

BARSERVICE

Towards smart bargaining in the care sector in Italy

Author: Giorgia Martini

2024



The project is funded by the European union, project No. 101126532

Table of contents

Executive summary.....	1
I. Methodology	2
II. Sector identification and trends	2
III. Current state of collective bargaining	4
IV. Challenges to collective bargaining	5
V. Towards Smart Bargaining.....	7
VI. European Perspectives.....	8
VII. Conclusions	9
References.....	10

Executive summary

This report provides an overview of the state of collective bargaining in the care sector in Italy, with a specific focus on the sectors identified by NACE codes 87 and 97. The report includes aggregate data on the number of regular and irregular workers, the workforce composition, an overview of the main social partners involved in the sector and elements to develop future perspectives for collective bargaining. It is noted, however, that most of the qualitative data collected from the interviews conducted pertains to the domestic work sector (NACE 97).

Key trends

According to the data, the care sector in Italy is characterized by a clear predominance of female and foreign workers, primarily aged between 40 and 64. The average age is increasing, which is particularly significant in Italy, where the average population age is very high, and the demand for care and assistance is expected to grow.

Collective Bargaining Structure

For the identified NACE sectors, Italy has two main collective agreements: the one referred to as "domestic work" for NACE sector 97, and the "socio-assistential/healthcare and educational" agreement for NACE sector 87. Particularly in the domestic sector, collective bargaining primarily takes place at the national level.

Key Challenges

The main challenges in the sector are the high prevalence of undeclared work, the complexities associated with the significant presence of migrant workers, gender segregation, and the challenges linked to the direct hiring of workers by families. Social partners highlight the following as priority actions: combating undeclared work, efforts to improve access to the regular labor market for migrant workers, and the overall improvement of working conditions in the sector, making it more attractive to new generations of workers.

Path Forward

As for the strategic actions to improve bargaining in the sector, the first step concerns the extension of collective agreement coverage, directly linked to addressing undeclared work, which is estimated to involve about 50% of workers today. At the European level, social partners are convinced that sharing best practices and exchanging positive experiences are essential. However, national specificities in this sector are particularly significant and greatly affect the scope for collective bargaining.



Conclusions

The care sector in Italy faces challenges due to its late entry in the labour market and irregular work, leaving many workers in precarious conditions. Key issues include the unique nature of employment, a high proportion of migrant workers, and sector diversity. Recognition and proper compensation are central issues, with social partners needed to advocate for workers, identify needs, and address growing demand for affordable care services.

I. Methodology

This report has been drafted through the conduction of desk and field research. The desk research was carried out through the consultation of scientific and grey literature. To reconstruct a plausible picture of the care sector's condition in Italy today, the data used come from official national sources (INPS, ISTAT, CNEL, Domina Observatory) and international sources (Eurostat, PHS Employment Monitor). The two sectors identified for the project cover care and assistance in public and private residential settings (NACE 87) and care and assistance in the domestic environment (NACE 97). As also reported by the interviewees, in Italy, the level of formal and substantive integration between these two care sector realities is low, meaning they have their own specificities. For the interview section, four representatives from the domestic sector (NACE 97) were identified, which is why the analyses in this report specifically refer to this segment. The individuals identified belong to national trade union (R1) and employer (R2, R3, R4) associations.

II. Sector identification and trends

The sector broadly referred to as “care” is highly diverse in its composition. The NACE codes considered in this context encompass two major areas of activity: direct care for non-self-sufficient individuals and general care for the domestic environment. According to Eurostat data for 2023, the residential care sector (NACE 87) employs 296,800 workers (15-64 years old), 79% of whom are women, while the domestic work sector (NACE 97) employs 553,500 workers (15-64 years old), 87% of whom are women, amounting to a total of nearly one million individuals. In Italy, domestic work is still distinct from care services offered in facilities such as nursing homes (RSA), whereas in other countries, there is greater integration.

Examining employment trends over the past decade (2013–2023), a significant decline can be observed, particularly in the domestic work sector, with over 200,000 fewer workers compared to 2015. In a country like Italy, this figure must absolutely be interpreted considering the high prevalence of undeclared work. According to

estimates reported in the 2023 Domina Observatory Report on domestic work, Italy is home to nearly one million irregular workers.

«In our view, we are talking about 2,200,000 workers, including the 833,000 registered with INPS [considering the absolute number of workers who have been employed at least once during the year] and those working undeclared, whose numbers have increased by approximately 143,000 over the past two years. This indicates that it is an extremely significant sector within the broader subordinate labour market, accounting for between 7.5% and 8% of the total workforce, including public administration» [R1].

An interesting insight concerns the age distribution of these workers: in both sectors corresponding to the NACE codes under consideration, most workers are aged between 40 and 64, with only a small proportion falling within the 15–39 age range. Specifically, 82% of domestic workers and 68% of residential care workers are over 40 years old. The domestic care sector shows particularly notable data: over the last 10 years, the total number of workers under 39 has decreased from 228,200 to 99,100. This data is particularly significant in a country like Italy, which has a high average age and an increasing demand for household care services. The generational turnover among workers in this sector thus becomes a priority issue, as highlighted in the Personal & Household Services Employment Monitor (EFFAT et. al, 2024).

Another significant aspect to contextualize the care sector in Italy concerns the composition of the workforce. As previously highlighted, the prevalence of women reaches very high percentages, accounting for approximately 84% overall, according to Eurostat (2023). In addition to the gender component, there is an ethnic dimension: according to the Domina Observatory, 69.5% of regular workers in the domestic sector are foreigners, predominantly Romanians (21.1%), Ukrainians (14.7%), and Filipinos (10.6%) (2023).

The highest prevalence of foreign domestic workers is observed particularly in regions where female employment rates are higher, above 60%, according to Istat (2024): Lombardy, with a female employment rate of 61.9% and a proportion of foreign workers at 90.6%; Emilia-Romagna, with a female employment rate of 64.4% and a proportion of foreign workers at 90.5%; and Veneto, with a female employment rate of 62.8% and a proportion of foreign workers at 73.2%.

«The main ongoing trends are the difficulty in finding workers, the implementation of training and certification programs, and the initiation of a new phase in immigration management» [R1].



III. Current state of collective bargaining

In Italy, the primary national collective labor agreement (CCNL) governing domestic work is the one signed by Fidaldo (Italian Federation of Domestic Employers, which includes Assindatcolf, Nuova Collaborazione, ADLD, ADLC) and Domina (National Association of Families as Domestic Employers) on behalf of employers and by Filcams Cgil, Fisascat Cisl, Uiltucs, and Federcolf on behalf of workers' unions. This agreement applies to family assistants (housekeepers, caregivers, babysitters, and similar professional profiles) of Italian, non-Italian, and stateless nationality, who are engaged in supporting family life and structured family cohabitations (Armaroli et al., 2023).

However, there are other CCNLs signed by smaller unions and entrepreneurial associations that are not part of the major representative confederations, amounting to a total of 34 CCNLs filed in the CNEL (National Council for Economy and Labor) database. There is no official data on the number of companies and workers covered by these agreements. In Italy, the main statistical source relies on the so-called UNIEMENS data flows, which are monthly contribution declarations submitted by employers to INPS (National Institute of Social Security) for each worker. For domestic work, however, these data are not available, as information on companies and workers is transmitted to INPS primarily through data flows other than UNIEMENS.

It is possible, however, to produce an estimate based on the number of workers identified by INPS Observatory. For regular workers, this amounts to an annual average of about 600,000 workers, corresponding to 1 million families as regular employers, according to the Domina Observatory (2023).

«Many of the agreements filed with CNEL are outdated, meaning they are no longer actively negotiated, and almost all, except for four or five, are signed by little-known union and employer associations. Our contract, based on direct adherence and practical application, is estimated to cover 95% of regular employment relationships» [R1].

As for decentralized collective bargaining, there are no significant experiences in the domestic sector, as workers are almost exclusively employed directly by families.

«An important point to note is that only national-level bargaining exists. Regional, territorial, or company-level bargaining does not exist. What could be considered "company-level" bargaining are the "ad personam" negotiations, in the sense that a family typically employs only one worker. This type of negotiation mainly concerns additional pay above the minimum or specific aspects of job execution, but it rarely delves into details such as extra leave allowances or welfare provisions» [R1].

Regarding care work performed within residential facilities, the collective agreements filed with CNEL are significantly more numerous, totaling 199. However, even in this

case, only a small portion are signed by the main union and employer representatives. Specifically, the national collective labor agreement (CCNL) titled "Socio-assistential/healthcare and educational" (Armaroli et al., 2023) is signed by Uneba on the employer side and by Fisascat Cisl, Fp Cgil, Cisl Fp, Uiltucs, and Uil Fpl on the union side. This agreement applies to 128,973 workers, although it also extends to other sectors related, albeit not identical to the one considered here (NACE 87). This agreement covers all workers operating in the field of socio-healthcare assistance within associations, foundations, other organized initiatives, and assistance and charity organizations. Also noteworthy is the CCNL for Social Cooperatives, which covers over 400,000 workers but, in addition to the socio-assistential and socio-healthcare residential sector, encompasses many other sectors.

The social partners involved in regulating the domestic sector have remained the same since 1974, when the first contract was signed, both on the employers' and unions' sides. However, there have been some significant changes over the last ten years, such as the introduction of leave for women who are victims of gender-based violence and allowances to encourage professional training. Additionally, bilateral bodies have been established to address aspects that are not currently overseen by institutions, such as continuous training.

IV. Challenges to collective bargaining

The main issue characterizing the sector is the **high prevalence of undeclared work**, which is estimated to involve around 50% of the total workforce employed.

«In domestic work, irregularity is often perceived as justified and accepted, without being subject to strong social condemnation. In practice, there is no real possibility of conducting inspections within private homes, which facilitates the spread of irregular work. Moreover, regular employment is not adequately valued: there is a lack of awareness campaigns or positive actions to encourage and promote it». [R2]

Irregularity is often linked to a second critical challenge for the sector: the **integration of migrant workers** who, as noted, make up a significant portion of the care workforce. Migrant workers are at greater risk of being condemned to invisibility, as the closed nature of the domestic environment is compounded by potential invisibility to the state, tied to their undocumented status.

In recent years, there has been a noticeable trend of a reduction in the proportion of regular workers, alongside an estimated increase in irregular workers especially among migrant workers. Around the time of amnesties, the number of regular workers rises, mainly to obtain residence permits, only to fall back into irregularity afterward.

The third challenge concerns the **accessibility of workers** who, in this case, unlike most

sectors in the market, do not share a physical workplace. In this sense, the work of social partners becomes more complicated, as they must find alternative spaces to engage with workers.

«We have two ways to connect with workers, especially foreign ones: we try to reach out to them on their days off, with the support of people who speak their language and can serve as a linguistic and cultural bridge; or during a union dispute, although in this second case, the situation is already clearly compromised. For Italian workers, it is more complex because, having their own networks rooted in the local area, they are less inclined to meet in public spaces, as is common within foreign worker communities». [R2]

The third central challenge for the care sector concerns **gender segregation**: women workers make up most of the workforce, although in recent years there has been a slight increase in the male component, especially among foreigners. The predominance of female workers, combined with the widespread phenomenon of involuntary part-time work, forces many workers into a condition of economic dependency.

The fourth challenge concerns a **peculiarity of care work, namely the fact that employers are not companies but families**. This brings with it certain critical issues that social partners need to address. First and foremost, employers' associations must work to help families understand that they are employers, even if they do not generate profits, and as a result, they have obligations and responsibilities toward their workers. Then there is the issue of wages: since families directly employ workers, it is much more complex to envision a regulation that establishes a minimum wage without severely compromising their ability to afford the costs.

«For example, the cost of a live-in caregiver is very high: approximately €18,000 per year. This represents a significant burden for families, while workers receive an average salary of about €1,400 per month, despite often working long hours and constantly living in the household.» [R4]

For the social partners, the **priority issues to address are**:

- **Tackling undeclared work.** This could be done through actions aimed at informing workers about the rights that a formal contract can guarantee them; raising awareness among families—who, in turn, would benefit from greater protections by hiring workers legally—; advocacy efforts directed at institutions. These should intervene, primarily at the central level, to promote and incentivize formal employment in the sector, including through tax breaks and financial incentives for families operating within the legal framework.
- **Improving the conditions of migrant workers.** Given the strong connection between irregular work and migratory status, social partners are also called upon to commit to revising the main current hiring model for foreign workers in the care

sector, known as the “click day.” According to the social partners, this model is inadequate for two main reasons: it forces families to apply to hire individuals who are not yet physically in Italy and whom they have therefore never met; and it primarily benefits workers already active in Italy, allowing them to transition from irregular to regular status, without effectively facilitating the entry of new workers to address the actual needs for care and assistance.

- **Managing the aging workforce.** The average age of workers in the sector is increasing, which means defining strategies to address the greater fragility of workers without burdening families. For the same reason, it is necessary to intervene in the sector to make it more attractive and allow for greater generational turnover of workers, especially in a country like Italy, where the population is aging, and birth rates remain low.

V. Towards Smart Bargaining

The main objective of smart bargaining in the sector is to extend contract coverage and involve a much higher number of workers, especially by addressing those who are still in an irregular situation.

«In this sense, raising awareness is essential. Trade unions should inform workers about the benefits of regularization, while employers' associations need to make employers understand the risks of undeclared work. Regularizing labor not only guarantees rights to workers but also protects employers from potential disputes or legal issues». [R3]

For this to be made possible, however, a preliminary intervention by the State is necessary, at the central level, to promote regular employment through measures such as reduction of labor cost, for example through the deductibility for families of the cost of care and assistance work.

«The State should support families with a subsidy that fully or partially covers the costs of regular labor, making it more affordable than irregular work. This could range between 2,000 and 4,000 euros depending on the hours worked and the family income. Such a measure would significantly reduce undeclared work». [R4]

According to the social partners, lawmakers are still seen as victims of a very 20th-century conception of domestic work, viewing it as an elitist service. However, today, the predominant tasks are the care of fragile, dependent individuals, rather than the care of the domestic environment. There are clear trends in the Italian population that significantly impact the domestic labor market. Among these, the aging population and the increase in diagnoses of autism in minors can be mentioned. These trends increase



the needs of families.

«While in the 1960s-1970s there was a clear prevalence of domestic workers, waiters, or similar jobs, depending on social class, as domestic work originating in bourgeois contexts, since the 1990s, care work has become predominant. This is an important trend to reflect on and one that the State must take responsibility for». [R1]

Furthermore, government intervention would be essential to regulate hiring through platforms. In this sense, tools to track and regularize employment relationships, thus ensuring greater transparency, would be fundamental in a sector where factors compromising transparency are already numerous. Such a central action would allow social partners to reach more workers, thanks to a broader contractual coverage.

Finally, to make regular work more attractive and thus increase contractual coverage, in addition to incentives for families, measures are needed to improve workers' conditions, both in terms of wages and protections. Given the prevalence of female workers, a central issue is maternity, to ensure that the worker receives a dignified financial allowance while also providing the family with support during the leave period.

VI. European Perspectives

In Italy, the European directive on the minimum wage has had no effect because such a measure is inapplicable in a context where employers are primarily families. For this reason, the proposed national minimum wage measures explicitly excluded this sector. According to the social partners, at the national level, the way to ensure better working conditions for workers in this sector is through state intervention, in the form of tax relief for families.

However, the dialogue between social partners at the European level is perceived as constructive by both workers' and employers' representatives in Italy, particularly regarding the opportunity to exchange experiences and best practices. At the same time, it is highlighted that this sector is particularly subject to the peculiarities of the national system, especially regarding the setup of public and private welfare.

"The exchange of experiences and best practices is crucial for improvement. However, each country must start from its own specificities. For example, we cannot simply copy the Belgian or Swedish system: we must adapt good practices to our own characteristics". [R4]

At the European level, one of the most representative institutions is EFSI (European Federation for Services to Individuals), which deals with collective bargaining in the domestic sector and develops common solutions to improve working conditions across Europe. EFSI is also one of the signatories of the joint declaration published in October

2024, along with EFFAT, EFFE, and UNI Europa, regarding the shortage of workers and skills in the Personal and Household Services sector (PHS). This document represents an important signal of the social partners' interest in identifying common strategies for the recognition and enhancement of the work carried out in this sector, with the formal and substantial support of institutions at the European level.

The main difficulty in this regard, however, is the extreme heterogeneity of collective bargaining and the systems for managing care work at the national level. In many countries, there is no well-structured employer counterpart, making it difficult to sign collective agreements.

«We look to Europe, but our country is an anomaly: we are the only state with a national collective agreement that regulates domestic work. Elsewhere, these needs are addressed through social cooperatives and incentives, but here, we lack a similar policy». [R2]

«On a political level, labor matters are not delegated to the European Union, so Europe does not have the power to legislate directly on these issues». [R1]

VII. Conclusions

In conclusion, the care sector in Italy faces numerous challenges. Its late entry into the market, compared to other services, places it in a complex transitional phase where social partners are called upon to make significant efforts to achieve proper recognition of care work. While the main collective agreement, at least in the domestic sector, is applied to nearly all workers, according to partners estimates, irregular work remains widespread, leaving most workers in precarious conditions without adequate protections.

The care sector represents a particularly complex terrain for social partners, as it intersects with various critical issues: the unique nature of the parties involved in the employment relationship (on one side, the worker, and on the other, a family); the high proportion of migrant workers, which can lead to greater challenges in regularization and barriers in engagement and information dissemination; and the extreme heterogeneity of the care sector, which, in addition to the domestic context, includes professionals working in public or private facilities. These workers have diverse professional trajectories, leading to highly varied needs and demands.

However, the main issue that emerges across the board, including from the responses provided by stakeholders interviewed as part of the project, is the lack of recognition—both in formal and legislative terms, as well as regarding the social value of this sector. In this context, the work of social partners is essential on several fronts: 1) to help better identify who the workers in the care sector are, what differentiates them from family caregivers, and what skills they possess or need to develop; 2) To bring into the public

and institutional debate the demands of a significant portion of workers (currently around 2 million, but inevitably expected to grow), who are advocating for dignified, recognized, and fairly compensated work; 3) To interpret and respond to the needs of a growing number of individuals and families, for whom care services are increasingly unaffordable, yet essential to leading a dignified life.

References

Armaroli I., et al. (2023). Atlante della contrattazione collettiva. La Geografia dei mercati del lavoro nel prisma della rappresentanza e delle relazioni industriali, ADAPT University Press.

ADAPT (2024). La contrattazione collettiva in Italia (2023). X Rapporto ADAPT, ADAPT University Press, 2024.

CNEL (2024). Archivio dei contratti collettivi nazionali di lavoro depositati al CNEL ex legge n. 936 del 1986 <<https://www.cnel.it/Archivio-Contratti-Collettivi/Archivio-Nazionale-dei-contratti-e-degli-accordi-collettivi-di-lavoro>>

Eurostat (2025). Employment by sex, age and detailed economic activity <https://ec.europa.eu/eurostat/databrowser/view/lfsa_egan22d_custom_13821656/default/table?lang=en>

ISTAT (2023). Le strutture residenziali socio-assistenziali e socio-sanitarie <<https://www.istat.it/comunicato-stampa/le-strutture-residenziali-socio-assistenziali-e-socio-sanitarie-anno-2021/>>

Osservatorio Domina (2023). Quinto Rapporto annuale sul settore domestico <https://www.osservatoriolavorodomestico.it/documenti/rapporto_annuale_2023.pdf>

EFFAT et al. (2024). Personal & Household Services Employment Monitor <<https://effat.org/wp-content/uploads/2024/05/PHS-Employment-Monitor-Report-Final-170524.pdf>>