- The Czech care system might be characterized as being in transition. While a significant part of the public sector still provides services in a residential form, the demand for homecare services, both in elderly care and childcare, increases.
- The publicly financed part of the PHS sector provides services to a significant part of the elderly who need social care services provided at home, including both personal care and household care.
- The number of migrant workers present in the sector remain unknown. From the available data we know that the most widespread form of service provision done by the foreigners in Czechia is the live-out form, which slightly decreases the risk of precarity of domestic workers.
- There is no collective bargaining in the sector.
- Employers and NGOs seem to be the most vocal actors, addressing informality in the sector. The majority of their initiatives took place in 2013 and 2014, partially to campaign for ILO convention (NGOs), and partially as an effort to decrease unemployment and reduce the grey economy in the post-crisis period (employers and Ministry of Labour). Currently, the lack of interest from the policy makers' side has halved actors initiatives.

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## 1 Organization of the sector

According to the sources of financing, the PHS sector can be divided into public and private. In the case of Czechia, as we argued in the report, public financing ensures formal employment relations in the sector, while various private resources lead to precarity and semi-formality and informality in working conditions.

The public PHS sector, regulated and controlled by public institutions is targeted at care services. Both healthcare services and social care services are provided in the vast majority to elderly and disabled people. The private PHS sector encompasses personal and household services provided at home such as childcare, cleaning services and increasingly, care for elderly people on the basis of semi-formal and informal employment relations financed solely from the private resources of those households. While the public part of the sector is larger in terms of clients, formalized in terms of regulation, financed mostly from public resources, the private one is poorly regulated, provided only by private subjects (agencies and individuals), and employees are exposed to far more precarious working conditions.

## 2 Working conditions in the PHS sector

Working conditions in the public part of the sector, despite being mostly formalized and in line with labour legislation, does not fully prevent precariousness. The biggest issues are low wages,

overtime work, poor work management, and client attitudes to service providers, which create the mixture of potentially difficult and precarious working conditions especially with regard to health and safety at work. In recent years, the lack of employees also increased the pressure on work performance.

For the private part of the sector, Czech legislation does not recognize work in households as a specific type of work and is considered to fall under a standard employment relationship and/or under Commercial Code provisions, which paradoxically pushes the majority of domestic workers and their employers (households) outside the scope of legal employment relations.

In the private part of the sector, especially in cleaning and childcare services, we find various forms of semi-formal and informal employment relations. Semi-formality refers to the situation where a domestic worker officially has an employment contract, but this contract underestimates the actual hours worked in the sector and/or encompass a vague or incomplete specification of the job tasks. Another form of semi-formality in the sector is the use of self-employment to provide domestic work, mostly used by foreigners to attain justification to stay in the country.

## 3 ILO convention on domestic workers

In 2012, the Czech parliament discussed but did not approve ILO convention no. 189/2011 on domestic workers. The main argument was a very limited incidence of domestic work and no evidence about the violation of workers' rights. The argumentation

was based on official statistics, which could not indicate informality in the sector. Until now, no representative study about the sector's size has been provided. And as a consequence, there is no political will to tackle it.

## 4 Actors in the PHS sector

The actors can be distinguished, according to who they represent, a) home healthcare providers and social care providers and their associations, b) NGOs which focus on increasing the protection of foreign domestic workers and c) trade unions. Although trade unions supported ILO convention adoption for domestic workers in the 2012 legislation process, their activity in the sector is otherwise limited.

There is no social dialogue in the sector, specifically targeted at domestic workers. Both social partners address problems mostly associated with the functioning of the public part of the sector (financing, quality of services and sustainability), while the informality and working conditions in the private part of the sector are rarely revealed. The trade union in healthcare and social care is trying to conclude a collective agreement at the sector level which would cover employees in social services employed in the public part of the sector, including those providing homecare services. Nevertheless, most of their effort is targeted at increasing the protection of social workers in residential care services, while other subsectors in the care sector, including the PHS sector, are less represented. Low unionization rate of in the care sector partially is the reason.

The employer's association in Czechia, which represents social care providers, has in its agenda

the introduction of a voucher system in domestic care. Their motivation is primarily led by the economic interest to increase employment and fight informality in the sector. The most discussed model is similar to the one introduced in France or Belgium, encompassing state subsidies into the sector, targeted at decreasing unemployment rates and informality in the sector while increasing the demand for household services. As the representatives of the organization claimed in 2020, despite still being in their agenda, there is a significant lack of will on the government's side to deal with informality in the sector.

The missing engagement of the trade unions in the informal part of the sector and towards foreigners is replaced by the activities of civil society organizations (CSOs). Active CSOs mostly point out the working conditions of migrant workers in the sector, while Czech citizens providing homecare services are mostly out of the scope of their activities. The most vocal organization, Sdružení pro integraci a migraci (Association for integration and migration - SIMI), conducted a campaign in 2014, which included lobbying, research and PR activities to draw the attention of politicians and public to the ILO convention and labour rights of foreign domestic workers.

## 4 Conclusions

The combination of household preferences to have care provided by relatives, increasing demands on career development of relatives and an ageing society makes the Czech case the model of transition where demand for homecare increases, but publicly financed and accessible residential services are still

available. In this situation, the homecare provided by migrants is present mostly in urbanized areas of the biggest cities, while local workforce remain mostly in the publicly financed par to the sector. In the private part of the sector, semi-formal rather than informal employment relations prevail. The vast majority of domestic workers provide their services in the live-out form of work, which makes the Czech case seemingly less serious in terms of addressing ILO convention adoption. Nevertheless, with regard to an ageing society and changing household preferences, the demand for homecare services will raise, which should also attract attention of relevant actors in the sector and contribute to the improvement of working conditions of domestic workers.