

## **COVID-19 & Social Services:**

### **Learnings and recommendations for the future**

#### **Position Paper**

##### **Social Services: crucial but neglected.**

Social Services are essential services that provide care and support to millions of people in Europe, particularly for people with special needs or experiencing poverty and social exclusion. They support people in having a dignified life, achieving full participation in society, and the enjoyment of their social and human rights. Thus, quality, affordable, and accessible social services such as childcare, long-term care, social assistance, social housing, and employment support are crucial for social inclusion and cohesion in Europe and the implementation of the European Pillar of Social Rights.

Eurodiaconia, a network of 54 organisations in 32 European countries, based in the Christian faith, is at the centre of providing social services across Europe. Our members, representing more than 30,000 social and healthcare providers and over 1 million social care staff across Europe, are at the forefront, working for social justice and providing inclusive health and social services to those who need it the most. Furthermore, social services are also vital for Europe's social market economy. They are large employers across the continent, giving jobs to around 11 million workers in Europe (almost 5% of the total EU workforce)<sup>1</sup>, including people for whom the labour market may be hard to enter.

Despite their crucial role in our societies, social services have been experiencing persistent underfunding, under investment and undervaluing during more than a decade of austerity. This funding gap has had a negative impact on the quality of the jobs created and the sector's attractiveness, creating problems with recruitment and retention of sufficient staff. Underfunding has also compromised the quality of services for some providers and their future sustainability, ultimately hindering access to quality services.

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<sup>1</sup> <http://socialempleyosers.eu/files/doc/Report%20-%20Social%20Services%20Workforce%20in%20Europe.pdf>

## **Impact of COVID-19 on Social Services.**

Since the Coronavirus outbreak in early 2020, social services have been subjected to severe extra pressure. Already underfunded and struggling with staff shortages, they experienced increased demand and strained to give continuity to their operations while running under extremely complex circumstances that aggravated existing structural challenges. Moreover, during the worst times of the pandemic, many face-to-face services had to close or shift online where possible, challenging the principle of availability.

This appeared clearly in the experiences gathered from Eurodiaconia membership<sup>2</sup>. Our members reported staffing shortages and lack of volunteers due to restrictions on movement and sickness, reduction of the working hours of their employees due to economic difficulties or closing of services, staff mental fatigue, work overload and burnout, technological challenges and difficulties to reach out to vulnerable beneficiaries due to the digital divide, ambiguous government regulations, and inadequate and less personal protective equipment (PPE) than workers in the health sector. They also reported the loss of funding - particularly our members who run social enterprises - and increased costs, for instance due to purchasing of PPE, staff costs, and infrastructure expenses. Being not-for-profit services providers, this was a particularly critical time for them as they do not carry high financial reserves to use in such situations.

## **Impact on the delivery of long-term care services.**

Our members providing long-term care services reported undergoing a particularly difficult situation<sup>3</sup>. Shortages of hospital beds led to the quick discharge of patients without adequate testing, thereby transferring the risk of transmission from hospitals to care homes. This increased the risk of contracting COVID-19 for care workers and put an enormous strain on long-term care services. Moreover, the crisis intensified pre-existing structural problems in the sector, such as chronic staff shortages, lack of experienced qualified caregivers, poor working conditions, exhausting long hours of work, poor integration of different aspects of care, low uptake of digital solutions, and an increasing demand for care.

There is a great risk for staff shortages to be exacerbated in the sector. For instance, our member, Diakonie Austria has emphasised that they fear many staff will leave the care sector

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<sup>2</sup> We gathered these experiences in two reports on the impact of COVID-19 on Diaconal Services. You can read [here](#) our first report (Sept 2020) and [here](#) the second (Dec 2020).

<sup>3</sup> More information on this can be found in our [Policy Brief](#) "Demographic Change, Ageing, Long-term Care & COVID-19".

when the crisis is over due to exhaustion, which adds to the fact that many carers will retire within the next years. Likewise, our members in Czechia, Denmark, Finland, and Italy also stressed that there is a problematic combination of lack of training opportunities, highly demanding work, and low remuneration in the sector, which creates a chronic deficiency of professional and qualified care workers. They affirm that this will only worsen as demographic changes in Europe will increase the number of persons requiring long-term care.

Amidst these severe difficulties and enormous pressure, social services and long-term care providers have played a central role in mitigating the effects of the crisis: many continued working when other sectors shut down, and they displayed engagement, resilience, and flexibility by adjusting their provision of services to accommodate the rapidly changing reality. Some of our members opened emergency services for people in need, such as those experiencing homelessness and most exposed to the virus. Others implemented innovative and creative solutions to reach out to their beneficiaries, carried out fundraising campaigns, and resorted to self-funding to cope with the increased demand.

### **Political Response.**

Nonetheless, the extraordinary efforts carried out by social services during the COVID crisis are not sustainable in time and are not the way to ensure well-functioning social protection systems. There is concern amongst our members on the long-term effects of this crisis for their service provision and for the millions of people across Europe who benefit from such services on a day-to-day basis.

The European Union coordinated a strong common European response to the crisis, with resources rapidly mobilised to support employment and healthcare systems. However, the impact of the pandemic for social services was not always acknowledged by the political responses of national governments or the European Union. For instance, the EU4Health programme<sup>4</sup> was proposed to support the Member States and the EU to address healthcare systems' resilience and build up capacity and preparedness for cross-border health threats. However, its focus was on the healthcare, and the social care strand was submerged under this umbrella making access very difficult for providers of services.

Moreover, the Recovery and Resilience Facility (RRF) offered an opportunity to address the social sector funding gap. However, only one of the flagship projects in the RRF, "Reskill and upskill" pursues a social objective at its core – though it remains clearly related to the labour

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<sup>4</sup> [https://ec.europa.eu/health/funding/eu4health\\_en](https://ec.europa.eu/health/funding/eu4health_en)

market. By now, national recovery plans have been submitted by all EU countries (except the Netherlands), and most of them have already been approved. According to the European Commission analysis, around 30% of the total expenditure of the plans will be directed towards social policy. However, it is yet unclear to what extent this social expenditure will address the specific needs of social services and provide them with proper and long-needed funding.

Also, we welcome the Commission's announced European Care Strategy for 2022 and we look forward to seeing it address the diverse challenges in the care sector amongst others; the funding gaps and sustainability of funds, staff recruitment and retention challenges, innovation and digitalisation of services, the gender dynamics of the sector - women are still overrepresented in employment in care services - and standardizing common quality principles of long-term care.

### **Lessons for the Future.**

At the time of this paper, Europe is slowly recuperating from the initial crisis while at the same time, facing uncertainty due to a fourth COVID-19 wave and new restrictions. Therefore, the EU and the Member States must ensure that social services are not relegated to the back of the queue in the recovery and that they are supported throughout these uncertain times. They have proven to be key during the crisis, and they play an essential role in supporting the marginalised and making sure people live in dignity. Therefore, targeted action to strengthen the social sector and making it resilient and sustainable must be a priority, as it is key for social cohesion and the well-functioning of our societies.

This is particularly relevant at the moment we are living in. The pandemic is not over yet and COVID-19 will most likely not be the only health crisis that affects our societies in the future. Likewise, climate change-related emergencies are already a reality, also in Europe. Finally, the demographic change and the increasing social inequalities put more pressure on our social protection systems. Thus, efforts must be put in place to prioritise social investments in public and private services, that go beyond addressing immediate crisis needs and preparing for the future. Social protection systems need to be prioritised and reinforced to ensure people can retain a dignified life.

Equally, preparedness for future crises needs to be an integral part of the design and delivery of health care and social services. In light of the above, it is worrying that the recently

announced European Health Preparedness and Response Authority (HERA)<sup>5</sup> to prevent, detect, and rapidly respond to health emergencies disregards the social aspect of health crises. Future preparedness must adopt an integrated approach that allows medical needs and social needs to be met to ensure people's holistic well-being and general well-being during crises.

Moreover, the pandemic has shown the urgent need to revalue the perceptions of care work and social services in general, matching the key role social services play in our societies. This must be reflected in the compensation given to staff, their working conditions and in the training provided. Staff in social services must be valued in the same way as staff in healthcare services, and this must go beyond words. Social services - in their full diversity – must be recognised as essential, on equal terms to other Services of General Interest such as our healthcare systems. This means ensuring that the specific needs of social services are fully prioritised in the recovery and in long-term measures.

## **Our Recommendations.**

### **A. Sustainable Funding for Sustainable Services.**

1. The COVID-19 crisis is not over yet. We urge for the creation of a short-term European Emergency Fund for Social Services during the COVID-19 pandemic, which would allow the European Union to directly support the provision of and access to social services during this period of emergency.
2. We call for a real, long-term social investment approach at the EU level to ensure supportive ecosystems for social services which enable them to be resilient and fulfil their essential role in society. Social Investment should be a priority at the heart of the recovery and policies such as the European Semester, EU Funds (ERDF, ESF+) and financial instruments including the Recovery and Resilience Facility.
3. A review of the effectiveness of Public Procurement in funding social care services should be undertaken at EU level and revisions introduced where needed. Any revision to State Aid law at EU level should positively support the commissioning of social services by reviewing the existing provisions and how effective they are in supporting social services. Moreover, the Commission should also promote the use of other

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<sup>5</sup> [https://ec.europa.eu/commission/presscorner/detail/en/ip\\_21\\_4672](https://ec.europa.eu/commission/presscorner/detail/en/ip_21_4672)

models of financing social services such as the use of personal budgets which empowers the service users to decide how they should be supported.

4. The European Union should promote an increase in social investment by Member States through an enabling economic governance framework which exempts such investments from the Stability and Growth Pact. Improved social cohesion prevents in the long run the high economic costs of inequalities, promotes people's wellbeing, and generates social and economic returns.
5. In certain areas, such as long-term care, increased funding is essential and urgent, as demographic change is raising the number of people in need of care. The European Commission, as part of the European Care Strategy, should explore the development of a European Care Guarantee that would support the provision of short- and long-term care services across the life cycle and promote investment in the sector.
6. We call on the European Institutions to strengthen the essential nature of social services. Social services - in their full diversity – must be recognised as essential, on equal terms to other Services of General Interest such as our healthcare systems. Investing in more accessible, affordable and higher quality services to all will lead to better productivity, employment rates, health outcomes, social inclusion, political stability and wellbeing.
7. Member States should develop coherent and reliable funding streams to social service to ensure their functioning and quality, foster successful social experimentation and social innovation projects, and maximise the efficient use of EU funding, including by pooling together resources from different funding programmes. Furthermore, they must ensure that EU funding plays a transformative role in shaping social services and social infrastructures that are additional to (and not the replacement of) national and regional budgets. Sustainability of funding will ensure the sustainability of services and consequently the quality of services.

## **B. Quality, Affordable, and Accessible Social Services for All.**

1. Efforts should be made to retain and train social services staff. Increased salaries, training and retraining, and opportunities for lifelong learning and growth within the sector should be prioritised by social service providers. This can be realised with increased resources made available. Member States should use existing EU funds and

programmes to expand the current social and health care workforce through additional permanent and temporary staff to alleviate the physical and mental stress experienced due to COVID-19 and to ensure that social and health care services remain sustainable.

2. Coordinated efforts should be taken to make employment in social services attractive. The European Commission and the Member States should initiate campaigns that aim at changing public perspectives about a career in the social care sector. In addition, national and public authorities in collaboration with social service providers should develop the workforce with a better long-term strategy to make working in social care attractive.
3. The EU and national authorities should work on setting and adopting minimum quality standards of care across Europe. Everyone should have access to good quality and affordable long-term care. For this, it is also necessary to generate comparable data in long-term care across Europe which could be addressed in a review of the Voluntary Quality Framework for Social Services.
4. When tendering for social services, contracting authorities should award contracts to provide social services based on the “best quality for money”. Moreover, tenders in the social sector must include consideration of independently verified quality criteria in the procurement process
5. Member States should invest in adequate coverage of high-quality long-term care services. To achieve this, the European Commission should encourage Member States to invest in innovative solutions and projects carried out by service providers. This should also include in-depth restructuring of national care systems to increase quality while being cost efficient. We call on the European Commission to address these issues in its upcoming European Care Strategy.
6. The Members States should assist social service providers with digital transformation and ensure the continuity of innovative services provided by not-for-profit service providers to respond to new social needs, particularly in times of crisis. If services are already struggling to operate, they will not be able to easily afford to adapt or innovate to continue to meet the needs and expectations of stakeholders and support the fulfilment of rights.

7. Greater integration of social and health care services could provide a better quality of holistic, life-long care services. Therefore, national authorities should develop integrated health and social care systems to reduce barriers to effective service provision.
8. The European Commission should support the sharing of good practices and mutual learning in the social services sector and between social and health care in pandemic responses and service adaptation. For instance, the creation of an online European platform as a tool to provide exchange among European social and health service providers would be beneficial.

### **C. Preparedness for Future Crises: Take social services on board!**

1. At the outbreak of any health crisis taskforces should be established as soon as possible at the appropriate levels with representatives of all stakeholders, including the providers of all types of social services, to debate and discuss the implications of any decisions to be taken and how they will affect different types of social services.
2. Governmental authorities must recognise the need to keep all social services open and available during crises to those who need them. In such situations, immediate funding needs to be provided to all social services to be able to re-engineer services to continue to be accessible to those who need them. In addition, financial assistance must be directly provided to the organisations working on the front lines in order to ensure that crises do not further affect people in situations of exclusion.
3. We call on the European Union to include social services in all the initiatives on future preparedness following the COVID-19 pandemic, with the involvement of representatives of social service provider organisations and organisations that represent the users of services to co-create the European Union future response in the areas of health and social care.
4. Our members call on the European Commission to develop a 'handbook' in preparation for subsequent crises and to facilitate and help Member States develop clear communication lines and synchronised information between the Ministries of Social Affairs and public health authorities.

5. We call on the European Commission to develop roadmaps and guidance that provide concrete advice to national authorities to ensure that the role and needs of social services, their professionals and people who use such services are fully considered in crises responses, recovery and follow-up measures taken by public authorities.
6. Managing authorities and social and health care service providers must engage in common decision-making as to how additional funds should be used in a future crisis. For social and health care services to play their essential role at those times, economic security must be guaranteed.

Eurodiaconia will continue to report and follow the social impact of the current pandemic and draw lessons from the situation. At the time of this paper, Europe is currently experiencing the fourth wave of the pandemic with some countries beginning to announce lockdowns. By working together with our members and responding to the realities on the ground, we can make a difference and push for improvements for the future.

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