



Close the Gap response to Social Justice and Fairness Commission - Reform of Social Care

October 2020

Close the Gap is Scotland's policy advocacy organisation working on women's labour market participation. We have been working with policymakers, employers and employees since 2001 to influence and enable action that will address the causes of women's labour market inequality.

1. Introduction

Care is profoundly gendered. Women do the bulk of unpaid and informal care, and comprise 85% of the social care workforce in Scotland.¹ Social care is vital to women's lives, as workers and as service users, and to the functioning of Scotland's economy. Investment in the workforce is core to providing high quality personalised care. Despite this, the social care workforce is underpaid, undervalued and under-protected.²

The ongoing COVID-19 crisis has further highlighted pre-existing issues in social care provision, including the undervaluation of the predominantly female social care workforce. Over the course of the crisis, there have been widely reported concerns around PPE for social care staff. The Royal College of Nursing have raised particular concerns around access to PPE for staff working outside of a hospital environment, including care home staff,³ and a report found that social care workers are more than twice as likely to die from COVID-19 as colleagues on the NHS frontline.⁴

Social care workers are essential to a successful pandemic response, and there has been a shift in societal attitudes around the low pay and poor terms and conditions associated with social care work. It is therefore crucial that investment in social care, with particular interventions to address the undervaluation of the workforce, are core to economic recovery in the aftermath of the pandemic. Care is as essential to

¹ Scottish Social Services Council (2019) *Scottish Social Service Sector: Report on 2018 Workforce Data*

² Close the Gap (2020) *Disproportionate Disruption: The impact of COVID-19 on women's labour market equality*

³ Royal College of Nursing (2020) 'Nurse leader calls on First Minister to intervene on protective equipment supply' available at <https://www.rcn.org.uk/news-and-events/news/rcn-writes-to-fm-re-ppe-23-mar-2020>

⁴ McArdle, Helen (2020) 'Social care workers twice as likely to die from Covid as colleagues on NHS frontline', *The Herald*, 18th June 2020, available at <https://www.heraldscotland.com/news/18524205.coronavirus-social-care-workers-twice-likely-ovid-colleagues-nhs-frontline/>

our economy as bricks, steel, and fibre optic cable.⁵ Research by the Women's Budget Group also found that investment in care is an effective way to stimulate employment, reduce the gender employment gap and to counter economic recession.⁶ This research found that investment in care in the UK would produce 2.7 times as many jobs as an equivalent investment in construction, investment in care is greener than investment in construction and more of its costs would be recouped in increased income tax and National Insurance contributions.

The vision for social care reform must recognise that many of the challenges identified with the system, and particularly the workforce challenges, are a cause and consequence of gender inequality. It is pivotal that the independent review of the care system, announced in the Programme for Government and led by Derek Feeley, makes recommendations that address the undervaluation of care workers as a central aim of reform.

Close the Gap welcomes the opportunity to respond to this consultation on the reform of social care in Scotland. As Close the Gap's area of expertise is gender and the labour market, our submission focuses on addressing the gendered undervaluation of the social care workforce and the importance of delivering fair work in the sector. We welcome the focus in the discussion paper on considering investment in social care as investment in both wellbeing and the economy, and the recognition that investment in the social care workforce is a pivotal aspect of delivering better care. In taking forward these ambitions, we urge the Commission to apply a gendered lens when considering evidence and making recommendations.

2. Recognising women's unpaid caring roles

The discussion document highlights the importance of integrating the experience of unpaid carers, as well as protecting the wellbeing and economic security of unpaid carers. However, the section on unpaid carers is not gendered and does not acknowledge that women account for the majority of unpaid carers. Women's disproportionate responsibility for care and other domestic labour affects their ability to enter and progress equally in the labour market. Women are four times more likely to give up employment because of multiple caring responsibilities and are more likely to be in low-paid, part-time employment to enable women to balance earning with caring.⁷

Without action to tackle undervaluation and to invest in care work, any future gaps in social care provision are likely to lead to increased pressure on women to fulfil

⁵ Close the Gap and Engender (2020) *Gender and Economic Recovery*

⁶ Women's Budget Group (2020) *A Care-led Recovery from Coronavirus: The case for investment in care as a better post-pandemic economic stimulus than investment in construction* <https://wbg.org.uk/wp-content/uploads/2020/06/Care-led-recovery-final.pdf>

⁷ Carers UK and Employers for Carers (2012) *Sandwich Caring: Combining childcare with caring for older or disabled relatives*

these roles on an unpaid basis, potentially driving them out of the workforce and into greater poverty.⁸ In the context of COVID-19, work by Glasgow Disability Alliance, Inclusion Scotland and the ALLIANCE has found that social care packages have been reduced during the crisis, with some Health and Social Care Partnerships increasing their eligibility criteria which has made it more difficult to access care, displacing responsibility for care onto female family members.⁹

It is therefore vital that the Commission adopt a gendered approach when making recommendations in relation to unpaid carers, recognising that the majority of unpaid carers are women.

3. The undervaluation of the social care workforce

The concept of undervaluation underpins gendered experiences of low pay, occupational segregation and the gender pay gap.¹⁰ In economics, the undervaluation of “women’s work” means that there is evidence of lower returns to women’s productive characteristics.¹¹ Practically, this means that women will receive lower pay from investing in education or from their own work experience. The undervaluing of “women’s work” contributes to women’s higher levels of in-work poverty; two-thirds of workers earning below the Real Living Wage are women.¹²

The undervaluation of the social care workforce is sustained by stereotypes around gender roles and assumptions and women’s and men’s capabilities and interests. There is widespread assumption that caring and other unpaid work done in the home is better suited to women because historically it has been their role. This drives the undervaluation of this labour when it is done in the labour market, with jobs such as cleaning, catering, childcare and social care paid at, or close to, the minimum wage as a result. In addition, the idea that women are intrinsically more caring is used to justify the low pay attached to care work in the labour market, with perceived job satisfaction a substitute for fair pay. The designation of care as low-skilled contributes to the economy-wide undervaluation of care work more broadly.

Action to tackle the undervaluation of the workforce must, therefore, be core to work to reform social care in Scotland. This work is particularly important considering the serious challenges for the workforce as a result of changing demographics and the implications of Brexit for the sector’s reliance on migrant workers. Many employers in the care sector are already reporting high vacancy rates, a shortage of good quality applicants and high staff turnover. The overall vacancy rate in social

⁸ Close the Gap (2020) *Disproportionate disruption: The impact of COVID-19 on women’s labour market equality*

⁹ Ibid.

¹⁰ Grimshaw, Damien and Jill Rubery (2007) *Undervaluing Women’s Work*, Equal Opportunities Commission

¹¹ Ibid.

¹² Scottish Parliament Information Centre (2017) *The Living Wage: Facts and Figures 2017*

care is already almost twice the Scottish average.¹³ 1 in 5 care workers were born outside the UK,¹⁴ and the sector is likely to experience significant staffing pressures as the wage threshold set in the UK Government's immigration bill excludes the majority of social care workers. It is impossible to resolve these workforce issues while maintaining low pay in the sector.

Additionally, if more men are to work in the care sector, which is a necessary prerequisite to meeting staffing requirements, reducing occupational segregation and closing the gender pay gap, there needs to be an economic imperative to do so, with appropriately remunerated jobs with clear progression pathways as evidence that it is a good career choice. Without action to tackle undervaluation and to invest in care work, any future gaps in social care provision are likely to lead to increased pressure on women to fulfil these roles on an unpaid basis, potentially driving them out of the workforce and into greater poverty.¹⁵

4. Addressing low pay in the social care sector

At present, there are a diversity of social care providers in Scotland, with the private sector comprising 40% of providers, the public sector 33% and the third sector 28%. This partly explains the variance in pay, terms and conditions across the sector. While there are higher rates of pay found in the public sector, average hourly pay in the wider social care sector is just £9.79.¹⁶ Indeed, recent analysis from the STUC concluded that 43% of the Scottish social care workforce are being paid less than the Real Living Wage, compared to 17% for workers across the Scottish economy.¹⁷

Scottish Government measures to increase pay for the lowest paid workers in the public sector by facilitating the payment of the Living Wage are welcome. However, the Living Wage is not a panacea for undervaluation as it does not address the crux of the low pay problem, which is that social care work is undervalued because it is mostly women who do the work. Increasing the wages associated with social care alone will therefore be insufficient to better recognise the status and skills of the workforce. To date, raising the wage floor has not addressed the undervaluation of women's work.

5. Fair work for women and the social care sector

The statement of principles and purpose contained within the discussion paper, include principles relating to decent working conditions and ensuring dignity and respect for everyone – including those providing care and support. Close the Gap

¹³ NHS Scotland and COSLA (2019) *An Integrated health and social care workforce plan for Scotland*

¹⁴ Engender (2020) *Women and COVID-19*

¹⁵ Close the Gap (2020) *Disproportionate disruption: The impact of COVID-19 on women's labour market equality*

¹⁶ Fair Work Convention (2019) *Fair Work in Scotland's Social Care Sector 2019*

¹⁷ Williams, Martin (2010) 'Half of Scotland's care workers paid less than Real Living Wage', *The Herald*, 2 May 2020, available at <https://www.heraldscotland.com/news/18421934.half-scotlands-care-workers-paid-less-real-living-wage/>

welcomes the inclusion of these principles and the acknowledgement that improving the terms, conditions and pay of the workforce is central to providing better social care in Scotland.

The Fair Work in Scotland's Social Care Sector report¹⁸ concluded that fair work is not being delivered in the social care sector and highlights the undervaluation of women's work as a key theme. Indeed, in addition to low pay, employment in the social care sector is also characterised by a range of other features including:

- Increasingly precarious forms of employment, such zero hours contracts, which negatively impact predictability of shifts, regular income, household budget management, women's in-work poverty and children's poverty.
- A rise in self-employment, with women losing critical employment rights such as sick pay, holiday pay, maternity leave and pay, and the right to request flexible working.
- Increasing time constraints on service delivery which detrimentally affects quality of care, results in many workers doing unpaid overtime, which in turn affects women's physical and mental health. One in six social care workers do unpaid overtime each week.¹⁹
- Some workers not being reimbursed for mileage, or not being paid for travel time between visits to service users. Homecare employers across the UK have acknowledged that 19% of workers recorded working time is unpaid spent travelling between visits.²⁰
- Limited progression opportunities caused by the largely flat staffing structures, with little differentiation in pay between levels of seniority, which makes working in the sector less attractive to potential new recruits.
- A lack of access to training and development opportunities.²¹
- Problems with recruitment and retention, with the sector exhibiting the highest sectoral staff turnover rate in the labour market²², and more than a third of social care services reporting that they have had unfilled vacancies in the past 18 months.²³

Valuing women's skills

Women's work in social care is often seen as unskilled, despite increasing professionalisation and responsibility for complex and skilled tasks. For example, social care staff are increasingly being expected to dispense medication, with no

¹⁸ Fair Work Convention (2019) *Fair Work in Scotland's Social Care Sector 2019*

¹⁹ Office for National Statistics (2017) *Labour Force Survey 2017*

²⁰ Hayes, L.B.J. (2017) *Stories of Care: A labour of law – gender and class at work*, Palgrave: London

²¹ Scottish Government (2019) *Social Care Support Reform: Summary of discussion paper responses*

²² Hayes, L.B.J. (2017) *Stories of Care: A labour of law – gender and class at work*, Palgrave: London

²³ Fair Work Convention (2019) *Fair Work in Scotland's Social Care Sector 2019*

corresponding uplift in pay or status.²⁴ The invisibility of women's skills is a major cause of undervaluation²⁵ and this is particularly the case for homecare workers, whose work is carried out in the service users' homes rather than in a workplace, and often alone rather than in front of or while working with colleagues. The emotional labour required of care work is especially undervalued, and rarely is it adequately captured in pay and grading systems, where these exist.

The Fair Work Convention's report into social care highlighted that while the skills and qualifications necessary for social care work have increased, care work has not been afforded additional reward through additional pay. The report noted that "unlike social work or health, social care staff have limited access to adequate training and support, placing a predominantly female workforce under pressure in a sector which requires formal qualifications with little or no central funding for training." This has led to a situation where many care staff are required to cover their own training costs and undertake training in their own time, as a result of work pressures. This is particularly problematic in light of the well-established gendered barriers to training and development outlined later in this submission. Women's caring roles and other unpaid work has a profound effect on their employment, and on their access to education and training.

A critical tool to make women's skills valued and visible is job evaluation. The Fair Work Convention noted in its inquiry report into social care that no mechanism has been devised for undertaking job evaluation in the sector and for upgrading the pay of those with greater skills and experience.²⁶ This has resulted in challenges recruiting and retaining senior posts and managers, with existing workers reluctant to take on additional responsibility for a limited financial reward. Establishing robust mechanisms for job evaluation is therefore a critical aspect of action to address the sector-wide economic undervaluation.²⁷

Increasing collective bargaining in the social care sector

Trade union coverage in the social care sector is limited. The nature of work in the sector, which occurs outside of conventional workplaces, can make social care a challenging environment for unions to operate in and for workers to engage collectively.²⁸ Currently, only 19% of social care workers have their pay and conditions affected by agreements between employers and trade unions. The STUC asserts that, as the Scottish Government and Local Government directly fund social

²⁴ Hayes, L.B.J. (2017) *Stories of Care: A labour of law – gender and class at work*, Palgrave: London

²⁵ Grimshaw, Damien and Jill Rubery (2007) *Undervaluing Women's Work*, Equal Opportunities Commission

²⁶ Ibid.

²⁷ Close the Gap response to Scottish Labour's consultation on the National Care Service available at <https://www.closesthegap.org.uk/content/resources/Close-the-Gap-response-to-Scottish-Labour---National-Care-Service-August-2020.pdf>

²⁸ Ibid.

care, either through direct provision or through commissioning, it should be easier to ensure social care employers recognise trade unions for collective bargaining purposes or to agree sectoral bargaining arrangements so that all workers in the sector are raised up to a certain standard.²⁹

Collective pay bargaining is often weaker in sectors where women's work is concentrated, resulting in less associated protections for women's pay compared to men's. The Fair Work Action Plan commits the Scottish Government to increasing collective bargaining in social care. In addition, the Advisory Group on Economic Recovery recommended the implementation of extended collective bargaining in the social care sector,³⁰ as an aspect of work to strengthen the capacity and sustainability of the care sector.³¹ This work is a clear opportunity for work focused on addressing undervaluation, but gender expertise is required to ensure this is achieved in implementation. The design of this work will be the key determinant as to whether it has a positive impact on women's socio-economic equality.

While increasing collective bargaining would assist in improving terms and conditions, collective bargaining in individual workplaces alone will not guarantee the necessary coverage across the sector making it insufficient to tackle sector-wide undervaluation. It is therefore necessary to explore options for sectoral bargaining.³² Unison Scotland have recommended that a timetable for the introduction of a Social Care Sectoral Bargaining arrangement should be established as a priority, with such an agreement covering wage rates, and terms and conditions across the sector.³³ Close the Gap is supportive of Unison's proposed approach. While a starting point for the agreement should be the consolidation of the real Living Wage, a timetable should be developed to raise levels of pay to the equivalent in health and local government.³⁴

6. Economic recovery and inclusive growth means investing in a care economy.

Close the Gap welcomes the inclusion of evidence in the discussion document around the economic case for investment in social care, highlighting that this investment encourages job creation and economic stimulus. Indeed, evidence from

²⁹ STUC (2019) *Scotland's Social Care Crisis* available at http://www.stuc.org.uk/files/Policy/Research_Briefings/Scotland%27s%20Care%20Crisis.pdf

³⁰ Scottish Government (2020) *Towards a robust, resilient wellbeing economy for Scotland: Report of the Advisory Group on Economic Recovery*

³¹ Ibid.

³² STUC (2019) *Scotland's Social Care Crisis* available at http://www.stuc.org.uk/files/Policy/Research_Briefings/Scotland%27s%20Care%20Crisis.pdf

³³ Unison Scotland (2020) *Care After Covid: A UNISON vision for social care* available at <https://www.unison-scotland.org/wp-content/uploads/Care-After-Covid.pdf>

³⁴ Close the Gap response to Scottish Labour's consultation on the National Care Service available at <https://www.closesthegap.org.uk/content/resources/Close-the-Gap-response-to-Scottish-Labour---National-Care-Service-August-2020.pdf>

Scotland,³⁵ and internationally³⁶ finds that investment in care infrastructure, including investment in high quality childcare and social care, stimulates job creation, community regeneration, and increased opportunities for under-employed women.³⁷

In spite of increasing demand for services, social care is not designated one of Scotland's growth sectors. This sustains the undervaluation of social care as a profession, and the unpaid care predominantly done by women. In *A Fairer Scotland for Women*, Scotland's first gender pay gap action plan, the Scottish Government recognises the importance of care to gender equality and commits to develop an approach that will treat investment in childcare and social care as infrastructure.³⁸ This commitment has been reaffirmed in the Scottish Government's response to the Advisory Group on economic recovery, however it remains a commitment to 'explore options' in this area, rather than to imminent changes in the categorisation of spending on social care investment.³⁹ While this rhetorical commitment is welcome, there must be clear action if ambitions on developing this approach to be realised.

Determining which economic sectors will be a focus for development, investment, and growth in Scotland has the potential to widen or narrow the gender pay gap. Scotland's growth sectors as outlined in Scotland's economic strategy⁴⁰ are heavily weighted towards male-dominated industries, such as energy, life sciences and financial and business services, which contributes to women's higher rates of poverty and sectoral skills shortages. Consequently, this policy focus is very likely to widen the gender pay gap, as investment has not yet incorporated significant and substantive efforts to militate against occupational segregation. Ultimately, this means that men, and "men's jobs" disproportionately benefit from Scottish Government-driven investment and development. The report of the Advisory Group on Economic Recovery replicates this traditional approach to infrastructure investment, with the Group's recommendations for job stimulus focusing on male-dominated sectors.⁴¹ While the Group highlights the social care sector as requiring reform and investment, it adopts a mainstream economics approach which frames spending on caring professions as current consumption, as opposed to capital investment.⁴²

A long-standing call of Close the Gap has been to designate care a key growth sector, and this call have been reiterated in Close the Gap and Engender's recently-published joint paper, *Gender and Economic Recovery*, which sets out nine principles

³⁵ Lapniewska, Zofia (2016) *Growth, Equality and Employment: Investing in Childcare in Scotland*, WiSE Research Centre

³⁶ De Henau, Jerome, Sue Himmelweit, Zofia Lapniewska and Diane Perrons (2016) *Investing the Care Economy: A gender analysis of employment stimulus in seven OECD countries*, ITUC Research Centre

³⁷ Lapniewska, Zofia (2016) *Growth, Equality and Employment: Investing in Childcare in Scotland*, WiSE Research Centre

³⁸ Scottish Government (2019) *A Fairer Scotland for Women: Scotland's gender pay gap action plan*

³⁹ Scottish Government (2020) *Economic Recovery Implementation Plan*

⁴⁰ Scottish Government (2015) *Scotland's Economic Strategy*

⁴¹ Scottish Government (2020) *Towards a robust, resilient wellbeing economy for Scotland: Report of the Advisory Group on Economic Recovery*

⁴² Close the Gap and Engender (2020) *Gender and Economic Recovery*

for a gender-sensitive economic recovery.⁴³ Recognising childcare and social care as infrastructure is critical to realising gender equality, not only for those accessing services but also for the predominantly female workforces. This would drive the policy focus and allocation of resources necessary to grow the sectors, and address the systemic undervaluation of “women’s work”. Social care, along with childcare, is critical infrastructure which enables women’s labour market participation, and is a necessary step in realising women’s wider economic equality. Inclusive growth must mean investing in a care economy, with investment in childcare and care for disabled people and older people should be considered as necessary infrastructure for a sustainable wellbeing economy and a good society.⁴⁴

7. Conclusion

COVID-19 has illuminated the importance of social care work in Scotland’s economy with those in social care now recognised as key workers. As highlighted in the discussion paper, this realisation should be a driver for improving pay, terms and conditions in the sector. Investment in social care, and addressing the gendered undervaluation of the workforce should be core to the economic recovery. Improving the pay, terms and conditions and crucially addressing the gendered undervaluation of the social care workforce, should be central to the independent review of the care sector. Establishing a national care service provides an important opportunity to improve the quality of care in Scotland, while also improving job quality and raising the status of paid care work. Outsourcing and the mixed market of delivery has entrenched undervaluation and women’s inequality in the social care workforce, with commissioning processes that prioritise cost over good quality employment.

Care is profoundly gendered, and COVID-19 has exacerbated the gendered patterns of care. There are now 1.1 million unpaid carers in Scotland, 61% of whom are women. This is an increase of 392,000 since the start of the crisis with 78% of carers having to provide more care than they were prior to the coronavirus outbreak.⁴⁵ This means that, in addition to social care reform having clear implications for the predominantly female workforce, a good quality social care system is therefore an important enabling factor to closing the gender pay gap as it allows women in participate in the labour market.

⁴³ Ibid.

⁴⁴ Ibid.

⁴⁵ Engender (2020) *Gender and Unpaid Work: The Impact of COVID-19 on Women’s caring roles*