

En Route to Recovery (ER2R):

Diversity and vulnerability in care work during and after the COVID-19 pandemic

This Trans-Atlantic Partnership grant involved collaboration between teams in the UK, Finland, South Africa and Canada examining the experiences of care workers during and after the Covid pandemic.

By using qualitative methods to carry out case studies of paid care workers in each country, we found similarities between the experiences of care workers of differing types in contrasting socio-economic environments.

Shared characteristics of the care workforce in 4 countries

Covid created further difficulties and temporary popular support for carers, but there has not been subsequent positive change

Strongly feminised

Low paid

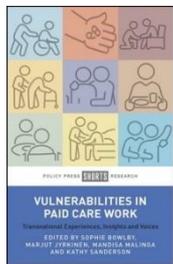
Low social status

Strong commitment to caring for their clients.

Poor career opportunities

Poor recruitment and retention

Racial discrimination



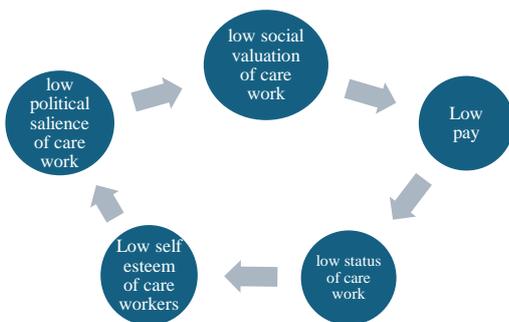
Bowlby, S., Jyrkinen, M., Malinga M. and Sanderson, K. (Eds.) (2025) *Vulnerabilities in Paid Care Work: Transnational Experiences, Insights and Voices*, Policy Press, Bristol University Press.

This book brings together insights from each country's team which are linked together through an introductory conceptual chapter and a concluding chapter on 'Reconceptualising precarity and agency: new ways forward'. Key elements are: summarised below.

UK Team

24 interviews with care workers, managers, owners, policy stakeholders & local authorities.

Negative relationships of value in English domiciliary care



These relationships lead to difficulties in recruitment and retention and limited investment.

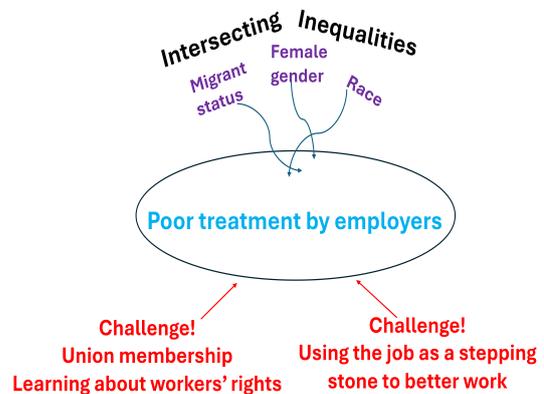
We identified a key need for employers to focus on **retention** to lower high workforce turnover & vacancy rates & improve recruitment.

We found that retention can be improved through **no cost or low-cost initiatives**: *support with wellbeing and mental health, financial and non-financial incentives, co-designing interventions with staff, management recognition of jobs well done.*

When care workers feel seen, supported and heard they stay longer and care better.

South African Team

Semi-structured interviews and photovoice discussion with 7 migrant female domestic workers



A worker who joined a union: *"I told them I'm going to give you your keys. I can no longer work for you because of this [...] that's when they started to treat me like a human being. Because it was awful working for them."*

"Yes, so I've been thinking, right [...] I want to go for a massage therapist course".

"Being a domestic worker, it's just a step ladder that I have to climb to do something else".

To create change, enforcement of legislation & more care workers knowing their rights is needed.

Canadian Team

Semi-structured interviews with 15 personal service workers (PSWs) with 10 – 30 years of experience as care workers.

Why did workers stay so long in a job that is precarious, badly paid, offers minimal career progression, has low social status and in which turnover rates exceed 50%?

Key Retention Factors

1. Satisfaction from high **autonomy** on the job (minimal supervision) and low accountability (ability to tailor care to clients): *“You just try to do that little extra for them. It’s like ‘Oh can you pick me up a loaf of bread?’”*
2. Emotional fulfilment from **vulnerable** clients: *“I have a few clients that I’m the only person they see [...] So when I’m able to make that connection [...] that’s probably the most rewarding part of the job”.*
3. Identity linked to **excelling** with difficult clients: *“Being able to handle people who have special needs and who get aggressive [...] it’s something I’ve always been able to kind of learn how to do in a professional manner”.*
4. **High barriers to exit** - poor qualifications and commitment to clients: *“I do want to quit – I’d quit in a heartbeat – But it’s the clients that keep me there”.*

Care workers lack power within care organisations and as a group within health care. Power differentials between frontline workers and decision makers limit their political voice.

Dependency and blurred professional boundaries are not ideal reasons for career longevity.

Recognise care workers’ contributions. Make systemic changes to improve working conditions, enhance career prospects and mitigate social inequalities.

Finnish Team

Use of survey of 325 LGBT workers; 4 online narratives from LGBT care workers; online interviews with 23 LGBT activists; photovoice with 8 migrant care workers.

Finland has high welfare & living standards but care workers are poorly paid relative to the norm. There are good legal protections against discrimination, homophobia and racism, yet many problems in practice.

The researchers asked LGBT and migrant care workers about their experiences during and after Covid including experiences of discrimination.

Discrimination

Some LGBT workers felt that irrespective of Covid they always had to hide their identities: *“I rarely reveal my sexual orientation to a client [...] I know the fear is probably unwarranted but that is how I feel”.*

Some LGBT & migrant workers did not feel able to challenge discriminatory attitudes at work. *“I had just started at the workplace, [...] I was afraid that I would be labelled as a difficult employee”.*
“In many workplaces I have been in, I have encountered racism, homophobia and transphobia in general coffee table discussions”.

Experiences of Covid

Work became physically harder with staff absences & infection protection procedures and time shortages. For some the crisis meant workers felt more included and respected. But one said people felt that *“there is no need to deal with the issues and problems of the LGBT+ community right now”*

Some migrant workers reported a choice of where to work in a situation of worker shortage.

Despite good legal protections, homo- /transphobic and racist attitudes are prevalent. This results in subtle and indirect discrimination. Broad changes in societal attitudes are needed.

Examples of impacts and plans for further research

- The South African team collaborated with the *South African and Domestic Services and Allied Workers Union* and mounted an exhibition of the photos taken by their interviewees to raise awareness of domestic workers’ everyday lives.
- The UK team gained two *Impact Grants* from Kings College in conjunction with the project *Healthier Working Lives for Care Workers* (led by Professor Linda McKie) to publicise their findings on promoting **retention** through no cost or low-cost initiatives: **Care Stories**: On-line briefing paper sent to care workers’ representative organisations (March 2025) and a **1-Day Workshop** with representatives of Care Businesses, Commissioners, Charities and Policy Makers (March 2025).
- Each team is planning further publications in academic journals.
- Sanderson & Bawn from the Canadian and British teams have a British Academy grant (KF8\230185) to explore similar issues with low paid female workers in other sectors.
- We have extended the research network built through our TA-P funded research to include German and Dutch researchers and will explore further research on care worker retention and AI/digitisation innovations with them at an in-person workshop (June 2025).