



Key Insights from the first LeTs-Care "Policy Lab" on Care Work in Long-Term Care



[Lets-Care project](#)

October 2025

The Policy Lab that [REVES - EUROPEAN NETWORK OF CITIES AND REGIONS FOR THE SOCIAL ECONOMY](#) and [Università Ca' Foscari Venezia](#) organised on September 25th, 2025 brought together remarkable voices from across Europe. Speakers and contributors from the [European Commission](#) (DG EMPL - Social Protection Unit), [COFACE Families Europe](#), [CECOP](#), the [European Economic and Social Committee](#), municipalities, and social enterprises tackled one of our most pressing challenges: the **future of long-term care work**.

What the research reveals

Drawing on extensive research across 7 EU countries (Italy, Austria, Denmark, Lithuania, Portugal, Spain, and the Netherlands), the [Lets-Care project](#) confirms what many practitioners already know: **Europe's care workforce is highly fragmented**. There is no single, unified concept of what constitutes LTC work. Instead, we face a multi-tiered system stratified by professional roles, qualifications, employment arrangements, and governance structures.

This segmentation creates deep inequalities, in terms of recognition, pay, working conditions, and training opportunities. The divides run multiple ways: between health and social care sectors, between public and private providers, and between central and local governance levels.

The convergence with EU priorities

While the #EUCareStrategy (2022) rightly emphasizes improving working conditions, supporting work-life balance, and ensuring equitable access to quality services, our discussions highlighted a critical tension: **care investment must now compete within a shifting EU budget increasingly focused on competitiveness** (as outlined in the Draghi Report) and, recently, on **defense**, too.

Innovation in LTC will need to achieve more with potentially less.



UNIVERSITEIT VAN AMSTERDAM



Roskilde Universitet



Funded by the European Union

Pathways forward

The Policy Lab identified several promising approaches that can help navigate resource constraints while improving care quality:

Refining procurement mechanisms. The traditional focus on lowest price has often undermined care quality and worker conditions. By redesigning public procurement to prioritize quality criteria, compliance with labour laws, and social value, we can create a race to the top rather than to the bottom. This means evaluating bids based on training commitments, staff retention rates, working conditions, and service outcomes, not just cost.

Co-design and joint partnerships. Moving from top-down service provision to collaborative models where public authorities, care providers, social enterprises and communities work together. These co-design processes start with identifying genuine local needs, then collectively designing and delivering services that respond to those needs. Examples like the [Social Enterprise Exchange](#) initiative in the Irish Midlands demonstrate how local innovation can address systemic challenges.

Formalizing and supporting the informal care ecosystem. This requires a dual approach:

- For **family carers**, policies that enable genuine work-life balance, including care leave provisions, flexible working arrangements, and respite services
- For **informal care workers**, creating clear qualification pathways, ensuring proper employment contracts, and bringing shadow care work into the formal economy with adequate protections

Financial instrument innovation: In an era of tightening budgets, we need creative approaches to funding, including blended finance models, social impact bonds, and cross-sectoral funding mechanisms that recognize care as infrastructure, not just expenditure.

The bottom line

As demographic aging accelerates and care needs grow, we cannot afford a fragmented approach. Workforce planning, policy harmonization, and cross-sectoral coordination become prerequisites for dignified, sustainable care.

The question is not whether we can afford to invest in care work. It is whether we can afford not to.