

UWS-Oxfam Partnership Policy Forum – 21st January 2020

Making policy care: Exploring the relationship between care work and poverty

Summary report

The Policy Forum ‘Making Policy Care’

On 21st January, the [UWS-Oxfam Partnership](#) hosted the Policy Forum ‘Making Policy Care’ on the relationship between paid and unpaid care work, poverty, and inequality. Hosted on the University of the West of Scotland’s Paisley Campus, the two-hour event brought together around fifty anti-poverty campaigners, people with lived experience of being a (paid/unpaid) carer, those involved in care service delivery, and policy professionals. The event organisers – Rhiannon Sims from Oxfam Scotland and Dr Hartwig Pautz, Dr Vanesa Fuertes, and Dr Greig Inglis from UWS – facilitated the discussions and listened throughout the Policy Forum to the in-depth, personal, and immediate expertise of participants. In this respect, the Policy Forum stood in the tradition of much of the work of the UWS-Oxfam Partnership which, since its establishment in 2011, has sought to work closely with communities, campaigners and those with lived experience of poverty and inequality in order to work together for a more equitable and sustainable Scotland.

The Policy Forum’s organisers envisaged four aims for this Policy Forum: a) to bring together participants interested in and affected by the overlaps between care work, poverty and inequality; b) to discuss what role evidence in any form can play in changing the terms of the debate around the value of care to our society; c) to identify ideas for potential collaborative research between Partnership and participants or between participants; and d) to inform the Partnership’s future work agenda around the theme of ‘raising incomes’.

The two-hour Policy Forum was fast-paced and, in all likelihood, did not achieve all aims in equal measures. Nonetheless, the event allowed for lively discussions and contributed to new links being established and cooperation initiated between participants and also, hopefully, between participants and the UWS-Oxfam Partnership. Since the Policy Forum, the outbreak of the COVID-19 pandemic has shown that health care and social care systems in the UK are less than well equipped to deal with crises on such scale and that in particular the care sector is vulnerable to such shocks and, it seems, not considered a priority in terms of funding and vital supplies. But the crisis also highlights how, also in Scotland, unpaid and paid care are undervalued – in all possible ways – even in ‘normal times’ and that an open and frank discussion, involving as many in Scottish society as possible, about ‘policy that cares’ is needed and sustainable policy solutions long-overdue.

This report is not a verbatim note of the Policy Forum, but rather tries to capture some of the key points made during the discussions at the event. These discussions were preceded by short contributions by

the event organisers – the set of PowerPoint slides used to accompany these contributions will be published on the Partnership’s website alongside this report. The main part of the Policy Forum consisted of roundtable discussions and a final full-group discussion.

The summary report was circulated to Policy Forum participants for corrections and additions before it was published on the Partnership’s website. All mistakes are those of the author of the report.

Activity 1: What are the main issues round care work?

Participants, in small groups, were asked to brainstorm about the main issues related to care, poverty, and inequality in response to the question ‘What are the issues (or problems) you come up against in your lives and work in relation to the topic of paid or unpaid care work?’. To prompt discussion, participants were presented with the ‘Four Rs’ framework used by Oxfam in its international development work:

- Recognition of care as valuable work
- Reduction of difficulty and time spent on these activities
- Redistribution of care work:
 - from households to the state, private sector and civil society
 - from women to men
- Representation of carers/parents in governance structures and economic decision-making.

The following tries to capture the outcome of this brainstorming under six themes.

Pay, income, and work conditions

- Paid carers lack effective voice in employment and sometimes find employers actively discouraging it – is collective bargaining a solution?
- Split shifts are commonplace for care staff and create problems with regards to high transport costs and impact on carers’ own family care responsibilities
- Zero-hour-contracts are often used in the care sector but leave carers without sick pay or pension contributions
- The skills required for being a carer are not recognised in the pay
- Caring – both paid and unpaid – remains very gendered and thus leaves more women in poorly paid and poorly recognised employment, but also with unpaid care responsibilities in families
- Care work remains undervalued by society – this affects unpaid and paid carers
- Recruitment and retention issues – for example due to poor pay, undervalued work, and the impact of Brexit
- Lack of flexibility when it comes to unpaid care and continuation of paid employment
- Care is often insecure and low paid work

Impact on carers

- Care work has physical and mental impact on carers
- For young carers, balancing lives between work, schoolwork and care is difficult
- The choice to become an unpaid carer and to give up one's career often leads to difficult-to-manage income reductions for the carer
- Respite care – depends a lot on the voluntary sector and is difficult to obtain
- Funding for unpaid carers, for example for training, is insufficient
- Unpaid carers are often over-burdened so that their own lives suffer

Quality of care

- The quality of care is not always sufficient as carers are poorly paid and lack training, also staff turnover is relatively high and results in lower care quality
- Unpaid carers receive too little support so that they may not always be able to provide the best quality care for their family members
- Paid and unpaid carers operate under enormous stress so that they have little time for care-recipient
- There is a difference in the quality of private and public care
- Not all ethnic, cultural or faith groups are equally well served by the care sector – there is a need for culturally and faith-sensitive care services

Care provision

- The wait to receive social security benefits is too long and benefits are too low – for example, the Carer's Allowance is too small
- Decade-long austerity has put severe limits on local authority budgets for care, but the impact of this varies widely between local authority areas
- Large-scale care settings for young people are not always ideal and should be supplemented by more smaller and family-like settings

Funding care

- Costs of social care are growing and are unmet – is a 'care tax' the solution?
- The care system should put people before profit – are new business models for care provision needed?

Policy and practice

- Good policy is not always translated into good tangible practice
- Policies are not always well implemented 'on the ground'

Activity 2: A message to the powerful

Participants, in their small groups, were asked to focus on one of the problems identified in Activity 1 and to come up with one clear message, addressed to those in power, in relation to that problem. Groups were encouraged to think about who has the power to solve this problem (politicians, governments, policy makers, individuals), and to use the following questions to structure their thinking:

- What's the problem? What's the cause? Who will suffer? Who's responsible? Why should those with the power to make policy decisions care?

Participants were also asked to make these messages 'powerful' so that the urgency of the issue would be clear to policy makers, politicians and 'the public', and so that a campaign around these messages would stand a chance of arriving at the top of the public and political agenda.

Among these messages were the following:

- The social and economic costs of not valuing care work are huge – underpaid, stressed, overworked, undervalued, and untrained carers are more likely to deliver poor quality care with knock-on effects on the health care system.
- Who cares for the carers? Paid and unpaid carers are often neglected in attempts to improve the quality of the care system – their health care needs require meeting in order to avoid losing these workers to poor mental and physical health.
- A society that does not appreciate its carers and those they care for is, by necessity, an uncaring one in all other aspects.
- We were all cared for and will all be cared for, at many points in our life – we need a good care system for all.

Activity 3: What research should be done to promote the messages developed in Activity 2?

The purpose of this activity was to develop concrete ideas for research projects that participants could take forward together and/or in collaboration with the UWS-Oxfam Partnership to underpin these messages. Participants were encouraged to think about the following questions:

- What kind of data/evidence could help get these messages across to those in power and to underpin any campaigning efforts? What data/evidence is already out there, and where are the 'evidence gaps' in relation to these messages? What data/evidence does your organisation have or could produce? What could be done in terms of research collaborations?

First, participants thought that the issues, as discussed in Activity 1, were already relatively well-explored – in that sense, participants questioned whether more research was really needed to

demonstrate the nature of the problems and the range of solutions to them. However, participants agreed that they and their organisations either hold or could generate data that could be used to underpin the specific messages developed in Activity 2 and thus to push them to the public and political agenda for decision makers to start prioritising the development of solutions to the problems.

Most participants said that their organisations would be able to offer data produced in the daily operation of their organisation for research – this could include what some called ‘routine reports’ containing the experiences of carers and those receiving care. Others said that as part of their own campaigning work, they produce (descriptive statistical) data that was open for anyone to be used for further research and also for campaigning purposes. Yet again others said that their organisations – i.e. their staff and those they care for – could produce case studies, in the form of a videos or in written form, to underpin the messages. These case studies’ individual approach would show to policy makers what the working life of carers looked like or show what the problems around paid or unpaid work mean for the individual that requires care. Some participants thought that such evidence would have specific power over those in positions of power because they are often too far removed from these issues, in a day-to-day way, to actually understand the urgency and gravity of the care crisis.

Second, participants proposed ideas for research projects on the basis of a) the issues identified, b) the messages developed, and c) the sources of evidence and data discussed. The list below represents what was discussed at the Policy Forum.

- How can we better retain the care workforce? Are higher wages the solution?
- Are workforce and their employers aware of their rights and responsibilities?
- Is the quality of paid care better in some geographical areas than others and between care companies?
- What is the impact of unpaid care responsibilities on the ability to work (and to work well) of paid carers?
- What are current and possible ‘business models’ to provide paid care to anyone who needs it, possibly models without a profit motive?
- What are best practice models to allow people in paid work to also take on unpaid caring responsibilities?
- What is the impact of unpaid care on carers’ social inclusion and mental health?
- What are the economic costs to society of care provision and, importantly, of not providing it?
- In how far do care issues prevent people from entering paid employment?
- What is the state of collective voice of care workers via trade unions?
- How do the ‘the media’ depict care work of paid and unpaid carers and how may this influence people’s career choices and whether to do unpaid care?
- What are realities of current care arrangements in ethnic, cultural or faith minorities and what are the barriers to the uptake of mainstream care services?
- How do larger and smaller scale care settings for young people compare in terms of quality of care?

- How does active travel join up with the reform of adult social care support for paid and unpaid carers?
- Could the care sector be an example of best practice when it comes to employing people of groups under-represented in the labour market?

Conclusion

The Policy Forum brought some of those together who want ‘policy that cares’ for Scotland – policy that addresses the overlaps between care work, poverty and inequality – and showed that there is sufficient data and evidence to campaign for changes for the better.

It is clear that policy-makers, but also opinion formers in the media, face a large range of policy issues that compete for their attention and that they can only ever focus on a limited number of such issues at any one time. It is therefore important to have clear ‘messages’ to opinion formers and policy-makers. If such messages – well formulated and easy ‘to get across’ – are underpinned by research and evidence, then concerted policy campaigns can push a policy problem onto the public and governmental agenda. Only then, when politicians and civil servants have the policy problem at the top of their list, will they deal with it and will they be able to listen to what campaigners can tell them about the nature of the problem and possible solutions. The development of such these messages at the Policy Forum could be a starting point for joint work between participants and between participants and the UWS-Oxfam Partnership.

The Policy Forum took place before the Covid-19 crisis developed in Scotland and in the UK. The crisis surely underscores the urgency and scale of the problems around care. In a way, the crisis could be an opportunity to increase the pressure on those in positions of power to focus their attention on the many policy problems discussed in the Policy Forum. It may also lead to the increased readiness of policy-makers and opinion formers in the media to listen to those in care and to their unpaid and paid carers and to work towards ‘policy that cares’ with them.

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Attendee list

Alzheimer Scotland
Amina Muslim Women Resource Centre
Beith Trust
Carers Trust
Coalition of Care and Support Providers in Scotland (CCPS)
Compass CFS
Cornerstone
Children Poverty Action Group
Disability Resource Centre
Energy Action Scotland
European Patients Academy (EUPATI) Scotland
Experts by experience
Oxfam Scotland Volunteer
Fair Deal
Fife Gingerbread
Glasgow City Council
Glasgow Clyde College
Glasgow Disability Alliance
Inclusion Scotland
Iriss
Lanarkshire Epilepsy
Nether Johnstone House
NHS Health Scotland
North Lanarkshire Carers Together
One Parent Families Scotland
Poverty Alliance members and volunteers
Recovery Across Mental Health (RAMH)
Save the Children
Scottish Care
Scottish Out of School Care Network
Scottish Trades Union Congress
Scottish Council for Voluntary Organisations
Silverline Care Caledonia Ltd
The ALLIANCE
The Poverty Alliance
Quarriers
West Dunbartonshire CVS