Social dialogue in welfare services

Employment relations, labour market and social actors in the care services

Project financed by the European Commission

DG Employment, Social Inclusion & Affairs

Agreement number VS/2020/0242

NATIONAL REPORT for WP1/WP2 (Part I) and WP3 (Part II):

Country Study Germany

Karin Gottschall and Ruth Abramowski

Please note: Due to the Pandemic access to information by experts for the WP1 and WP 2 topics was difficult and often restricted to online interviews, affecting the respective report in part I. Since conditions for research for WP3 have been more relaxed, part II of this document tries to compensate for the sometimes less exhaustive account in the previous part by updated and richer information on the framework conditions of the two fields.

Contents

List of tables Part I **5**

List of figures Part I **5**

List of tables Part II (in the appendix of Part II) **5**

Abstract Part I **6**

Reading Advice Part I **7**

Part I – Country Study Germany: NATIONAL REPORT for WP1/WP2

I.1 The labour market in Germany **7**

I.1.1 The main characteristics of the labour market at the national level in the public and private sector 7

I.1.2 The main characteristics and structure of the labour market, at the national level, in the ECEC and LTC sectors 11

I.1.3 Employment in the ECEC and LTC services: structure and features from a diachronic perspective 14

I.2 The ECEC and LTC services in Germany **18**

I.2.1 Presentation of the LTC and ECEC system in the country, differentiating between the two sectors 18

I.2.1.1 Governance of the ECEC services: general characteristics, relevant legislations, levels of governments responsible 18

I.2.1.2 ECEC through service provision (list of services provided, their definition, service coverage, service quality), social transfers and tax incentives and expenditure 20

I.2.1.3 Governance of the LTC services: general characteristics, relevant legislations, levels of governments responsible 22

I.2.1.4 LTC through service provision: list of services provided, their definition, service coverage, service quality 23

I.2.1.5 LTC through social transfers and tax incentives (if present): definitions, coverage, expenditure 24

(I.2.2 Expenditure for the ECEC and LTC services: public and private shares)[1]

(I.2.3 Presentation of the main service providers: characteristics (public/private, organised/ individual, for profit/non-profit), share of services provided by each type of provider, main transformations in the provision in a diachronic perspective)

I.3 The employment relations system in Germany **26**

I.3.1 The main general characteristics of the employment relations at the national level 26

I.3.2 The main characteristics and structure of the employment relations in the ECEC and LTC sectors 27

I.4 The working conditions in the ECEC and LTC services in Germany **30**

I.4.1 Regulation of terms and conditions of employment in the two subsectors: main collective agreements applied and relevant legislation 30

I.4.2 Working conditions in the ECEC and LTC services 31

[1] Subchapters I.2.2 and I.2.3 are eliminated as the respective information is included in the previous subchapters, see reading advice Part I and footnote 6.

I.5 The actors of the employment relations in the ECEC and LTC services in Germany 34

I.5.1 Presentation of the main actors, characteristics, relevance in the employment relations system, power 34
I.5.2 Role played by the actors, organisational dilemmas and strategies 36
I.5.3 Visual map of the actors and relationships among them 37

I.6 Conclusions and problems identified by research 37

References Part I 39

Appendix Part I: List of interviewees (organisation, role level) 44

Part II – Country Study Germany: REPORT for WP3: Local Case Studies

II.1 Introduction[2] 46

II.2 Case 1 ECEC: Staffing levels and staff composition 48

II.2.1 The case study: the context, service governance and employment relations at the local level 48
II.2.2 The issue – subcase a): City of Bremen – tripartite dialogue for decent work in childcare (*Gute Arbeit in Kitas*) 52
II.2.3 The process 52
II.2.4 The solution 53
II.2.5 Success factors 53
II.2.6 Subcase b): Better staffing (*Index-Kitas*) 54

II.3 Case 2 ECEC: Reform of training: practice-oriented training and remuneration 55

II.3.1 The case study: the context, service governance and employment relations at the local level 55
II.3.2 The issue: subcase a) Practice-oriented training – PiA project 56
II.3.3 The process and solution 57
II.3.4 Success factors and limitations 57
II.3.5 Subcase b): Measures for remuneration in school-based training and on-the-job training 58

II.4 Case 3 LTC: The role of Christian and other non-profit providers in collective bargaining 59

II.4.1 The case study: the context, service governance and employment relations at the local level 59
II.4.2 The case study: the issue 61
II.4.3 Subcase Bremen 61
II.4.3.1 Subcase Bremen: The issue 61
II.4.3.2 Subcase Bremen: Initial positions of the social, public and other relevant actors on the issue 62
II.4.3.3 Subcase Bremen: The process 63
II.4.3.4 Subcase Bremen: The solution 63
II.4.4 Subcase Hessen 63
II.4.4.1 Subcase Hessen: The issue 63
II.4.4.2 Subcase Hessen: Initial positions of the social, public and other relevant actors on the issue 64

[2] Please note: For a more efficient presentation of the case studies, the predefined structure of chapters II.2–II.5 has been modified slightly.

II.4.4.3 Subcase Hessen: The process 64
II.4.4.4 Subcase Hessen: The solution 64
II.4.5 The implementation in Bremen and Hessen 64

II.5 Case 4 LTC: The role of private providers 65

II.5.1 The case study: the context, service governance and employment relations at the local level 65
II.5.2 The case study: The issue 66
II.5.3 Subcase Korian and ver.di 67
II.5.3.1 Subcase Korian and ver.di: The issue 67
II.5.3.2 Subcase Korian and ver.di: Initial positions of the social, public and other relevant actors on the issue 67
II.5.3.3 Subcase Korian and ver.di: The process 67
II.5.3.4 Subcase Korian and ver.di: The solution 68
II.5.4 Subcase ABVP and GÖD 68
II.5.4.1 Subcase ABVP and GÖD: The issue 68
II.5.4.2 Subcase ABVP and GÖD: Initial positions of the social, public and other relevant actors on the issue 68
II.5.4.3 Subcase ABVP and GÖD: The process 69
II.5.4.4 Subcase ABVP and GÖD: The solution 69
II.5.5 The implementation of both subcases 69

II.6 Comparing the four cases. What we can learn from the case studies 70

II.6.1 Key factors for success, challenges, and obstacles in the four cases 70
II.6.2 Sectoral similarities and differences: are sectoral differences important? 71
II.6.3 Lessons from the local case studies 72

References Part II 72

Appendix Part II: List of interviewees (organisation, role, level) 76

List of tables Part I

Table 1: Employment in Germany by type of employment, results of the microcensus, in 1,000
Table 2: Unemployment in German labour market, Years 2010, 2019 and 2020, Data of the Federal Statistical Office, in 1,000
Table 3: Public sector employment in Germany, 2013 and 2018 (%)
Table 4: Staff in care homes and homecare services, 2009–2019
Table 5: Attendance rates of children in daycare in 2008 and 2020
Table 6: Residential care home providers, 2007–2019
Table 7: Homecare service providers, 2007–2019
Table 8: Expenditures on LTC, 2018
Table 9: ver.di members, 2010–2019
Table 10: Staffing ratios in daycare centres for groups with children under 3 years, 2012–2020

List of figures Part I

Figure 1: People in need of long-term care, by type of care, in 2019 in per cent (in total 4.1 million)
Figure 2: Employment in ECEC, 2008–2020
Figure 3: Staff in care homes, differentiated by sex, 2007–2019
Figure 4: Staff in homecare services, differentiated by sex, 2007–2019
Figure 5: Staff in homecare services, differentiated by types of providers, 2007–2019
Figure 6: Unmet demand regarding hours per week and places of childcare services reported by families for children in age groups 1-2 years, 3 years until school age and primary school children in 2019 (%)
Figure 7: Gross expenditure on public children and youth welfare, Billion euros
Figure 8: Employment relations and collective agreement in Germany
Figure 9: The actors of the employment relations field in the LTC sector in Germany: Trade unions and employers' associations, represented according to their quantitative relevance

List of tables Part II (in the appendix of Part II)

Table A1: List of interviewees (organisation, role, level)
Table A2: Number of homecare service providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider
Table A3: Residential care home providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider
Table A4: People in need of care served by homecare service providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider
Table A5: People in need of care in residential care homes in the German federal states in 1999, 2005, 2011 and 2017
Table A6: Staff in homecare services in the German federal states in 2017
Table A7: Staff in care homes in the German federal states in 2017
Table A8: Overview 6.1: Comparing the four cases

Part I – Country Study Germany: NATIONAL REPORT for WP1/WP2[3]

ABSTRACT Part I

The project "SOWELL – Social dialogue in welfare services. Employment relations, labour market and social actors in the care services" focuses on working conditions, employment relations, and social partners' strategies in the area of care services (early childhood education (ECEC) and long-term care (LTC)) in Denmark, Italy, Germany, the Netherlands, Slovakia, and Spain. The project aims at disentangling how the different countries have solved the quadrilemma between public budget constraints, job quality, service coverage, and quality of services by responding to and by accommodating within their own national-specific institutional context in the two sub-segments of the care sector. As a part of this project, the following national report is based on a German case study of work packages WP1 and WP2. The aim of WP1 is the systematic mapping of the characteristics and main transformations of the labour market in Germany, focusing on both the demand side, by looking at the workforce, and the supply side, by looking at the service providers. Hence, WP1 provides an in-depth investigation of the country-specific structure and the characteristics of the labour market in general as a background and, specifically, in the care sector (ECEC and LTC) and how these have changed over time, following up the economic crisis of 2008–09. Furthermore, the structure and characteristics of the service provision in ECEC and LTC are investigated. While WP 1 focuses on the labour market, WP2 aims to provide, at the national level, a framework of work and employment covering three domains: first, the main characteristics of the employment relations system and social dialogue institutions in the public sector; second, wages and working conditions in the ECEC and LTC services, and third, a map of all the actors involved both on the union and on the employer side.
The results of this report are based on desk research and on a multi-method approach, combining qualitative and quantitative investigation. The qualitative analysis includes semi-structured qualitative interviews at national level with care experts, social partners, and state representatives dealing with the care sector. The data basis for the quantitative part of the analysis are national sources such as national statistics and administrative data from ministries.

[3] Our special gratitude goes to Nele Schmöckel, Jennie Auffenberg, Silke Birkenstock, Kristin Noack, Eva Quante-Brandt, and the interviewed experts for their helpful support and profound expertise.

Reading advice Part I

Please note: We slightly changed the prescribed *structure of the report* for the following reasons.
First, we had to account for the systematic differences in governance and finance between the field of ECEC and LTC in Germany. While LTC is integrated into the German Social Security Insurance System and thus regulated by central law and financed by employee and employer contributions, child care services are mainly governed on the regional level and are tax financed. Nevertheless, the provision of both services is characterised by the subisidiarity principle which implies a preference for provision within the family and non-profit service providers instead of the state and governance on the regional/local level. Therefore, in section I.2.1 we decided for a separate but coherent description of each field including all dimensions instead of alternating between the fields by dimensions.
Second, as understanding structures of the current state of each field often implies giving information on the development and dynamics of the field over time, we did not always follow the suggested separation of a synchronic and diachronic perspective, but in section I.2 integrated both when we saw fit.
Finally, we tried to avoid repetition and cancelled subchapters I.2.2 and I.2.3 as the respective information is included in earlier subchapters.

I.1 The labour market in Germany

I.1.1 The main characteristics of the labour market at the national level in the public and private sector

Overview of the German labour market (2008–2020)

In Germany, roughly 36.6 million people were in employment in 2020 (Destatis 2021a). According to calculations based on the Federal Statistical Office, the unemployment rate was 3.6 per cent in 2020 (Destatis 2021b). Compared with 2008, there was an increase in total employment (including self-employed, standard and atypical employment) from 34.91 (2008) to 36.57 million (2020) persons (aged 15 to 64 years) (see table 1). This increase is mainly based on an increase in standard employment (employees subject to social insurance contribution and a working time of more than 20 hours per week) from 22.98 million to 26.43 million. Especially pronounced is the increase in part-time employment (more than 20 hours per week, but less than 30 hours per week) from 2.4 million (2008) to 4.52 million (2020), and in particular for women from 2.1 million (2008) to 3.6 million (2019)[4]. Standard employment is still the core employment form, however, for women long and especially short part time is more prominent (5.5 million women are working less than 20 hours per week compared to 1.1 million men). The share of persons in atypical employment in total decreased very slightly (from 7.85 million in 2008 to 6.98 million in 2020). In a diachronic perspective and to the background of declining but nevertheless still positive GDP growth rates until 2019 (see OECD macrotrends 1961–2020, OECD 2021), employment in Germany has been quite stable from 2008 onwards, with standard employment at the core and decreasing unemployment rates (see table 2). With regard to gender, women profited from the rise in standard employment mainly by way of part-time employment. As they also predominate in marginal part time as the main atypical employment form, core features of gender segregation, including a concentration of women in the fields of administration, education, health and social services, did not change.

[4] National data on part time of Destatis is based on self-assessment of workers. The OECD defines part time as less than the 30h weekly (https://www.destatis.de/DE/Themen/Arbeit/Arbeitsmarkt/Glossar/teilzeittaetigkeit.html).

Table 1: Employment[1] in Germany by type of employment, results of the microcensus, in 1,000

Year	Total	Self-employed		Wage and salary earners							
				to-gether	persons in standard employment		persons in atypical employment				
							to-gether	viz.[2]			
		to-gether	Incl.: solo self-em-ployed		to-gether	part-time, more than 20 hours/ week		per-sons with fixed-term con-tract	part-time em-ploy-ees	per-sons in mar-ginal em-ploy-ment	tem-porary em-ploy-ees
2008	34,910	3,820	2,103	30,825	22,981	2,382	7,845	2,827	4,920	2,578	636
2009	34,802	3,877	2,137	30,755	23,057	2,486	7,699	2,734	4,915	2,574	560
2010	35,145	3,917	2,169	31,076	23,131	2,571	7,945	2,858	4,942	2,517	743
2011	35,109	3,919	2,192	31,042	23,185	2,615	7,857	2,811	4,965	2,612	746
2012	35,444	3,917	2,189	31,391	23,682	2,729	7,709	2,640	4,937	2,489	717
2013	35,631	3,810	2,091	31,701	24,063	2,873	7,638	2,524	4,969	2,444	679
2014	35,879	3,744	2,047	32,021	24,515	3,226	7,506	2,464	4,868	2,335	666
2015	36,155	3,688	1,991	32,367	24,832	3,410	7,534	2,531	4,844	2,339	666
2016	37,051	3,653	1,989	33,296	25,641	3,597	7,655	2,655	4,807	2,169	737
2017	37,159	3,590	1,944	33,475	25,757	3,671	7,718	2,550	4,788	2,177	932
2018	37,282	3,473	1,874	33,724	26,214	3,847	7,509	2,460	4,644	2,047	925
2019	37,665	3,433	1,805	34,159	26,825	4,102	7,333	2,296	4,650	2,013	853
2020[3]	36,574	3,081	1,615	33,406	26,425	4,521	6,981	2,174	4,409	1,950	641

1 Only persons in employment aged 15 to 64 years, not in education, or training or compulsory military or civilian service or voluntary service.

2 Data can not be summed up as the groups overlap.

3 Information for first results of the microcensus 2020 (only in German). Population in households at their main residence. Comparability of results with those of previous years is limited, but Destatis states that these first results are nevertheless valid (https://www.destatis.de/DE/Themen/Gesellschaft-Umwelt/Bevoelkerung/Haushalte-Familien/Methoden/mikrozensus-2020.html?nn=23096).

Source: Destatis 2021a.

Table 2: Unemployment in German labour market, Years 2010, 2019 and 2020, Data of the Federal Statistical Office, in 1,000

	Labour force[1,2]	Unemployed[2]	Unemployment rate[2] (%)
2010	43,831	2,821	6,4
2019	46,499	1,374	3,0
2020	46,467	1,664	3,6

Unless otherwise stated, all figueres are rounded annual results (Last updates: September 2021)

[1] All residents who are active in the in the labour market (unemployed and persons in employment)

[2]According to the international ILO employment status concept. Rate equals share of the labour force.

Source: Destatis 2021b.

Public sector employment

Following Esping-Andersen's (1990) typology of welfare regimes, conservative welfare regimes take a middle position between social-democratic and liberal regimes as they provide mainly status-based welfare benefits to (male) breadwinners, and restrict public employment by the subsidiarity principle (Gottschall/Tepe 2021; Gottschall/Abramowski 2023). Due to the subsidiarity principle which privileges non-profit actors and families in service provision, the public sector employment share (general government employment as share of total labour force) in Germany (10.6 per cent in 2019) is low compared to Sweden (28.7 per cent in 2019), France (22 per cent), and the UK (16.0 per cent in 2019) (OECD 2021b: 101). In the aftermath of the financial crisis, in 2011–2012, budget deficits and austerity pressure became more and more prevalent. Therefore, annual growth rates of public employment decreased, followed by a rehabilitation in the 2014–2019 period (OECD 2017: 90; OECD 2021b: 101).
A relevant characteristic of the German public sector is the status-based difference between civil servants (*Beamte*) and employees (*Angestellte*). Civil servants obtain more core state positions in the fields of central administration, jurisdiction, police, and education. They are nominated by the state and do not have the right to strike (Bosch 2013: 220-221). In return, civil servants are guaranteed a middle-class standard of living in form of a lifelong tenure, seniority rules in pay and promotion, and pensions safeguarding the previous standard of living. Employees are more represented in regional and local-level infrastructure such as waste collection and public transport and especially in social services. As a contracted workforce, employees have to negotiate pay and working conditions. From the 1960s onwards, the German welfare state became more and more a model employer by weakening the status dualism between civil servants and employees without, however, abolishing the civil servant status. Especially employment security and status-preserving pensions characteristic for the civil servant status were expanded to public employees as they had become the dominant public workforce of the public sector (Gottschall/Tepe 2021; Gottschall/Abramowski 2023). From the 1990s onwards, seniority rules for civil servants were softened by the implementation of performance-related pay components. Even though retrenchment trajectories from the 1990s onwards and in the wake of the financial crisis 2008 affected more public employees than civil servants, the share of public employees is currently still high (61.4 per cent in 2018/2,947,270 in total) (Destatis 2019). Additionally, the share of women in employee positions is 62.9 per cent compared to a proportion of 47.6 per cent of women in civil servant positions (Destatis 2019).

Historically, the integration of women in the public sector has rather been a long way than a smooth path (Gottschall 2009). However, women profited from the the expansion of the public sector during the so-called 'golden age' of the welfare state expansion from the 1960s onwards and the status alignement mentioned above. Meanwhile, the public sector employment share of women is higher than that of men and increases continuously (2008: 52.9 per cent and 2,383,541 in total, 2013: 55.2 per cent and 2,557,053 in total, and 2018: 57.0 per cent and 2,736,620 in total) (Destatis 2009, 2014, 2019). In 2018, women concentrate in the fields of 'education' (65.6 per cent), 'social security, family and youth, labour policy' (77.9 per cent), and 'health' (63.0 per cent); in contrast, 'infrastructure' is a primarily male-dominated field (see table 3).

Additionally, the public sector became a forerunner in gender equality regulations reinforced by law from the 1990s onwards. These regulations encompass the establishment of equality representatives in each organisational unit, equal access and equal pay rules as well as flexible working time allowing for fix-term leaves (for childcare and long-term care, voluntary work, further education), shifts from full time to part-time, and more recently also vice versa.

Public sector employment also differs from the private sector with regard to the pay structure. As many authors confirm there is a public sector pay gap which varies across the earnings distribution (Campos et al. 2017; Tepe et al. 2015; Bosch 2013; Christofides/Michael 2013). Recent studies confirm a stable pattern of a public sector wage premium for low-paid jobs and a public sector wage penalty for high-paid jobs. However, the size of these effects varies between countries and over time. In Germany, the public sector wage

premium for low-paid jobs (the 20 per cent quantile of the wage income distribution) continues to be rather strong (in 2016 about 20 per cent) compared to other OECD countries such as the US, UK, Finland, and Italy (about 5-10 per cent) (Gottschall/Tepe 2021: 485–488). At the same time, the gender pay gap in the public sector tends to be lower than in the private sector at least regarding the lower ranked jobs, as women profit from the wage premium for low-paid jobs as well as from a lower wage penalty for part time jobs and a lower share of poorer paid marginal employment, the so-called mini jobs (Bosch 2013: 238; Gottschall/Tepe 2021: 488).

Regarding career opportunities, the German public sector stands out with highly regulated career paths and pay rules, although performance assessment gained significance in pay and promotion policies in recent years (Gottschall et al. 2015). These features might work in favour of women and indeed, compared to the private sector, women are better represented in management positions in the public sector (Bosch 2013: 226). Nevertheless, the public sector, too shows a persistent gender career gap. The share of women in the higher service track of central government administration in 2019 was as high as 53.7 per cent. At the same time their share in management positions, although increased by 5.5 percentage points compared to 2015 when a quota regulation was introduced (*Führungskräfteförderungsgesetz I*), arrived at 36 per cent only (BMFSFJ 2021a). Hence, a recent follow-up law, the *Führungskräfteförderungsgesetz II* extends the quota for representation of women in public administration management and executive boards of public enterprises (BMFSFJ 2021b; Gottschall/Abramowski 2023).

Table 3: Public sector employment in Germany, 2013 and 2018 (%)

	2013		**2018**	
	Total public sector employment	**Women in public sector employment**	**Total public sector employment**	**Women in public sector employment**
General services (allgemeine Dienste)	1,546,574 (33.4)	661,612 (25.9)	1,595,345 (33.2)	710,875 (26.0)
Education (Bildungswesen, Wissenschaft, Forschung)	1,602,862 (34.6)	1,034,384 (40.5)	1,658,685 (34.5)	1,087,510 (39.7)
Social security, family and youth, labour policy (Soz. Sicherung, Familie und Jugend, Arbeitsmarktpolitik)	749,653 (16.2)	573,924 (22.4)	823,445 (17.1)	641,845 (23.5)
Health (Gesundheit, Umwelt, Sport und Erholung)	249,427 (5.4)	154,851 (6.1)	252,320 (5.3)	158,915 (5.8)
Housing (Wohnungswesen, Städtebau, Raumordnung und kommunale Gemeinschaftsdienste)	133,633 (2.9)	43,557 (1.7)	128,325 (2.7)	45,630 (1.7)
Agriculture and forestry (Ernährung, Landwirtschaft und Forsten)	47,200 (1.0)	15,104 (0.6)	46,070 (1.0)	16,150 (0.6)
Energy (Energie und Wasserwirtschaft, Gewerbe, Dienstleistungen)	149,790 (3.2)	41,389 (1.6)	153,695 (3.2)	43,105 (1.6)
Infrastructure (Verkehr und Nachrichtenwesen)	145,162 (3.1)	27,185 (1.1)	134,765 (2.8)	27,795 (1.0)
Finance (Finanzwirtschaft)	10,942 (0.2)	5,047 (0.2)	10,230 (0.2)	4,795 (0.2)
Total	4,635,243 (100.0)	2,557,053 (100.0)	4,802,880 (100.0)	2,736,620 (100.0)

Source: Destatis 2014, 2019.

To sum up, public sector employment in Germany, although less pronounced than in Scandinavian countries and France, has enhanced labour market integration of women so far. Not only has employment in health, education, social services and administration expanded; the state as employer also provides higher job security, more flexible working time, more favourable career prospects and better wages in the lower strata of the job hierarchy than the private sector. Nevertheless, gender gaps in pay and career are persisting not least due to structural disadvantages in the women dominated social services including an underevaluation of care work. These issues will be addressed in the next sections.

I.1.2 The main characteristics and structure of the labour market, at the national level, in the ECEC and LTC sectors

The labour market for social services in Germany is characterised by specific features deriving mainly from the federal political organisation and a conservative welfare state regime (for more details see section I.2). Federalism as a constitutional condition, locates policies and governance of social services at the regional state level and especially provision on the local level. Hence, provision of social services and employment conditions (including training) vary by the 16 regional states (so-called *Länder*). Furthermore, the subsidiarity principle inherent to the conservative German welfare regime privileges family and non-profit actors in service provision. Thus, public provision of services is less pronounced and the respective labour market segment smaller than in Scandinavian social-democratic regimes or France; moreover, non-profit organisations (subsidized by the state) rather than the state play a crucial role as employers. Historically, in Germany main providers are organisations set up and supported by the protestant and catholic church (*Diakonie und Caritas*) alongside various secular organisations with roots in the labour movement (*Arbeiterwohlfahrt*) and other forms of civilian charitable engagement, the latter representated by an umbrella organisation (*Paritätischer Wohlfahrtsverband*). As religious and ideology-based charitable organisations, they typically provide services by a mixture of paid and voluntary work based on ethical norms of altruism and compassion, which are highly gendered. As we will see in the next sections in more detail, this constellation as well as more recent marketization effects profiled employment in social services as a female domain dominated by part-time work and impacted negatively on professionalization, working conditions and the formation of collective interest representation. Only recently has this constellation come under pressure, offsetting new dynamics in staffing, wages and professionalisation. Finally, German reunification has impacted on the labour market in social services, too. Contrary to West Germany, the former GDR was characterised by an an adult-worker rather than a male-breadwinner model and an encompassing infrastructure especially for childcare (less long-term care). These state socialism features are still reflected in less pronounced part-time employment (among women and in social services) and a more encompassing and more state-run service provision in the Eastern states.

Employment in ECEC

Early childhood education (as well as long-term care) stands out as an expanding field of employment in the service sector, with an increase rate of around 90 per cent since 2006. In 2020 employment has reached a peak with 785,670 persons (among which 86 per cent are core practitioners and assistants) employed in the ECEC sector (DJI 2021a). The majority of these employees are still women, although the share of male employees has doubled from 3 per cent in 2006 to 6.2 per cent in 2018. At the same time, part-time work is pronounced with 54 per cent of employees working less than 38 hours per week compared to 37 per cent in the general labour market (Autorengruppe Fachkräftebarometer 2019). A closer look at the length of part time shows that in Eastern states the so-called "long part-time" (32 to 38.5 hours) is more pronounced than in Western states. In 2018, 12.9 per cent of the personnel in ECEC had fix-term contracts, with slightly higher shares in the Western Länder than in Eastern Germany (DJI 2021a).

About two thirds of the personnel in ECEC is employed in non-profit and one third in public-run organisations, whereas for-profit employers are marginal. Regarding the regional states, the role of services run by the catholic church is more pronounced in the South and Southwest of Germany, i.e. Bavaria and Saarland,

whereas protestant organisations dominate in the North, i.e. in Schleswig-Holstein. In the city states Hamburg and Berlin as well as the Eastern regional states non-religious non-profit organizations and state-run services play a more important role (DJI 2021a).

Alongside childcare provision in institutions, the ECEC system in Germany as well as in other European countries (European Commission et al. 2019: 79) allows for home-based childcare services for up to five children (*Kindertagespflege*), provided by single persons either in the children's home, in the home of the childminder or space rented by the childminder. In 2018, 44,181 childminders were registered (Autorengruppe Fachkräftebarometer 2019: 85). Childminders are nearly exclusively women, often mothers with young children or middle-aged women whose children are in school age. This kind of service provision is seen as a close substitute to care within the family, as the name 'Tagesmutter' for childminders signals, and far less professional than childcare in institutions where substantive formal training is required. Instead, requirements to qualify as a childminder vary by states and range from less than 50 hours of family daycare courses up to a 300-hour curriculum designed by the German Youth Institute and adopted by some German *Länder*. In 2018, only about 30 per cent of childminders had a professional background in ECEC, whereas about 53 per cent had completed a specific training of 160 hours or more and 14 per cent had only up to 160 hours training (3 per cent no training) (Autorengruppe Fachkräftebarometer 2019: 91).

Core practitioners and assistants in ECEC working in institutions still concentrate in the so-called "kindergarten groups" (children aged 3 years and older), but employment in nurseries (children aged 1-3 years) has gained importance with an employment share of 13 per cent in 2018 compared to 9 per cent in 2011 (DJI 2021a).

Regarding qualification, more than 80 per cent of the personnel disposes of 3-5-year school-based vocational training, with higher rates in the Eastern regional states than in West Germany. At the same time, the share of personnel with no sector-specific training or no training at all is generally low (DJI 2021a). However, the share of personnel with university training (Master level) is still low (6 per cent), too, although the share of personnel in leading and management positions has substantially increased: from 37,000 in 2011 to 60,750 persons in 2020 (+56 per cent). The increase was more pronounced for group leaders who took over this job in part-time while still working as practitioners than for full-time heads (DJI 2021a).

The age structure of employees in ECEC on average is balanced with less than one third aged 50 years and older; however, younger age groups are more represented in West Germany, whereas in the Eastern states the share of older practitioners is more pronounced (DJI 2021a).

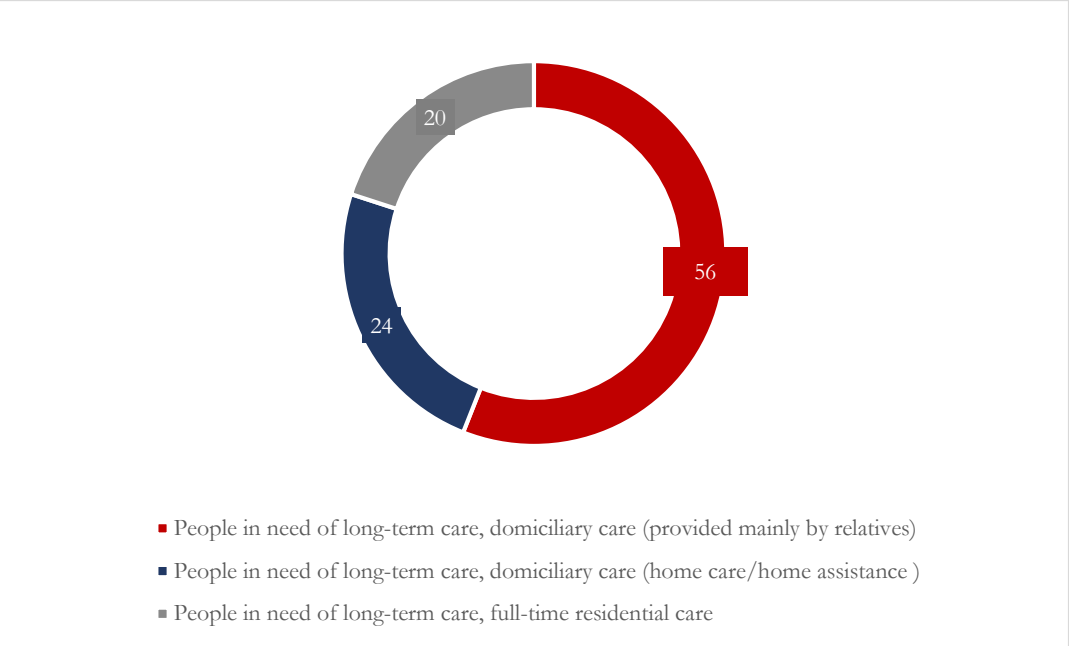
Employment in LTC

In Germany, there is a high and increasing demand for LTC in general, and in particular for homecare arrangements (see figure 1). The dominant request for homecare arrangements reflects the conservative welfare state orientation. In 2019, 76 per cent of people in need of care received care at home (provided by relatives or homecare services). In contrast, only 20 per cent of persons in need of care lived in a full-time residential care home.

In 2019, 421,550 persons worked in homecare services (see table 4). 86 per cent of them were female, 14 per cent male, and the majority in homecare services were part-timers (69 per cent were working part-time, 28 per cent full time, and 3 per cent were in training in 2019) (Destatis 2020a). Regarding residential care services, in 2019 796,489 persons worked in care homes. The share of female employees in residential care services is 83 per cent compared to a proportion of 17 per cent of male employees (Destatis 2020a). In 2019, 63 per cent of the employees in residential care homes were part-timers, 29 per cent worked full time and 7 per cent were in training. Roughly 50 per cent of all employees in elderly care are professionals and 50 per cent are assistant workers (*Altenpflegehelfer*innen*) (Bundesagentur für Arbeit 2020: 8). Assistant workers have either no vocational training or only a one- to two-year training. As a consequence of the German

federalism, vocational training regulations are hardly harmonized and partly inconsistent (expert interview 4); however, since the implementation of the German Nursing Professions Act (*Pflegeberufegesetz*) in 2017 a uniting trend in the three previously separate and different training programmes in geriatric nursing (care of the elderly), healthcare, and paediatric nursing (children's nursing) can be observed (see second section I.2.1.3 "Governance of the LTC services").

Figure 1: People in need of long-term care, by type of care, in 2019 in per cent (in total 4.1 million)



Source: Destatis 2021c.

In Germany, a skilled worker quota (*Fachkraftquote*) of at least 50 per cent has been mandatory since 1993 (expert interview 1). The skilled worker quota was originally established to ensure high-qualitative care (expert interview 4) but despite the good intention, experts state that the quota did not really help to increase care quality, partly due to implementation difficulties. Empirically, none of the German federal states was able to meet the quota appropriately (expert interviews 4 and 5). Therefore, from 2023 onwards, a new staffing assessment procedure (*Personalbemessungsverfahren*, Rothgang et al. 2020a), which currently is in a testing phase, will be implemented (expert interview 4). In contrast to the skilled worker quota, staffing rations will be individualized according to the demand of care homes. Residential care homes will no longer have to provide a 50 per cent quota of skilled workers, but they will have to employ workers of all three categories, of professional workers, assistant workers with one- to two-year training, and unskilled workers. The new staffing assessment procedure will account for the resident structure of individual care homes and follow the principle of needs of residents: On the one hand, the higher the share of persons with a high degree of care needed, the more skilled workers will be required. On the other hand, the lower the share of persons with a high degree of care, the less professionals will be required.

In Germany, the care sector is a semi-professionalized sector with little scientific expertise in nursing (expert interview 2). The institutional demand for personnel graduated from academic care degree programmes still seems to be low. Only a minority of nurses has a Bachelor's degree and even fewer a Master's degree (expert interview 3), although scientific degree programmes have been existing in Germany for 30 years (expert interview 4) – mainly in the fields of management, administration, and executive positions (expert interview 2) – and have reached a number of around 30 programmes of study in the winter term 2020/2021 (German Bundestag 2021: 3). In 2017, only 0.34 per cent of all employees in homecare services had an academic nursing degree, and 0.45 per cent of those employed in nursing care homes (German Bundestag 2019: 3). Since regular nursing training includes a training allowance, whereas the study programme has to be financed by the students themselves, university programmes are financially unattractive (expert interviews 1, 3 and

4). In particular, nursing studies are unpaid despite a high share of practical hours (expert interview 3). This high share of practical hours is a main characteristic of nursing studies, in contrast to university study programmes in other disciplines. Care experts emphasize the need to promote academic qualifications for nurses to push forward a professionalization trend as well as a skills and grade mix in LTC involving nurses with Bachelor or Master degrees and assistant workers (expert interviews 1, 3 and 4). However, the availability of higher-paid positions is restricted, especially in LTC (higher-paid positions are primarily available in hospitals (expert interview 2) or in larger care facilities (expert interview 5)). In fact, long-term care associations fear staff shortages in LTC due to personnel churn from LTC to hospital nursing (expert interview 4).

In order to reduce the shortage of skilled workers in the care sector, migrant workers are increasingly being recruited. As a result of the EU regulation of freedom of movement (*Europäische Freizügigkeit*), the number of European care workers in Germany increased from 33,000 in 2014 to 79,000 in 2019 (42,000 nurses and 37,000 geriatric nurses) (Bundesagentur für Arbeit 2020: 8). The description of the German labour market in the long-term care sector would be incomplete if informal care were not considered. Although there are no official data on the number of migrant care workers in the informal care sector, the number of live-ins is estimated to be up to 500,000 (Benazha/Lutz 2019), and as far as rotation is taken into account around 700,000 (Petermann et al. 2017). These estimations exceed the number of care workers in home-care services which was 390,000 (in full-time equivalents) in 2017 (Rothgang/Müller 2019: 82).

I.1.3 Employment in the ECEC and LTC services: structure and features from a diachronic perspective

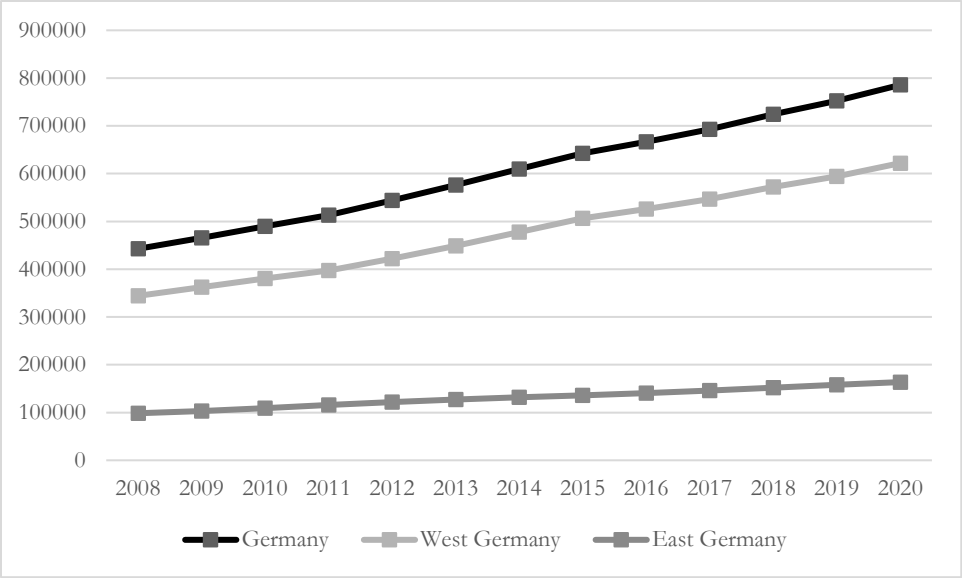
Employment in ECEC services: structure and features from a diachronic perspective

Following a diachronic perspective in the period between 2008 and 2020 (see figure 2), the number of persons working in child daycare facilities had been increasing continuously and reached the highest level in 2020 (785,670 employees in total in 2020, compared to 442,713 in 2008). During this growth-intensive decade, around 342,957 new employees (+77.5 per cent) were hired. Additionally, from 2006 to 2020 an increase in employment can be observed in the pedagogical and managerial staff (+92 per cent/675,600 employees in 2020) representing the largest share of staff (86 per cent) in daycare centres (DJI 2021a). This expansion can be attributed to reform legislations in 2005 (*Tagesbetreuungsausbaugesetz TAG* 2005) and in 2008 (*Kinderförderungsgesetz KiföG* 2008, establishing a right of half-day childcare for children aged 3-6 years. In 2020, almost 407,000 (60.0 per cent) of the pedagogical and managerial staff worked part time and, in contrast, 268,900 (40.0 per cent) full time. Despite the increase in employment, the full-time/part-time ratio has hardly changed between 2008 and 2020 (DJI 2021a). Part-time work is still the predominant work arrangement in ECEC. The rise in personnel bringing younger workforce in the field has contributed to a balanced age structure.[5]

Care provision by childminders, too saw a rise from 30,427 in 2006 to 44,181 in 2018 as was intended by the 2005 and 2008 reforms. However, the increase in childminding came to a halt from 2014 onwards (Autorengruppe Fachkräftebarometer 2019: 85), whereas institutional childcare continued to expand not least due to the implementation of the right to daycare for 1-3-year-old children based on a 2013 legislation (see section I.2.1.1 "Governance of the ECEC services").

[5] Childcare institutions with morning and afternoon services (often called daycare centres in contrast to 'kindergarten' which originally implied half-day childcare) often also offer after school clubs (Hort) for primary school kids, thus reacting on deficiencies of the half-day schooling norm in Germany. Throughout the last decades, especially primary schools in larger cities switched to full-time. In 2018/19 about 90,000 workers engaged in care for school kids were employed either by primary schools or childcare institutions, covering about 50 per cent of primary school kids (Autorengruppe Fachkräftebarometer 2019: 158). As the German Youth Institute reports, care workers employed by primary schools more often are not trained and work part time compared to employees in daycare centres (Autorengruppe Fachkräftebarometer 2019: 166).

Figure 2: Employment in ECEC, 2008–2020



	2008	2010	2012	2014	2016	2018	2020
Germany	442,713	489,700	544,040	609,917	666,862	724,109	785,670
West Germany	344,235	380,701	422,340	477,710	525,974	571,847	621,944
East Germany	98,478	108,999	121,700	132,207	140,481	152,262	163,726

Source: Autorengruppe Fachkräftebarometer 2021: 22, own description.

Alongside the expansion of employment, institutional settings as well childminding groups are characterised by a trend towards larger units. While in 2011 small teams/units comprising less than 14 trained employees were dominating, in 2018 roughly 25 per cent of childcare institutions had more than 14 trained employees. Especially non-profit poviders tend to have larger teams (Autorengruppe Fachkräftebarometer 2019: 10). In childminding a trend can be observed to rent rooms instead of using home space in order to accommodate more children, in 2018 on average 4 instead of 2 in 2006 (Autorengruppe Fachkräftebarometer 2019: 95/96).

Irrespective of the workforce expansion, the composition of the workforce regarding qualification levels did not change substantially. From 2006 onwards, more than two thirds of the pedagogical and managerial workforce in childcare institutions were trained on a 3-5-year basis (*Erzieher/in*), while 14.5 (2006) and 13.1 (2018) per cent were childcare assistants (Kinderpflege, Sozialassistenz) with a shorter training of 1-2 years. Compared to this stable majority with distinct vocational school-based training, the share of employees who are not trained at all or trained in a different job are marginal. However, there is a slight change towards professionalization as the share of personnel with university degrees in pedagogics and educational sciences increased from 3.2 (2006) to 5.6 (2018) per cent. Nevertheless, compared to other institutions in the legally regulated field of child and youth services (*Social Security Code VIII Kinder- und Jugendhilfe*), this share is still low (DJI 2021a).

Alongside the employment expansion training capacities in childcare increased, more or less mirroring the qualification structure of the workforce. Training capacities for the 3-5-year school-based training doubled throughout the last decade, whereas training capacities for childcare assistants on the one hand and for early childhood academic education on the other saw a rise, but the expansion was less pronounced (DJI 2021a print version: 9, 11).

Employment in LTC services: structure and features from a diachronic perspective

From a diachronic perspective (as can be seen from table 4), the number of employees in LTC care homes has been continuously rising from 2009 to 2019 (621,392 employees in total in 2009 and 796,489 in 2019). At the same time, the share of full-time workers in residential care remains unchanged at a low level (33.3 per cent in 2009 and 29.1 per cent in 2019). The rise in employment in homecare services is even greater than in care homes. In the period between 2009 and 2019, the group of workers in homecare services has almost doubled (268,891 employees in 2009 compared to 421,550 in 2019) and reflects – apart from financial reasons – the wish of many people in need of care to live in their own home.

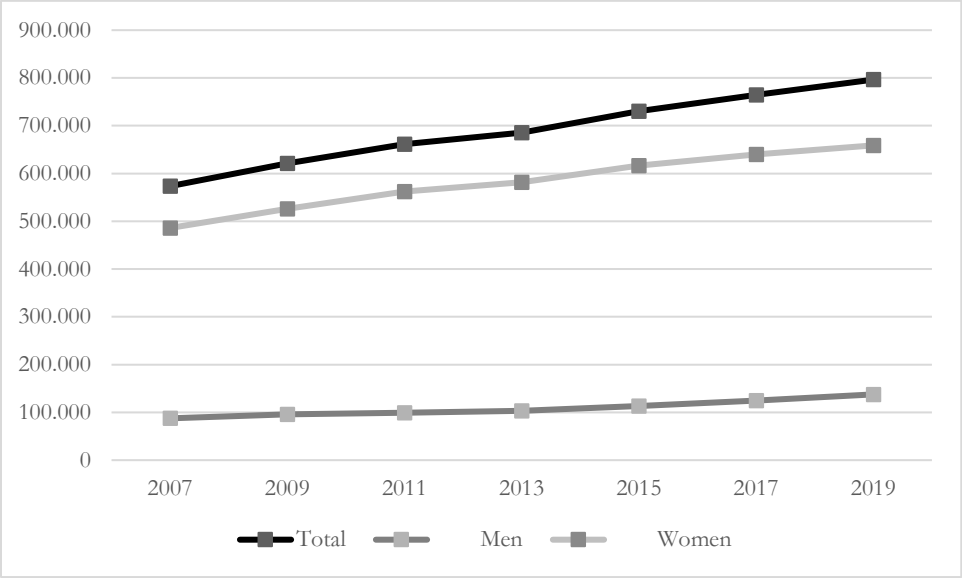
Table 4: Staff in care homes and homecare services, 2009–2019

	2009	2011	2013	2015	2017	2019
In care homes	621,392	661,179	685,447	730,145	764,648	796,489
including full-time staff	207,126 (33.3%)	212,416 (32.1%)	203,715 (29.7%)	209,881 (28.7%)	220,958 (28.9%)	231,847 (29.1%)
In homecare services	268,891	290,714	320,077	355,613	390,322	421,550
including full-time staff	71,964 (26.8%)	79,755 (27.4%)	85,866 (26.8%)	96,701 (27.2%)	109,657 (28.1%)	117,124 (27.8%)

Source: Destatis 2021d.

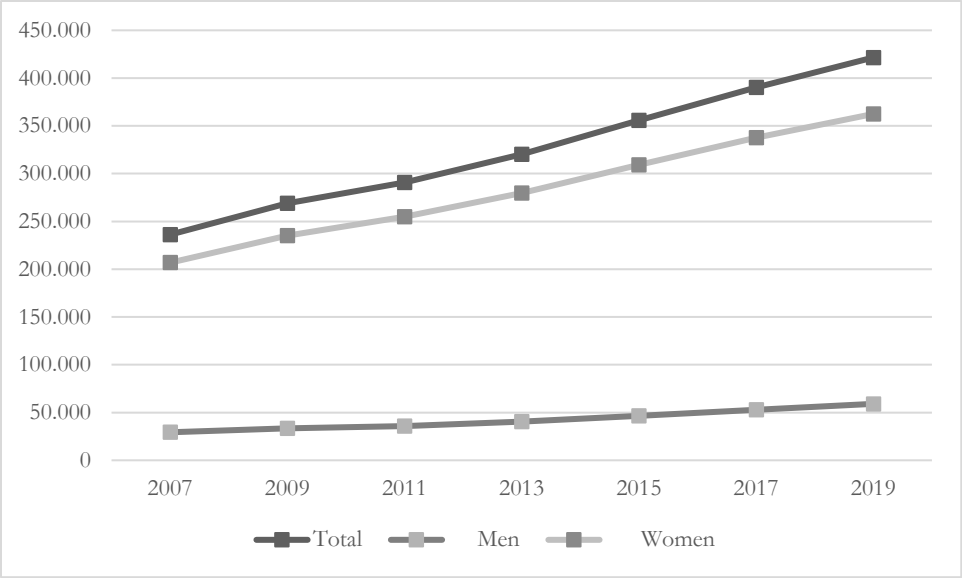
The high proportion of part-time work mostly provided by female care workers is a further key characteristic of the employment in care services that has hardly changed over the last decade. During the period from 2007 to 2019, the majority of all LTC employees in care homes (see figure 3) and homecare services (see figure 4) are women. Last but not least, the differentiation of staff by types of providers is another relevant feature. Figure 5 illustrates the staff in homecare services, differentiated by private, non-profit, and public providers. In homecare services, the number of employees in private homecare services has been continuously rising from 2007 to 2019, whereas employment in non-profit organisations saw a less pronounced rise and employment in public homecare services has stayed on a low level over time (for further information about the main LTC service providers, see section I.2.1.4).

Figure 3: Staff in care homes, differentiated by sex, 2007–2019



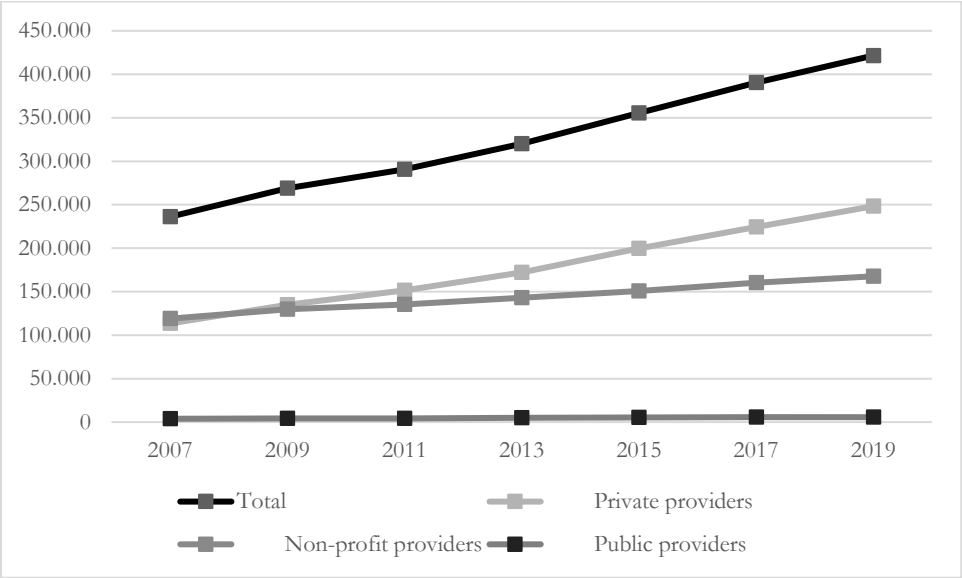
Source: Gesundheitsberichterstattung des Bundes 2021a, own description.

Figure 4: Staff in homecare services, differentiated by sex, 2007–2019



Source: Gesundheitsberichterstattung des Bundes 2021b, own description.

Figure 5: Staff in homecare services, differentiated by types of providers, 2007–2019



Source: Gesundheitsberichterstattung des Bundes 2021b, own description.

I.2 The ECEC and LTC services in Germany[6]

I.2.1 Presentation of the LTC and ECEC system in the country, differentiating between the two sectors

I.2.1.1 Governance of the ECEC services: general characteristics, relevant legislations, levels of governments responsible

As mentioned earlier, governance of ECEC in Germany has historically been framed by the subsidiarity principle restricting the role of the state in favour of family and non-profit actors in service provision. At the same time, the welfare state has established strong institutional incentives fostering a male breadwinner model, characterised by a family wage allowing for mothers to be housewives and to care for children at home (Gottschall/Schröder 2013). These incentives include a taxation system favouring married couples with one part-time or marginal earner (instead of individual taxation as in Sweden or family taxation by numbers of children as in France), a half-day structure for daycare centres and primary schools (Hagemann et al. 2011) and a preference for relatively generous cash transfers to families (numerous childcare benefits and tax deductions for household expenses for childcare and domestic services at home) instead of service provision for children (Spieß 2008). Aditionally, although framed by a central law in the Social Security Code (*SGB VIII, Kinder- und Jugendhilfe*), the constitutional structure of federalism attributes some legislative and all organisational authority in the areas of child and youth welfare to the federal states: Hence, coverage, and provider structure as well as training schemes for childcare workers vary on regional state level. Finally, in Germany this field is separated from schooling and in a broader sense from the field of education and science which is exclusively governed by regional states (a principle, secured by basic law, called *Kulturhoheit der Bundesländer*).

After German reunification in 1990, these institutional structures and incentives were extended to East Germany, although the former GDR had built up a comprehensive public childcare system to foster female (full-time) employment. Indeed, throughout the last decades, mothers' employment rates and public childcare coverage in East Germany have continued to be higher than in West Germany and contributed to altering the conservative family and labour market landscape in Germany. From 2000 onwards, childcare services in West Germany have been expanding reflecting not only the different situation in East Germany, but also rising female labour market participation and preferences of young couples for combining family and work in the West. Moreover, the turn to labour market activation policies (the so-called *Hartz reforms* introduced from 2004/05 onwards), adhering to a 'dual earner'/ 'adult worker model' rather than the previously favoured male-breadwinner model (Henninger/von Wahl 2019) exerted pressure to provide more comprehensive childcare services to incentivise employment of mothers.

Several reforms, initiated by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, (*Bundesministerium für Familie, Senioren, Frauen und Jugend, BMFSFJ*) contributed to an expansion and restructuring of early childhood services (Müller/Wrohlich 2014: 2; DJI 2021b):

- 2005: Expansion of daycare institutions for 3-6-year-old children with *Tagesbetreuungsausbaugesetz TAG* (Daycare Development Act) in 2005, legal claim and goal to provide a half-day kindergarten slot for all children of this age group
- 2008/2013: Introduction of legal claim for a slot in a publicly subsidised care institution for 1-3-year-old children by *Kinderförderungsgesetz, KiföG* 2008 (Childcare Funding Act); implementation since 2013 aims to reach a 30per cent coverage rate in child daycare services for one-to-three-year-old children

[6] We slightly changed the prescribed structure for this chapter in order to allow for a more coherent and cogent presentation of the two fields. As the regulation of ECECand LTC services is based on different legislations with LTC representing a younger and insurance based field of social policy, structures in both field to some extent differ. We start with ECEC service provision described in subchapter I2.1.1 and I2.1.2 and in the latter comprise information on service provision and expenditure otherwise split of in different subchapters. From subchapter I2.1.3 follows LTC. Subchapters I.2.2 and I.2.3 are eliminated as the respective information is included in the previous subchapters.

- In September 2021, after longer political disputes between the central government and the Council of Constituent States (*Bundesrat*, upper house of parliament), a law passed both houses guaranteeing a right to all-day care for primary school kids, to be fully implemented by 2026.

Table 5: Attendance rates of children in daycare in 2008 and 2020

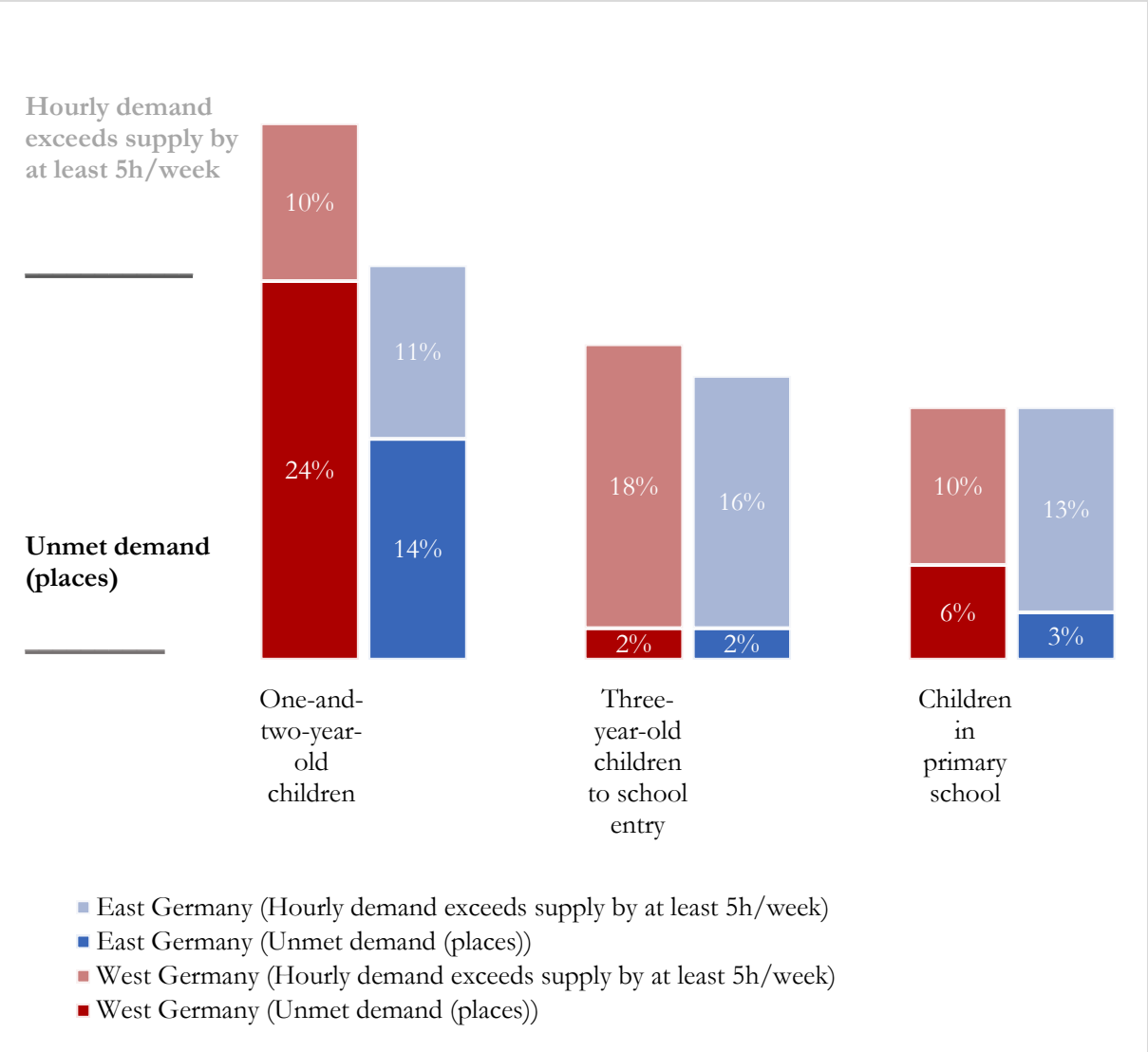
	Children aged 0 to 3 years		**Children aged 3 to 6 years**	
	2008	**2020**	**2008**	**2020**
Former territory of the Federal Republic	12.1%	31.0%	89.9%	92.1%
New Länder including Berlin	41.9%	52.7%	94.4%	94.3%
Germany	17.6%	35.0%	90.7%	92.5%

Source: Destatis 2020b: 97.

As can be seen from table 5, the childcare reforms helped to expand childcare services especially for the 1-3-year-old children. The attendance in this age group increased from 17.6 per cent in 2008 to 35.5 per cent in 2020. However, there are still large differences between Eastern and Western states and experts unanimously state an unmet demand especially in larger cities in West Germany. Coverage for 3-6-year-old children with half-day slots, which has already been high in 2008, increased mainly in West Germany from 89.9 to 92.1 per cent (see table 5). Not only for children in kindergarten age, but also for primary school kids, parents continuously report an unmet demand for full-time childcare and schooling (and services with more flexibility in opening hours) as shown in figure 6 (DJI 2019). Whether the only recently issued reform on full-time schooling will be able to address the demand for primary school kids especially in regions with so far scarce full-time schooling, remains to be seen. In 2018/19 about half of all primary school kids made use of either full-time schooling or afternoon care services (so-called *Hort*) often offered by childcare institutions. However, while in the city states Berlin and Hamburg coverage rates are close to 100 per cent, in states such as Baden-Württemberg in the South of Germany, characaterised by a mix of agricultural, industrial and post-industrial socio-economic structures, only 25 per cent of the school kids can make use of this kind of services (Autorengruppe Fachkräftebarometer 2019: 158).

Besides being beneficial to coverage, the reforms, however, revealed a structural deficiency in governance both with regard to reform design and financing. Although the respective legislation is on the central state level, the design of the reforms has to be co-determined with the governments of the regional states, which have by constitution the right to govern social services. Respective laws have to pass both the lower house (*Bundestag*) and the upper house of parliament (*Bundesrat*). As conservative as well as more left-wing central governments from the 2000s onwards have been interested in modernising childcare services and elementary education across the country, regional states claimed a (co-)financing in exchange of their support for the respective reforms. Finally, as implementation of the respective reforms rests with the regional states and central evaluation has proved difficult, regional differences in childcare infrastructure and coverage tend to persist.

Figure 6: Unmet demand regarding hours per week and places of childcare services reported by families for children in age groups 1-2 years, 3 years until school age and primary school children in 2019 (%)



Source: DJI 2019, own description.

I.2.1.2 ECEC through service provision (list of services provided, their definition, service coverage, service quality), social transfers and tax incentives and expenditure

ECEC: main service providers

The majority of (centre-based) care and early education for children aged 1-6 years is provided by service providers (*Trägerschaften*). These service providers might be public (run by local authorities), or run by non-profit or for-profit organisations. Additionally, there are self-organized childcare initiatives and childminders. In 2020 there was a total of 57,594 providers, of which 18,884 are public (32.7 per cent), 37,100 non-profit (64.2 per cent), and 1,763 for-profit (3.1 per cent) (Destatis 2020b: 12). The employment shares of church-run providers and other non-profit providers each is as high as of public providers (around 200,000 employees each in 2020). All show a high rise in employment from 2007 to 2019. Although the rise in employment was most pronounced for private for-profit providers (+390 per cent), their role in childcare provision is still small (around 14,700 employees) (DJI 2021b).

ECEC: Services provided and quality

As mentioned earlier, the majority of service provision in centre-based care in Germany is still half-day (usually in the morning). Centres offering more than 4 hours of service also provide meals.

Regarding quality, early childhood care in institutions can be attributed a medium to high quality as the majority of the staff is trained, although the school-based vocational training for childcare shows some deficiencies.[7] In contrast, small initiatives (often run by parents) as well as childminder groups are attributed a less professional care: Childminders in regulated home-base provision have to qualify through some kind of course of family care, however, the content varies across the regional states: While a recently upgraded curriculum developed by the German Youth Institute corresponds to 300 hours of training, some *Länder* require only completion of a course of 30 hours. In 2016, 51 per cent of childminders had completed training of at least 160 hours, about 30 per cent had professional background in ECEC and 18 per cent had attended a qualificaction course of less than 160 hours or had no qualification at all (Weiterbildungsinitiative Frühpädagogische Fachkräfte, Autorengruppe Fachkräftebarometer 2017: 50). For small initiatives often run by parents, union experts report concern regarding professionalization, since parents as employer or board members supervising trained employees do not act on a professional ground (expert interview 7, p. 2).

Throughout the last years, not least triggered by the poor performance of German school kids in the PISA studies, a change in the political and public framing of ECEC has occurred. While originally ECEC was understood as care, supporting family care by mothers, public childcare is now attributed a central role in early education as it should compensate in part for a quality of education which families for different reasons cannot provide. ECEC institutions are supposed to prepare kids for a smooth transition to primary school, enhancing language skills and the development of cognitive skills, social skills, and physical training. This paradigm shift served to force expansion of all-day care, to expand childcare services for children aged 1-3 years old, and to set up and increase early childhood education study programmes. In 2019, the so-called *Gute Kita-Gesetz* was introduced, aiming at high quality of care provision by better staff/children ratios, further education for childcare workers, and providing specific offers such as language training for children with specific needs (BMFSFJ 2019).

ECEC: Expenditure

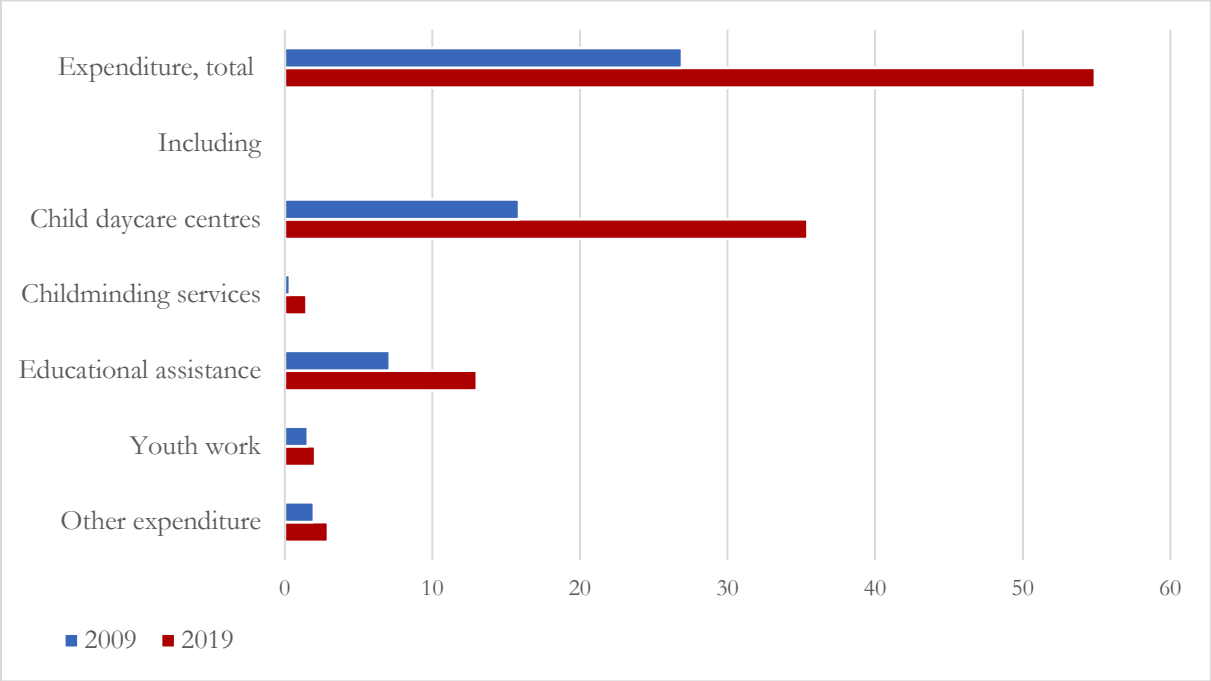
Alongside the expansion of employment and services in ECEC, expenditure on public welfare for children and youth increased substantially. The respective expenditures doubled from 2006 to 2018 (DJI 2018). As can be seen from figure 7, the increase between 2009 and 2019 was most pronounced for child daycare centres.

Nevertheless, financing of childcare in Germany is mixed regarding public and private expenditure: Although the regional states and local level authorities are in charge of providing daycare places and thus bear the costs for running of the daycare centers (with the cost for personnel as the main factor), ECEC often is not free of charge for parents. The legal right to childcare for children aged 1-3 and 3 years to school age

[7] As the training programmes vary by regional states, this type of school-based education is less standardised than the vocational training type regulated by central state law (*Berufsbildungsgesetz*), the so-called *duale Ausbildung* which takes place in schools and in firms and is financed and governed by employers and the state. The latter applies to industrial and most commercial service occupations and is male-dominated, whereas the school-based vocational training type applies to all occupations in healthcare, ECEC, and other social services, and is dominated by women. Additionally, compared to France or Scandinavian countries where training for childcare workers is closer to the tertiary education of teachers, the school-based training in Germany is separated from academic expertise in early childhood education, not least because teachers/instructors for ECEC and long-term care training do not need to have a university degree so far (Krüger 1999; Kroos/Gottschall 2012). Nevertheless, in the European Qualification Framework the German three-to-five-year school-based vocational training is accepted as equivalent to a Bachelor's degree, mainly due to its duration: Access to these training programmes requires a ten-year school degree, and the three-year training programme in addition often implies one-to-two-year internships.

usually applies to a half day place. For childcare exceeding this time slot, many regional states and local municipalities raise fees. At the same time tax regulations allow for generous deductions if parents claim private expenses on childcare, i.e. private childminders, private daycare centres, or fees for longer hours in daycare centres. Although the free-of-charge access to childcare has been improved substantially over the last two decades, experts state that Germany compared to France and the Scandinavian countries is still a latecomer with respect to public provision of early childhood education, not least due to the adherence to the half-day norm and the tax deduction regulations favouring middle-class income families. While in the latter the second earner wages (of women) are often high enough to cover additional expenses on childcare (and domestic services), working-class families and single mothers are disadvantaged as their frequently low-wage employment compensates far less for the additional expenses for all-day childcare (Shire 2015). Indeed, the use of childcare for younger children and for longer hours as well as an early return to work after parental leave is more pronounced among mothers with higher education and household income than it is for mothers with lower education and income.

Figure 7: Gross expenditure on public children and youth welfare, Billion euros (=1,000,000,000)



Source: Destatis 2021e.

I.2.1.3 Governance of the LTC services: general characteristics, relevant legislations, levels of governments responsible

In Germany, one of the major changes of the LTC system took place in the early 1990s. In 1995, the mandatory long-term care insurance was introduced, following the conservative Bismarckian German welfare regime. The former residual tax-based LTC system was radically replaced by the LTC insurance model (Theobald/Luppi 2018: 633). The long-term care insurance includes a specific cash benefit for care-dependent people (*Pflegegeld*) which can be spent either for care provision by family members or formal homecare services, and therefore incentivises care within the family and provided by family members. In addition, this cash benefit works in favour of informal migrant care provision, often as 24-hour live-in arrangements (Safuta et al. 2021). Furthermore, from 1995 onwards, a privatisation of public infrastructure occurred, including the opening and licensing of private providers for care services in order to meet the rising demand for homecare services.

As several reforms in recent years especially regarding training and wages show, governance of LTC is highly dynamic and impacting on the working conditions for care workers. The first reform to mention regards training. Since the German vocational training system in nursing is based on the principle of federalism, the federal states are the main responsible actors. Vocational regulations and further trainings are hardly harmonised, however, in 2017 the German Nursing Professions Act (*Pflegeberufegesetz*) was implemented to foster a uniting and generalist three-year nursing training of the three former different training programmes in geriatric nursing (care of the elderly), healthcare, and paediatric nursing (children's nursing). This reform pursued, in general, the aim of uniting nursing specialist degrees (*Pflegefachfrau/Pflegefachmann*) to make the vocational training system in nursing more attractive and to promote permeability between the different subfields in the healthcare sector. However, there is still an opportunity to receive a specific degree in elderly care. In the first year, all trainees start with the generalist training. Trainees who would like to specialise in geriatric nursing or paediatric nursing have a right to choose in the third year: they can continue the generalist training in the third year of the training with the degree *nursing specialist*, or instead choose a specialisation with the degree *geriatric nurse* or *health and paediatric nurse*. Some of the interviewed experts are critical regarding this opportunity of specialisation: "All the gains that could have been made through the Nursing Professions Act in the form of unification, standardisation, and quality assurance of training are lost through the possibility to choose a specialisation in *geriatric nurse*" (expert interview 1). It remains to be seen, how the Nursing Professions Act will be evaluated in the following years. An official evaluation will be carried out by the end of 2025, coordinated by the Federal Ministry of Health and the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth.

A cascade of further reforms, equally reflecting the insufficient supply of (a domestic) workforce and the perceived lack of attractiveness of long-term employment in the LTC sector, have addressed the low wage level compared to nursing. Already in 2010, in Germany a minimum wage legislation for care work (in institutions) came into force, implemented on the basis of the Posted Workers Act (*Arbeitnehmer-Entsendegesetz*) which was also applied to homecare services in January 2015. The Law for the Improvement of Wages in the Care Sector (*Pflegelöhneverbesserungsgesetz*), which came into force in November 2019, created a legal basis to improve wages in the Employee Posting Act (AEntG) (BMG 2020). This regulation empowers the Care Commission (*Pflegekommission*) to decide on specific minimum wages for care workers depending on their qualifications. With the fourth legal ordinance on mandatory working conditions in the care sector (4. PflegeArbbV), the minimum wage for unskilled care assistants will be raised in four steps to 12.55 euros uniformly in Eastern and Western Germany by the beginning of April 2022. For one-year qualified nursing assistants, the minimum wage will increase in four steps to 13.20 euros as well. Since July 2021 a minimum wage for skilled nursing staff has been established for the first time, and it will rise to 15.40 euros in April 2022 (BMG 2020).

In June 2021, a further relevant and highly contested reform has passed, the *Gesundheitsversorgungsweiterentwicklungsgesetz* (GVWG): The GVWG is a legislation to oblige especially private providers to adhere to wages negotiated in regional collective bargaining (as a minimum threshold) or to pay at least average wages and to regulate a limitation of the own contributions (*Eigenanteile*) as well as mandatory staffing levels (BMG 2021). Although originally intended, a general national collective bargaining agreement failed (see section I.4.2).

I.2.1.4 LTC through service provision: list of services provided, their definition, service coverage, service quality

LTC: main service providers

People in need of care can choose between the offers of different care providers who are authorised by a care contract (§ 72 SGB XI). They have a fundamental right to choose on the basis of SGB XI, the competition between providers is promoted by this legislation, and the manageability of the range of services is to

be made possible by the long-term care insurance fund (§ 7 Section 3 SGB XI). The LTC sector is characterised by private for-profit, non-profit, and public providers. Section 11 (2) SGB XI stipulates that non-profit and private providers have priority over public providers in care for the elderly (Evans 2016: 28).
In contrast to childcare, informal care work (indirectly supported by a cash benefit (*Pflegegeld*) to care-dependent persons) and formal care provision by private for-profit providers (especially relevant in homecare services) are more pronounced in the provision of long-term care. However, non-profit providers (church and others[8]) which are directly subsidised by the state are important for the provision of long-term care as well. The role of state providers is less meaningful in residential care homes and homecare services. In 2019, only 4.5 per cent of residential care home providers were public (695 in total), 42.7 per cent private (6,570 in total), and 52.8 per cent non-profit providers (8,115 in total) (see table 6). A numeric overview on homecare providers is given in table 7. Only 1.3 per cent of homecare service providers are public (198 in total), 32.2 per cent non-profit (4,720 in total), and 66.5 per cent private providers (9,770 in total). From a diachcronic perspective, the shares of public, non-profit, and private providers in residential care homes and homecare services have hardly changed between 2007 and 2019.
Regarding the workforce situation in residential care services, only 6 per cent of employees were working in public institutions in 2013 (41,127 in total), and on the contrary, 59.5 per cent in non-profit (407,841 in total), and 34.5 per cent in private residential care homes (236,479 in total) (Rothgang et al. 2015: 43). In homecare services, the share of employees in public-based services is even only 1.5 per cent (4,936 in total), compared to 44.7 per cent of employees in non-profit homecare services (143,120 in total), and 53.7 per cent of employees in private homecare services (172,021 in total) (Rothgang et al. 2015: 26).

I.2.1.5 LTC through social transfers and tax incentives (if present): definitions, coverage, expenditure

LTC: expenditures

In Germany, on average, 1.5 per cent of the Gross Domestic Product was spent on LTC services in 2018 (compared to 1.1 per cent in 2007) (Ärztezeitung 2020). In 2018, the total expenditures in LTC were 55.38 billion[9] euros (Rothgang et al. 2020b: 126). 20.6 per cent of the LTC expenditures are private expenses (11.41 billion euros in total), and 79.4 per cent public expenses (43.97 billion euros in total) (see table 8). One-third of the private expenses (3.98 billion euros) are used for residential care services and two-thirds for home-based services. The highest share of public expenditures is covered by the social LTC insurance. Therefore, the social LTC insurance is the most important cost unit, however, it only covers two thirds of all expenditures on LTC (Rothgang et al. 2020b: 126). Since the introduction of LTC insurance, there has been an extreme rise in expenditures (financed by contributions of employees and employers) from 14,34 billion euros in 1997, 28,29 billion euros in 2016, 35,54 billion euros in 2017 (after reform in entitlements to provision) (Rothgang/Fischer 2019: 652) to 38,25 billion euros in 2018 (Rothgang et al. 2020b: 126).

[8] Non-profit providers are the catholic *Caritas* and protestant *Diakonie* as church associations, the parity-based associations *Worker's Welfare Association* (*AWO*), the German *Paritätischer Wohlfahrtsverband* (*Der Paritätische*), the *German Red Cross*, and other non-profit providers that are not affiliated to any of these six providers.
[9] One billion = 1,000,000,000

Table 6: Residential care home providers, 2007–2019

Residen-tial care homes	2007	2009	2011	2013	2015	2017	2019
Private providers	4,322 (39.2%)	4,637 (39.8%)	4,998 (40.5%)	5,349 (41.1%)	5,737 (42.2%)	6,167 (42.6%)	6,570 (42.7%)
Non-profit providers	6,072 (55.1%)	6,373 (54.8%)	6,721 (54.4%)	7,063 (54.2%)	7,200 (53.0%)	7,631 (52.7%)	8,115 (52.8%)
Public providers	635 (5.7%)	624 (5.4%)	635 (5.1%)	618 (4.7%)	659 (4.8%)	682 (4.7%)	695 (4.5%)
Total	11,029 (100.0%)	11,634 (100.0%)	12,354 (100.0%)	13,030 (100.0%)	13,596 (100.0%)	14,480 (100.0%)	15,380 (100.0%)

Source: Gesundheitsberichterstattung des Bundes 2021c.

Table 7: Homecare service providers, 2007–2019

Homecare services	2007	2009	2011	2013	2015	2017	2019
Private providers	6,903 (59.9%)	7,398 (61.5%)	7,772 (62.9%)	8,140 (63.9%)	8,670 (65.1%)	9,243 (65.8%)	9,770 (66.6%)
Non-profit providers	4,435 (38.5%)	4,433 (36.9%)	4,406 (35.7%)	4,422 (34.7%)	4,461 (33.5%)	4,615 (32.8%)	4,720 (32.1%)
Public providers	191 (1.6%)	195 (1.6%)	171 (1.4%)	183 (1.4%)	192 (1.4%)	192 (1.4%)	198 (1.3%)
Total	11,529 (100.0%)	12,026 (100.0%)	12,349 (100.0%)	12,745 (100.0%)	13,323 (100.0%)	14,050 (100.0%)	14,688 (100.0%)

Source: Gesundheitsberichterstattung des Bundes 2021d.

Table 8: Expenditures on LTC, 2018

Expenditures	In euros	Share of public/private expenditures in %	Share of total expenditures in %
Public expenditure on LTC	43.97 billion	100.0%	79.4%
---	---	---	---
including			
Social LTC insurance	38.25 billion	87.0%	69.1%
Private LTC insurance	1.44 billion	3.3%	2.6%
Civil service allowance	0.72 billion	1.6%	1.3%
Social Assistance	3.47 billion	7.9%	6.3%
War victims' welfare	0.09 billion	0.2%	0.2%
Private expenditure on LTC	11.41 billion	100.0%	20.6%
---	---	---	---
including			
Residential care services	3.98 billion	34.8%	7.2%
Home-based services	7.44 billion	65.2%	13.4%
Total	55.38 billion		100.0%

Source: Rothgang et al. 2020b: 126.

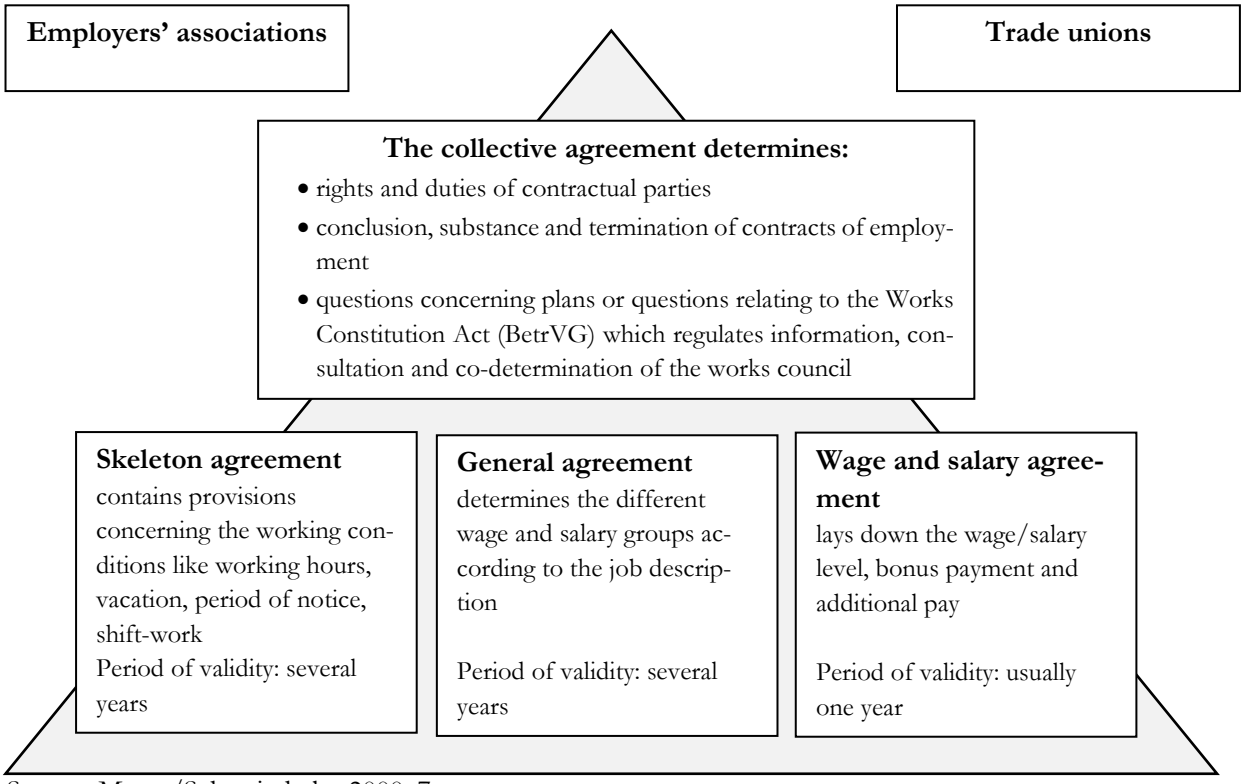
I.3 The employment relations system in Germany

I.3.1 The main general characteristics of the employment relations at the national level

The German industrial relations system is based on a cooperation between well-organised trade unions and employers' associations (general business or trade associations, special employers' associations, chambers or industry and commerce, chambers of trade). In general, Germany can be described as a 'coordinated market economy' including a dual system of employment relations and a highly coordinated system of collective bargaining (Keller/Kirsch 2020). The dual system of employment relations is firstly represented by a collective bargaining principle of autonomous negotiations between trade unions and employers' associations on industry/sector level, and secondly by a right to co-determination at the workplace on firm level. Collective agreements which are negotiated by employers' associations and trade unions are covering regions or areas (*Flaechentarifvertrag* or *association collective agreement*) and include wage and salary agreements, general agreements, and skeleton agreements (see figure 8).

Trade unions are organised by three national umbrella organisations: The German Confederation of Trade Unions (*Deutscher Gewerkschaftsbund,* DGB) with almost 6 million members, the German civil servants' association (*beamtenbund und tarifunion,* dbb) with 1.3 million members, and the much smaller Christian Trade Union Federation of Germany (*Christlicher Gewerkschaftsbund Deutschlands*, CGB) with 271,000 members (Dribbusch/Birke 2019: 6). The German Confederation of Trade Unions is the largest umbrella organisation and has the most members; however, there has been a sharp decline in membership from 6,778,000 members in 2005 to 5,850,000 in 2020 (WSI 2021). In contrast to this decline in total membership, the share of women increased from 31.8 per cent in 2005 to 34.1 per cent in 2020 (WSI 2021).

Figure 8: Employment relations and collective agreement in Germany



Source: Mayer/Schweisshelm 2000: 7.

Overall, 7.8 million people were organised in one of the trade unions[10] in 2018 (Dribbusch/Birke 2019: 6). The United Service Sector Union is the main trade union responsible for employees in the service sector and, in particular, for care employees. In total, around 2,000,000 persons were members of the United Service Sector Union (see table 9). Following the general downward trend of memberships in trade unions, a slight decline in membership of the United Service Sector Union occurred in the last decade as well, whereas the share of women slightly increased from 50.5 per cent in 2010 to 52.4 per cent in 2019 (DGB 2021). Although membership rates of all trade unions have declined, there is no evidence of a general erosion of the German industrial relations model (Marsden 2015: 169).

Table 9: ver.di members, 2010–2019

Year	Total	Men	%	Women	%
2010	2,094,455	1,035,901	49.5	1,058,554	50.5
2011	2,070,990	1,020,582	49.3	1,050,408	50.7
2012	2,061,198	1,011,404	49.1	1,049,794	50.9
2013	2,064,541	1,005,325	48.7	1,059,216	51.3
2014	2,039,931	989,787	48.5	1,050,144	51.5
2015	2,038,638	978,047	48.0	1,060,591	52.0
2016	2,011,950	963,856	47.9	1,048,094	52.1
2017	1,987,336	949,115	47.8	1,038,221	52.2
2018	1,969,043	939,087	47.7	1,029,956	52.3
2019	1,955,080	930,637	47.6	1,024,443	52.4

Source: DGB 2021.

I.3.2 The main characteristics and structure of the employment relations in the ECEC and LTC sectors

Not least due to the claim of public employers to be a model for the private sector, employment relations in the public sector in Germany are relatively strong regarding union membership of employees and civil servants and coverage by collective agreements (Gottschall et al. 2015). However, interest representation in ECEC and LTC is less pronounced than in other domains of public employment such as state administration, police, and education (schools). This is mainly due to the heterogeneity of service provision including a strong role of non-profit providers and (in LTC) for-profit providers. Also, as already mentioned in section I.1.2, employment in childcare and long-term care has been framed rather as a female-dominated semi-profession than a profession, characterised by relatively low wages and part-time work, thus deviating both from the classical civil servant in the public sector and the male-dominated standard employment in core industries (and commercial services such as banking), which are still providing the backbone of the strong German employment relations system. Nevertheless, there are some differences between ECEC and LTC which are relevant for the employment relations in both fields.

ECEC: Employment relations

In general, ECEC can be characterised as a more homogenous field of provision and employment than LTC: Public and non-profit providers are dominating, and so far, privatisation and competition are not

[10] The different kinds of trade unions in Germany are:

- Metal (*IG Metall*, IGM)
- United Service Sector Union (*Vereinte Dienstleistungsgewerkschaft*, ver.di)
- Mining, Chemistry, Energy (*IG Bergbau, Chemie, Energie*, IG BCE)
- Construction, Agriculture, and Environment (*IG Bauen-Agrar-Umwelt*, IG BAU)
- Food, Luxury food, Hotel and catering industry (*Gewerkschaft Nahrung-Genuss-Gaststätten*, NGG)
- Railway and Transport (*Eisenbahn- und Verkehrsgewerkschaft*, EVG)
- Education and Science (*Gewerkschaft Erziehung und Wissenschaft*, GEW)
- Police (*Gewerkschaft der Polizei*, GdP)

pronounced in the field. In terms of organisational units, the provision mainly takes place in daycare centers with a trend towards larger units. In contrast, in LTC private providers are more prominent and alongside larger residential homes employment concentrates in smaller homecare services. Moreover, employment in ECEC has been and still is characterised by high shares of trained employees and less fluctuation (Autorengruppe Fachkräftebarometer 2019: 117) than in LTC with a more diverse workforce regarding qualifications. Employment relations in ECEC reflect this relative stability and homogeneity to some extent. Employees are mainly organised in the United Service Sector Union and professional organisations do not play a major role.

Union membership is most pronounced for employees in public childcare institutions run by municipalities whereas employees in daycare centers run by the religious organisations *Diakonie* and *Caritas* show lower membership numbers, as these non-profit employers are allowed to frame the employment relationship as a community where both sides equally follow Christian values (*Christliche Dienstgemeinschaft*) and specific interest representation including a right to strike is deemed unnecessary. Nevertheless, activities of the United Service Sector Union are not only geared towards employees in public but also in non-profit organisations as central issues such as low wages, stressful working conditions, and understaffing apply across the board. Throughout the last decade, ver.di has intensified organising in the childcare sector, taking up the widespread discontent of childcare workers with wages and working conditions, and from 2009 onwards has been able to mobilise this workforce to participate in powerful strikes for higher wages (DW 2009). Since then, the issues of fair wages, quality of childcare and quality of working conditions, and more generally the appreciation and attractiveness of childcare work have been on the agenda. Union representatives state that organising activities helped to activate and include more workers, full-time and part-time, from public and non-profit daycare institutions, although union membership is still low. An annual conference for activists in childcare and social work, established more than a decade ago, serves to discuss ongoing structural problems such as low wages and understaffing. In 2021, the conference held in the city of Kassel with more than 150 participants served to identify main quests for the next wage bargaining (ver.di Kasseler Erklärung 2021, see also section I.4.1).

Alongside the service sector union as the main and most important player in the field, several smaller professional organisations/unions are active in the fields of education and social work. They are, however, mainly focusing on the group of teachers and social workers and less on childcare workers. One organisation, called Association of Education (*Vereinigung Bildung und Erziehung*, VBE) with 164,000 members is focusing on early childhood education, too. By advocating higher appreciation and better staffing of ECEC, not only primary school teachers but also childcare workers are addressed (see VBE 2021).

LTC: Employment relations

Compared to the German employment relations system as a whole, the representation of interests in LTC is particularly weak and deficient, and the self-organisation of LTC workers "from below" is very low (Schroeder/Kiepe 2020: 223–224). One possible reason for the low union density could be the high workload of LTC employees: At the end of a long working day, they have no energy to attend a union meeting (expert interview 2). Moreover, the few possibilities for representing the interests of care employees are very fragmented as there are very different types of trade unions. The United Service Sector Union is the main union for all care workers (LTC and ECEC). However, due to resource constraints and few LTC members, the United Service Sector Union is too weakly positioned to provide an adequate representation of interests for LTC employees. Apart from the United Service Sector Union there are some more and partly competing actors of the employment relations in the LTC sector. Some smaller "yellow trade unions" (such as the *Berufsgewerkschaft DHV e. V.*, the *Gewerkschaft Öffentlicher Dienst und Dienstleistungen* (GÖD), or the *komba gewerkschaft e. V.*) are more employer-friendly and regionally organised, especially in Eastern Germany (Evans 2016: 26). Another actor is the Bochum's Union (*Bochumer Bund*, BB), founded in 2020. In contrast to the multibranch association principle of the United Service Sector Union (and all other DGB-organised unions), the Bochum's Union is based on a sectoral union principle (*Spartengewerkschaft*) that represents care workers

as a single occupational group. With nearly 2,000 members in November 2021 (Bochumer Bund 2021), the Bochum's Union has too few members to advocate the interests of care employees. Another collective actor that should be mentioned on the employees' side are the nursing chambers. While the United Service Sector Union generally rejects nursing chambers with compulsory membership fees, the Bochums's Union sees potential in strengthening the profession of the care sector and is arguing in line with the German Professional Association for Nursing Professions (*Deutscher Berufsverband für Pflegeberufe*, DBfK). The German Nurses Association is the largest free professional nurses' association in Germany for health and nursing care, geriatric care and health and children's nursing care.

Foundation opportunities for Chambers of Nursing Professions (*Pflegeberufekammern*) exist only at the federal state level and were set up only in some states. The Chambers of Nursing Professions are based on a corporation under public law (*Körperschaft des öffentlichen Rechts*) and follow a self-administration principle. In 2021, the Chamber of Nursing Professions in Rhineland-Palatinate is the last active chamber in Germany as the Chamber of Nursing Professions in Lower Saxony and the Chamber of Nursing Professions in Schleswig-Holstein have been closed recently. These closing processes were part of a controversial discussion about the advantages and disadvantages of the chambers in Germany (expert interviews 1, 4, and 5). Main arguments for nursing chambers are, inter alia, the important tasks to secure professional standards, professional supervision and to be responsible for professional and further training regulations and registration. In chamberless states, the states can adopt independent laws on professional and further training regulations as well (as done by Bremen and Lower Saxony, for example) while in Rhineland-Palatinate, the state commissioned the nursing chamber to suggest professional and further training regulations (expert interview 1). Arguments against nursing chambers are first, that although chambers should secure professional supervision, professional supervision only applies in cases of gross negligence or non-professional conduct. Therefore, quality assurance, protection, and safety from unqualified care cannot be the task of a professional chamber (Chamber of Employees Bremen 2018). For quality assurance and responsibilities there are clear legal and contractual responsibilities. Compliance with professional standards is subject, among others, to the medical service of the health insurance funds, the home inspectorate, or the public health department. Service providers and employers are directly responsible. Second, only highly qualified and typically self-employed professions are organised in professional chambers in general. Professional and further training regulations of dependent occupations are, generally, laid down in special laws in addition to the vocational training law (*Berufsbildungsgesetz*). Originally, only free professions regulate registration, professional and further training by means of professional chambers (expert interviews 3 and 5). Nurses would have to pay for the regulation of their occupation while other occupations do not (expert interview 5). In particular, nurses would be in charge individually of their further training instead of their employers.

Third, in nursing chambers only nurses with three years of professional training are organised while 50 per cent of workers in LTC only have two years of training or less (expert interview 4), and the share of these workers will increase due to the new staffing assessment procedure (Rothgang et al. 2020a) introduced in LTC which will take effect in July 2023. Fourth, nursing chambers cannot regulate many of the factors that contribute to the feeling of a lack in appreciation of nurses such as wages, reliable working hours, recognition of professionalism, sufficient time for good care through mandated staffing levels, etc. Most of this lies in the realm of nursing unions or works councils and is not part of the responsibility of the nursing chambers (expert interviews 4 and 5). Professional associations can better represent the professional interests of nurses since they are not committed to the public interest as nursing chambers are (expert interview 4).

Furthermore, the highest decision-making body of the joint self-government in the German healthcare system, the Federal Joint Committee (G-BA), is politically loaded and already well established (*hoch vermachtet*). Nursing chambers are not automatically members, and it is also not the chamber of physicians that takes part in this committee but the National Association of Statutory Health Insurance Physicians (*Kassenärtztliche Bundesvereinigung*, KBV). Therefore, nursing chambers would have too much struggle to become powerful actors and will thus not be part of the committee (expert interviews 9 and 5).

Last but not least, there is not enough support for nursing chambers among nurses themselves (expert interviews 1, 2, 4, and 5): Lower Saxony and Schleswig-Holstein established one, but both were abolished

after vast majorities of nurses voted against them. The only nursing chamber remaining at present is the one of Rhineland-Palatinate and another nursing chamber is to be established in North Rhine-Westphalia. All aspirations in other states failed so far and the experts interviewed do not expect a further expansion of nursing chambers in other federal states of Germany (expert interview 1).

On the employers' side, the private, public, and non-profit providers are diverse and the collective actors in LTC are fragmented as well. The Employers' Association for Care (*Arbeitgeberverband Pflege*, AGVP) is a federation of private for-profit employers, the *BPA AGV* is a private employers' association that split from the AGVP in 2015, the *AWO AGV Germany* is an association of non-profit employers (which, however, only includes a part of the autonomous AWO providers), and the *BVAP* (founded in 2019) is the first and, so far only joint federation of public, private, and non-profit employers (for more information see section I.5.1). The employers' associations and, in particular, the AGVP and the BPA AGV were implemented to create a defensive front (*Abwehrfront*) against trade unions and regulation of the LTC sector (Schroeder 2017: 35).

The fragmented employment relations system, the weak representation of LTC employees' interests, and the low degree of their self-organisation lead to an improvised collective bargaining autonomy (*improvisierte Tarifautonomie*) (Schroeder/Kiepe 2020: 214), a low collective bargaining coverage, and a lack of influence of collective agreements as described in the next section.

I.4 The working conditions in the ECEC and LTC services in Germany

I.4.1 Regulation of terms and conditions of employment in the two subsectors: main collective agreements applied and relevant legislation

The legal framework of employment relations is characterised by different labour law systems and heterogeneity in collective bargaining law. The labour law is divided into the first, second, and third way (Evans 2016: 24): While the first way involves the more or less unilateral determination of pay and working conditions by the employer (in Germany in part applying to civil servants), the second way corresponds to the collective agreement model based on the norm of social partnership codified in article 9, paragraph 3 of the German Basic Law (*Grundgesetz*) and specified in the collective agreement law (*Tarifvertragsgesetz*) and Works Constitution Act (*Betriebsverfassungsgesetz*). In contrast to the second way's collective agreements, labour contract guidelines (*Arbeitsvertragsrichtlinien,* AVR) are applied in the third way, valid for the Christian non-profit organisations (*Diakonie* and *Caritas*). In this case of church labour law, the guidelines are enacted by labour law commissions (*ARK*), consisting of equal numbers of employees and employers. As they are less binding than collective agreements, individual employment contracts may deviate from the respective regulations (ver.di Kircheninfo 2021: 9-10). Moreover, irrespective of equal representation in the commission, employees in church-run organisations do not have a right to go on strike; based on a Christian community ethos they rather have to comply with the regulations set by the organisation. Origins of the *Third Way* date back to the church's right to self-ordering and self-administration, originally codified in articles 136–139 and 141 of the Weimar Imperial Constitution (*Weimarer Verfassung*). Nowadays, the third way is constitutionally anchored in article 140 of the German Basic Law (ver.di Kircheninfo 2021: 9-10). For ECEC and LTC collective agreements, applying mainly to public employers, and labour contract guidelines, applying to the religious non-profit providers, play a role; unilateral determination is not relevant as there are no civil servants employed in these fields.

ECEC: Public sector collective agreement

In ECEC employees in child daycare facilities run by municipalities are paid according to the public sector collective agreement specified for social and educational services (*TVöD-SuE*). Non-profit organisations as the most important employers in the field tend to adopt the public sector pay scales in their AVR regulations, thus contributing to a homogenization of pay in the field. Private providers, who are often neither willing to set up collective agreements nor to adapt to the public sector wage scales, are of minor importance. Hence, compared to LTC, coverage by agreements and more or less binding regulations regarding pay is

broader in ECEC. Throughout the last years, the respective agreements were able to secure a continuous rise in wages, from 2012-2017 amounting to 15.7 per cent. However, this increase occurred when starting from relatively low levels (WSI Tarifarchiv 2021), and quests for a substantial rise in wages are still on the agenda. Alongside wage setting, collective agreements have tried to address stressful working conditions often deriving from understaffing, an issue to be addressed in section I.4.2.

LTC: Public sector collective agreement

Eurofound (2020: 51) provides an overview of collective bargaining in LTC. The collective bargaining principle in LTC includes public sector collective agreements, agreements of the private non-profit institutions, and other private agreements. The *TVöD-B* is a public sector collective agreement in LTC, including the United Services Trade Union (*ver.di*), the Confederation of Municipal Employers' Associations (*VKA*), and the federal government. Agreements of the private non-profit (church) sector are based on a private company agreement or negotiated individually. For employees of church-based LTC providers, employment contract guidelines (*AVR*) are applied, while the *BVAP-TV* is valid for other certain non-profit providers. Agreements of the other private sectors are company agreements or individual agreements (Eurofound 2020: 51).
In public institutions, the *TVöD* was applied to about 39,000 employees in 2016 (German Government 2019: 164). For about 344,000 employees of church-based LTC providers (188,000 employees of the *Diakonie* and 156,000 of the *Caritas*) employment contract guidelines (*AVR*) were applied. Thus, many care workers in the public and church-based sectors are covered by collective agreements or employment contract guidelines. However, only a minority of care workers of the non-profit providers *AWO* (30,000 employees), the *German Red Cross* (4,200 employees), and the parity-based Worker's Welfare Association (*Paritätischer Wohlfahrtsverband*, 14,700 employees) were tariff covered (German Government 2019: 164). In contrast to employees of public and non-profit providers, no collective agreement is applied to employees of private providers (such as the *AGVP*) so far. In total, the estimated proportion of workers covered by collective bargaining in LTC is about one-third (Eurofound 2020: 51).

I.4.2 Working conditions in the ECEC and LTC services

ECEC: Working conditions

Experts and reports state that throughout the last years working conditions in childcare have become more stressful. Following the most recent and comprehensive study based on data of the German Socio-Economic Panel (Gambaro et al. 2021), comparing different professional groups in education, healthcare, and administration, trained childcare workers are far less content with their working conditions than primary school teachers and just as much discontent with their health status as nurses.[11] Eight out of ten childcare workers suffer from time pressure and feel strained by their low income (Gambaro et al. 2021: 327–328). Full-time care workers tend to be more prone to feelings of overcommitment than part-time workers. At the same time, the majority of workers do not want to change the working time (Gambaro et al. 2021: 329). The authors conclude that employees in this field need more monetary and non-monetary acknowledgement and better access to further education. In line with academic experts in the field, they propose more multi-professional teams and better staffing (Gambaro et al. 2021: 351).

Staffing as a main problem

Experts, as well as practitioners, have identified several reasons for the perception of and rise in stressful working conditions. First and foremost, staffing is a problem. As table 10 shows, staffing ratios in childcare facilities improved only moderately from 9.3 to 8.2 between 2012 and 2020 (Destatis 2020c) and are lower in West than in East Germany. Indeed, the fast expansion of childcare, forced not least by the establishment

[11] An earlier study has already documented that health problems are prominent: Irrespective of high commitment, trained childcare workers stated that they want to quit before retirement age mainly due to health problems. Indeed, in 2011only 18 per cent of employees in the field of childcare worked until retirement age (Klaudy et al. 2016: 21).

of the rights to childcare for children aged 3 to school age and children aged 1-3, was not paralleled by a substantial improvement in staffing, due to budget constraints claimed by municipalities and regional states. Moreover, the increased heterogeneity of children regarding the ethnic and social background and the paradigm shift in understanding ECEC ('early education' instead of 'just care') implied new tasks such as language training for children with migrant backgrounds, pre-school activities, and more team consultation and case discussion to cater to diversified needs of children. Additionally, bureaucratic requirements such as documentation, tend to counteract the aim of high quality of care as they reduce time spent directly with the children. To this background, experts as well as leading staff and childcare workers report that staffing in relation to the additional tasks is insufficient and work intensification has increased (expert interview 7: 3).

Table 10: Staffing ratios in daycare centres for groups with children under 3 years, 2012–2020

	Caregiver to children								
	2012	**2013**	**2014**	**2015**	**2016**	**2017**	**2018**	**2019**	**2020**
Baden-Württemberg	8.3	7.8	7.4	7.1	7.0	6.9	6.7	6.6	6.5
Bavaria	8.8	8.8	8.8	8.6	8.5	8.3	8.2	8.2	8.1
Berlin	-	-	8.5	8.4	8.6	8.3	8.2	8.1	7.9
Brandenburg	11.1	10.9	11.0	11.0	10.7	10.3	10.0	9.8	9.4
Bremen	7.6	7.3	7.6	7.5	7.3	7.4	8.0	7.1	7.5
Hamburg	9.3	9.0	8.5	8.4	8.7	8.2	7.8	7.7	7.6
Hessen	9.6	9.5	9.5	9.4	9.2	9.3	9.2	9.3	9.1
Mecklenburg-West Pomerania	14.2	14.1	13.8	13.4	13.1	12.8	12.7	12.4	12.3
Lower Saxony	8.6	8.4	8.4	8.2	8.1	8.0	7.7	7.8	7.8
North Rhine-Westphalia	9.0	8.9	8.6	8.3	8.2	8.1	8.0	7.9	7.9
Rhineland-Palatinate	8.6	8.3	8.2	7.9	7.9	7.8	7.9	7.8	7.8
Saarland	9.8	9.9	9.6	9.5	9.7	9.4	9.7	9.5	9.6
Saxony	13.0	12.8	12.9	12.9	12.8	12.4	12.0	11.6	11.2
Saxony-Anhalt	11.8	12.1	11.3	11.3	10.7	10.5	10.6	10.4	10.1
Schleswig-Holstein	8.8	8.7	8.6	8.3	8.4	8.1	7.8	7.7	7.5
Thuringia	10.6	10.3	10.6	10.6	10.7	10.6	10.7	10.6	10.3
Germany	**9.3**	**9.1**	**9.0**	**8.7**	**8.7**	**8.6**	**8.4**	**8.3**	**8.2**

Source: Destatis 2020c.

Hence, staffing is still on the political agenda of Central and State Ministries of Education as well as between employers and unions. In the ongoing discussions defining 'adequate levels of staffing' has proved difficult, as demands in childcare facilities differ depending on the socio-structural composition of the children, the size, and the location (larger and smaller cities, more or less segregated neighbourhoods) of the facilities. Some experts suggest to resort to the criteria of 'time spent on non-direct pedagogical tasks' rather than on 'personnel per a certain number of children' in order to account for the above-mentioned heterogeneity (expert interview 7: 15).

Further education

Another aspect regarding both staffing and the quest for a better quality of ECEC is the need for further education. Obviously, the new demands on childcare workers are contributing to strainful working conditions and feelings of overburdening. However, access to and time for further education have to be regulated, and willingness to take up respective training again requires additional personnel for the daycare facilities.

Finally, looking into the future, robust und sophisticated recent estimations on the workforce demand in ECEC (taking into account the coverage norms set by the recent reforms and the demographic structure regarding children and birth rates) prognosticate a shortage of least 20,400 skilled childcare workers in West Germany until 2025, whereas in East Germany the labour shortage will be less pronounced (Rauschenbach et al. 2020: 51). So far, training capacities in the regional states, especially in the West are still too small to cover this short-term demand. Obviously, working in ECEC and taking up respective training would be more attractive to secondary school graduates, if training would not imply school fees but be gratified (as is the case in the firm and school-based vocational training programmes, *duale Ausbildung*) and if wages in the field would be higher (expert interview 7: 15).

LTC: Working conditions

Wages as a main problem

Working conditions in LTC deviate significantly form typical employment relations because part-time work is very widespread in this sector (see section I.1.3). Furthermore, a high workload is problematised by LTC workers themselves (DGB-Index Gute Arbeit 2018) and many LTC employees are not satisfied with their income (Rothgang et al. 2020b: 161). Based on the representative survey *DGB-Index 2018*, 78 per cent of elderly care workers belive that they are not paid fairly according to their performance (DGB-Index Gute Arbeit 2018: 5).

In LTC, the wage level is very low compared to childcare and nursing occupations. For years, pay in elderly care has been below the average for all employees and at the same time significantly below wages in nursing. Since 2012, wages in nursing have risen largely in line with the general wage development, while increases in elderly care (assistants and professionals) have been slightly above the average. The wage differences between elderly care and nursing care have slightly narrowed over time, but are still very large (Carstensen et al. 2021: 2; Rothgang et al. 2020b: 160). The median of the average monthly gross income of full-time trained personnel in elderly care was 2,373 euros in 2012, and 2,877 euros in 2018 (Rothgang et al. 2020b: 160). Qualified elderly care assistants received an average monthly gross income (median) of 1,682 euros in 2012, and 2,041 euros in 2018 (Rothgang et al. 2020b: 160). From 2012 to 2017 there was a general (21 per cent) increase in wages in LTC, however, earnings remain at a low level and high differences by providers should be considered in detail. In particular, the wage level of private providers is the lowest.

In 2020, the minimum hourly wage for unskilled carers was 11.35 euros in Western Germany and 10.85 euros in Eastern Germany. This equates to about 24,000 euros (West) and 23,000 euros (East) per year for a 40-hour working week (Eurofound 2020: 37). In 2021, the minimum wage slightly increased to 11.80 euros in Western and 11.50 euros in Eastern Germany (BMG 2020). Furthermore, on 24 June 2021, a judgement of the Federal Labour Court was announced that the minimum wage must be paid for live-in care workers as well (Tagesschau 2021).

In order to improve payment terms and working conditions, one of *ver.di's* demands is an extension of the minimum wage for skilled workers, too, as well as minimum holidays (expert interview 5). However, an attempt by *ver.di* and the employers' association *BVAP* (expert interview 6) to increase hourly wages for trained geriatric care workers in four steps up to 18.50 euros from January 2023 failed as church providers rejected to join the collective bargaining agreement. The church-based right of self-determination allowed the employers' association *Caritas* to veto the extension of the collective agreement negotiated by *ver.di* and *BVAP*. Reasons for the veto position are that, in contrast to collective bargaining agreements, the *Caritas* would like to keep its autonomy and the collective bargaining agreement would have been below the level of the Caritas' employment contract guidelines (*AVR*). Therefore, the *Caritas* was afraid that its own wages would no longer be reimbursed by cost units and that it would have lost its competitiveness in the highly competitive skilled labour market. Church providers are a challenge for trade unionist work because they generally dismiss trade union activities (Schroeder 2018: 212–213), and strikes are prohibited for employees

of church providers (2 BvR 2292/13, Federal Constitutional Court 2015)[12]. Moreover, as wage increases take place regularly for employees of church providers, there is no strong incentive for their union participation. The *GVWG* (passed in June 2021) is a further initiative to improve wage levels for care workers, to oblige especially private providers to adhere to wages negotiated in regional collective bargaining (as a minimum threshold) or to pay at least average wages, and to regulate a limitation of the own contributions (*Eigenanteile*) as well as mandatory staffing levels (BMG 2021). Although initially intended, a general national collective bargaining agreement failed in 2021.

I.5 The actors of the employment relations in the ECEC and LTC services in Germany

I.5.1 Presentation of the main actors, characteristics, relevance in the employment relations system, power

ECEC: Main actors, characteristics, relevance in the employment relations system, power

As described in section I.3.2, the main actors in employment relations in ECEC are the public sector employers and non-profit organisations on the one hand, and the United Service Sector (*ver.di*) on the other hand. Although less than one-third of all childcare workers is employed in public childcare facilities run by municipalities and the religious non-profit organisations as major employers do not follow the general collective agreement framework relevant for the workforce in Germany, the agreements of *ver.di* with the public employers are important, as they usually set standards in wages and can serve as a blueprint for the labour regulations in the non-profit organisations. While unions in general and *ver:di*, too, have suffered in the past from membership loss and escape and disregard of collective agreements by employers in several industries and services, the ECEC sector is less affected. Rather, throughout the last decade, the political expansion of childcare as well as the middle-class quest for extended and high-quality early education have proved beneficial to set the issue of wages and staffing on the agenda. As far as *ver.di* was able to take up the increased willingness of childcare workers to engage and even go on strike for these claims, the union got more powerful. Organising in the field of childcare helped to gain members in the public sector institutions, and *ver.di* also intensified engagement with regard to the employees in religious non-profit organisations (see for example the periodical newsletter *kirchen.info*).

As the level of regional states' politics is crucial for the budgets of municipalities providing childcare and the rules for implementation of the recent reforms (especially the expansion of capacities for childcare and for setting the staffing levels), *ver.di* has intensified cooperation with the local public employers association (*Verband kommunaler Arbeitgeber*, VKA). The idea is a joint action, to influence the representatives of state governments on these issues with separate activities. This is remarkable, as the *VKA* is the counterpart in negotiations on collective agreements. Nevertheless, both parties agree, that any progress with regard to labour supply, staffing levels, wages, and working conditions hinges on the decisions for budget and regulations of early childhood education on the regional state level (expert interview 7: 9).

Another issue raised by union experts regards the complicated governance structures between central state legislation and regional and local level governance. As the expansion of childcare was initiated by central legislations and in part is financed by the central state, central state agencies insist on control of spending and evaluation of implementation also regarding the quality aspects of the respective reforms. To this end for example for the *Gute-KiTa-Gesetz* specific bodies were set up, which establish intermediate structures alongside the existing bodies of coordination. Thus, not only bureaucracy increases, but there is also the risk that the extent of co-determination of the established bodies of employee representation on the shop floor level (*Personalräte*) and in collective agreement negotiations suffer, as some topics might be exclusively discussed and determined in the new bodies (expert interview 7: 6–7).

[12] In 2015, the Federal Constitutional Court confirmed the third ways' principle of the exclusion of the right to strike in church and diaconal institutions through the church labour law (Evans 2016: 24).

LTC: Main actors, characteristics, relevance in the employment relations system, power

As already described in section I.3.2, the United Service Sector Union (*ver.di*) is the main actor of employees' representation of interests in LTC (see figure 9). However, due to continuously decreasing membership numbers, only few LTC members, and a low level of self-organisation, ver.di's power and its influence capabilities are very restricted. Even smaller than the United Service Sector Union are *yellow trade unions*, such as for instance the *Berufsgewerkschaft DHV e. V.*, the *Gewerkschaft Öffentlicher Dienst und Dienstleistungen* (GÖD), or the *komba gewerkschaft e. V.*. These are more active in single regions and especially located in Eastern Germany (Evans 2016: 26). Within the framework of the *third ecclesiastical way* (see section I.4.1), there are also some small employees' interest groups. The association of church and diaconal employees *VKM* (*Verband kirchlicher und diakonischer Mitarbeiterinnen aller Berufsgruppen e. V.*) is a member-based association in the sense of a "church trade union" that represents the employees in the church Labour Law Commissions and diaconal organisations (mainly *Diakonie Deutschland*, *Rhineland-Westphalia-Lippe*, *Baden*, *Bavaria*, and formerly *Hessen-Nassau*) (Evans 2016: 26).

Following a self-organisation principle, a group of nursing students from the University of Applied Health Science Bochum founded the Bochum's Union in 2020 to represent the interests of care workers as a specific occupational group. In November 2021, the Bochum's Union has got 2,000 members (Bochumer Bund 2021). So far, it has too few members to be a relevant actor of the employment relations system in LTC.

Nursing chambers are a further, more regional collective actor of the employment relations system on the employees' side. In Germany, the nursing chamber in Rhineland-Palatinate is the last active one since the nursing chamber in Lower Saxony and the chamber in Schleswig-Holstein have been closed recently. These closures have triggered a controversial discussion about the relevance of nursing chambers and their role of interest representation (see section I.3.2). A main conclusion of the expert interviews is that nursing chambers are not responsible to improve working conditions of LTC workers (instead, this should be the task of trade unions) (expert interview 4) and the experts interviewed do not expect a dispersion of nursing chambers in other federal states of Germany (expert interviews 1 and 4). Different institutional regulations, regional fragmentations, and the multiple coexistences of trade unions, occupational associations, and chambers hinder a functioning representation of employees' interests.

Similar to the employees' side, the side of employers is fragmented as well (Evans 2016: 24). The employers' associations are subdivided by private for-profit, non-profit, and church-based associations. Private for-profit providers are represented by the employers' associations *AGVP* and *BPA AGV*. The *BPA AGV* split off from the *AGVP* in 2015 because the interests of small care companies were not sufficiently represented by the *AGVP* which is more characterised by medium-sized companies (Evans 2016: 25). In addition, the establishment of the Minimum Wage Commission for Care (*Pflegemindestlohnkommission*) in 2014 opened up new opportunities for institutional participation for private care providers. Against the backdrop of debates about the *Social Wage Agreement* (*Tarifvertrag Soziales*) and a generally binding collective agreement for elderly care in Bremen and Lower Saxony in 2015, the uncertainty of small private providers increased (Evans 2016: 25). Therefore, the founding of the *BPA AGV* was in line with the idea of strengthening the interest representation of small private care providers, to be part of the Minimum Wage Commission for Care, and to be represented by two private employers' associations: Both the *BPA AGV* and the *AGVP* are members of the current Minimum Wage Commission (Evans 2016: 26). Thus, the foundation of the *BPA AGV* is a reaction of government regulations of the LTC sector (Evans 2016: 26) and employers' associations like the *AGVP* and the *BPA AGV* create a defensive front (*Abwehrfront*) against trade unions (Schroeder 2017: 35).

On the side of non-profit providers, the *Caritas* does not have an employers' association in a classical sense. The organisation of employers' interests is carried out by the Labour Law Commission of the German Caritas Association. However, single *Caritas* providers have joined together in the Caritas' Working Association *AcU* (*Arbeitsgemeinschaft caritativer Unternehmen*) (Evans 2016: 25). Other church-based protestant employers are united in the *VdDD* (*Verband der Diakonischen Dienstgeber in Deutschland e. V. Diakonie*), founded in 1996. The *AWO AGV Germany* is the main association of charitable non-profit employers and generally

has the highest representational capacity of all non-profit employers' associations, but it only covers a part of all the autonomous *AWO* providers. Providers of the German *Paritätischer Wohlfahrtsverband* do not organise their interests in classic employers' associations as this would be in contrast to their basic programmatic orientation. They organise the employers' interests in regionally oriented collective bargaining organisations (e.g. P*ATT* in Thuringia, *Paritätische Tarifgemeinschaft e. V.*, etc.) (Evans 2016: 25). Also, the employers of the *German Red Cross* are organised more regional.

The *VKA* (*Vereinigung der kommunalen Arbeitgeberverbände e. V.*) represents the interests of the few public municipal employers in LTC. As a party of the collective agreement for the public service (*TVöD*), it regulates the working conditions for municipal employees and concludes collective agreements with trade unions (VKA 2021).

In 2019, the *BVAP* was founded (expert interview 6). As part of the *Concerted Action on Care* (*Konzertierte Aktion Pflege*, KAP) of the German Ministry of Health, the Federal Ministry for Family Affairs, Senior Citizens, Women, and Youth, and the Federal Ministry of Labour and Social Affairs, the *Law for the Improvement of Wages in the Care Sector* (*Pflegelöhneverbesserungsgesetz*) was introduced in 2019 in order to extend collectively agreed minimum working conditions to all LTC providers. In response to this government intervention, the *BVAP* was founded. The aim of the *BVAP* was to conclude a nationwide collective agreement based on § 7a of the Posted Workers Act (*Arbeitnehmer-Entsendegesetz*) (expert interview 6). However, a general national collective bargaining agreement failed in 2021 (see section I.4.2). So far, the *BVAP* is the first and only association that would like to represent public, private, and non-profit employers together (expert interview 6). Despite this aspiration, the BVAP's members are not very heterogeneous until now as it includes mainly employers of the *AWO*, as well as a few others of the *Diakonische Dienstgeber Niedersachsen*, the *Arbeiter-Samariter-Bund*, the *Paritätischer Gesamtverband*, and the *Volkssolidarität* (for a list of BVAP members, see ASB 2021).

I.5.2 Role played by the actors, organisational dilemmas and strategies

ECEC: Role played by the actors, organisational dilemmas and strategies[13]

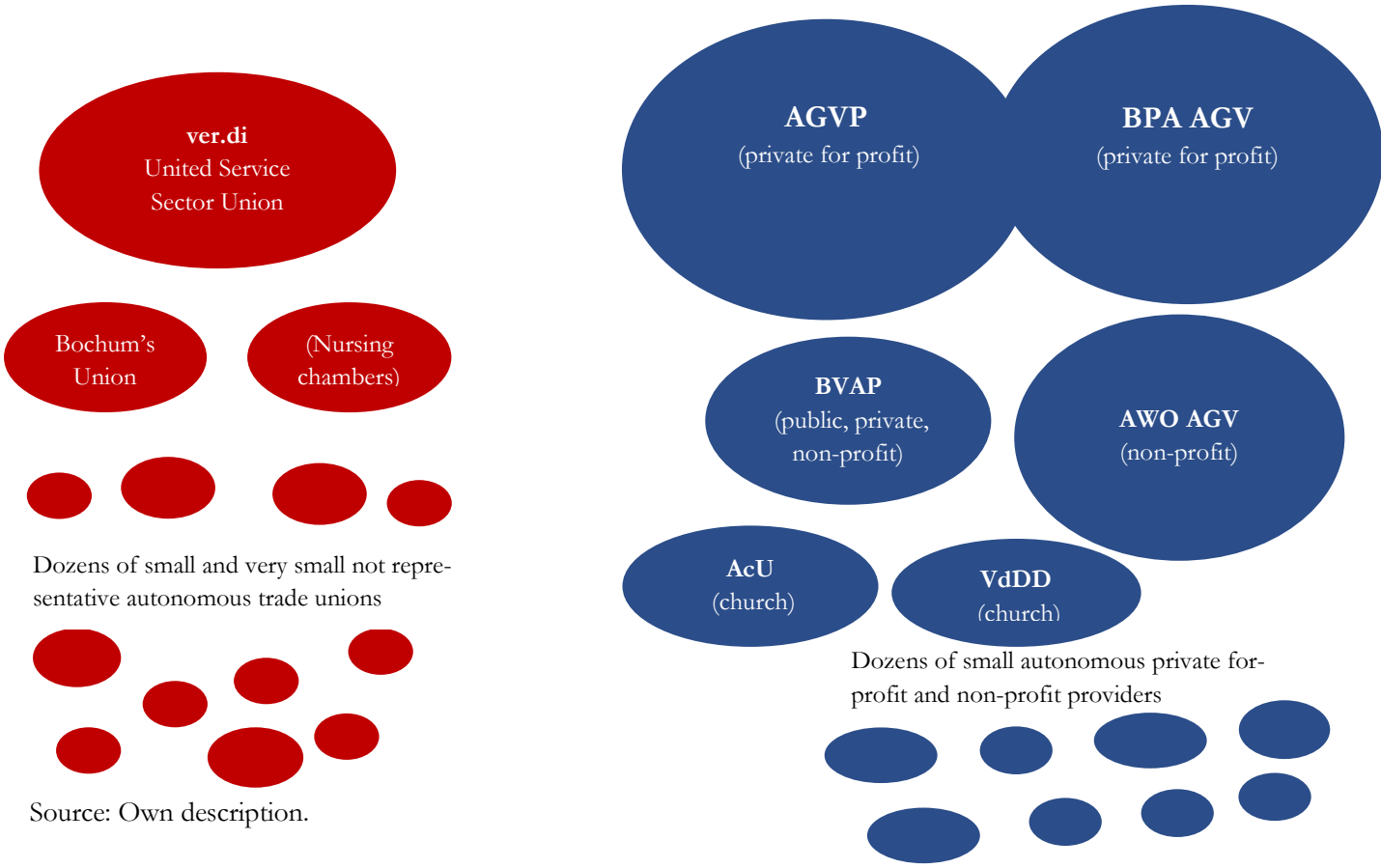
LTC: Role played by the actors, organisational dilemmas and strategies

Based on the research findings of the German case study, a lot of organisational dilemmas have been identified. The state as an actor has a dual function: the state is a regulator of the employment relations system in LTC and, at the same time, an employer for employees in public institutions. On the one hand, it is a state task to change the precarious conditions in care work. On the other hand, the state itself has an interest in keeping salaries budget-friendly and competitive. Moreover, the employment relations system as a whole is very fragmented, many competing actors are part of this system, and the role of their representation possibilities is partly weak and uncertain. For example, the role of the nursing chambers is a "major misunderstanding" (expert interview 4) in a controversial discussion as the chambers are not responsible to improve working conditions, they have no full legitimacy to represent employees' interests, and the experts interviewed do not expect an expansion of nursing chambers (expert interviews 1, 4, 5, and 9). On the caregivers' side, the degree of self-organisation is very low as LTC workers do not have the time and energy to be active trade union members. Work strain could be a reason for the low union density (expert interview 2). In line with these findings, we conclude that the fragmented employment relation system, competing actors, the weak representation of LTC employees' interest, and the low degree of their self-organisation lead to an improvised collective bargaining autonomy (*improvisierte Tarifautonomie*) (Schroeder/Kiepe 2020: 214), a low collective bargaining coverage, and a lack of influence of collective agreements.

[13] In order to avoid repetitions, roles played by the actors, organisational dilemmas, and strategies in ECEC will be taken up again and explored more in-depth in the next stage.

I.5.3 Visual map of the actors and relationships among them

Figure 9: The actors of the employment relations field in the LTC sector in Germany: Trade unions (in red) and employers' associations (in blue), represented according to their quantitative relevance



Source: Own description.

I.6 Conclusions and problems identified by research

Apart from the organisational dilemmas discussed in section I.5.2, there are some broader issues identified by research:

- *Federalism and complexity in interaction of the different state levels*: The German federalism locates policies and governance of social services at the regional state level and especially provision on the local level. However, throughout the last two decades, central state reforms in these fields strengthened the role of the central level, and regional states became more dependent on central budgets while at the same time safeguarding their legislative and executive power. Hence, not only does the provision of social services and employment conditions vary by the 16 regional states but levels of policymaking and fields of action of interest representation have been multiplying. This opens up new arenas and new options/needs for a coalition for interest representation and policymaking of social partners.
- *Contradicting welfare (and gender) paradigms:* While the subsidiarity principle adhering to a male breadwinner model and family provision of care is still effective in many institutions, the labour market and childcare reforms of the last two decades rather follow a dual-earner and/or adult worker model. How do these contradictions play out given the differentiation of care provision on the regional state level and the structural differences in ECEC and LTC?

- *Different pathways in ECEC and LTC:* Germany seems to catch up in the provision of ECEC, and policies in this field rather follow the social-democratic welfare state type than the conservative type. This is especially pronounced in the city-states and partly due to the state socialist tradition in the Eastern states as well. In contrast, the insurance-based LTC system, designed with a care benefit to care recipients fostering unpaid and informal care in the family, rather follows the subsidiarity principle. As the expanding demand for LTC was answered in a neoliberal way with the opening and licensing of private LTC providers, a 'hard' privatisation of public infrastructure occurred from 1995 onwards. Profitmaking in LTC (expert interview 2), private equity in LTC (expert interview 5), and competition have shaped the supply side since then. What are the implications of these different pathways for interest representation by the United Service Sector Union?
- *Gender issues, underevalutation of care work, understaffing, and unmet labour demand*: Women still provide the bulk of unpaid care work and mostly female employees provide ECEC and LTC services, but receive little recognition (in terms of wages, career prospects, visibility, and appreciation/prestige) even though this work is of great 'system relevance' for the society as a whole. Not least the ongoing Corona crisis made visible that 'applause' is not enough. At the same time Germany is confronted with a severe deficit in care workforce in both fields, though more pronounced in LTC, and the demand will rise in the next two decades. How do and can social partners address these structural issues which are out of the realm of collective agreements, but ask for national and international (see migration) political answers?

Based on the research findings of this report, we recommend for the selection criteria of the case studies to look for successful social dialogue activities addressing the issues of unsatisfying working conditions including low wages and recruitment problems and to account for the specific weakness and fragementation of labour relations in LTC (role of private and religious providers, low union membership) compared to ECEC.

References Part I

Ärztezeitung 2020: Deutschland bei Langzeitpflege-Ausgaben im Mittelfeld. https://www.aerztezeitung.de/Politik/Deutschland-bei-Langzeitpflege-Ausgaben-im-Mittelfeld-406602.html (accessed 16 November 2021).

ASB 2021: Bundesvereinigung Arbeitgeber in der Pflegebranche (BVAP) gegründet. https://www.asb.de/news/arbeitgeberverband-der-pflege-gegruendet (accessed 20 November 2021).

Autorengruppe Fachkräftebarometer 2017: *Fachkräftebarometer Frühe Bildung 2017*. München: Weiterbildungsinitiative Frühpädagogische Fachkräfte.

Autorengruppe Fachkräftebarometer 2019: *Fachkräftebarometer Frühe Bildung 2019*. München: Weiterbildungsinitiative Frühpädagogische Fachkräfte.

Autorengruppe Fachkräftebarometer 2021: *Fachkräftebarometer Frühe Bildung 2021*. München: Weiterbildungsinitiative Frühpädagogische Fachkräfte.

Benazha, Aranka V./Lutz, Helma 2019: Intersektionale Perspektive auf die Pflege: Geschlechterverhältnisse und Migrationsprozesse. In: Rudolph, Clarissa/Schmidt, Katja (eds), *Interessenvertretung und Care. Voraussetzungen, Akteure und Handlungsebenen*. Münster: Westfälisches Dampfboot, 146–160.

BMFSFJ 2019: Gesetz zur Weiterentwicklung der Qualität und zur Teilhabe in der Kindertagesbetreuung (Gute-KiTa-Gesetz). https://www.bmfsfj.de/bmfsfj/service/gesetze/gesetz-zur-weiterentwicklung-der-qualitaet-und-zur-teilhabe-in-der-kindertagesbetreuung-gute-kita-gesetz--127136 (accessed 4 November 2021).

BMFSFJ 2021a: Frauenanteil in den obersten Bundesbehörden. https://www.bmfsfj.de/quote-/daten.html#tabs3 (accessed 8 March 2021).

BMFSFJ 2021b: Zweites Führungspositionen-Gesetz - FüPoG II. https://www.bmfsfj.de/bmfsfj/service/gesetze/zweites-fuehrungspositionengesetz-fuepog-2-164226 (accessed 22 February 2023).

BMG 2020: Entlohnung in der Pflege. Bundesministerium für Gesundheit. https://www.bundesgesundheitsministerium.de/themen/pflege/pflegekraefte/entlohnung.html (accessed 4 November 2021).

BMG 2021: Gesetz zur Weiterentwicklung der Gesundheitsversorgung. https://www.bundesgesundheitsministerium.de/gesundheitsversorgungsweiterentwicklungsgesetz.html (accessed 17 June 2021).

Bochumer Bund 2021: Die Gewerkschaft der professionell Pflegenden. https://www.bochumerbund.de/ (accessed 17 November 2021).

Bosch, Gerhard 2013: Public sector adjustments in Germany: From cooperative to competitive federalism. In: Vaughan-Whitehead, Daniel (ed.), *Public sector shock: The impact of policy retrenchment in Europe*. Cheltenham & others: Edward Elgar, 214–258.

Bundesagentur für Arbeit 2020: *Arbeitsmarktsituation im Pflegebereich*. Nürnberg: Bundesagentur für Arbeit.

Campos, Maria M./Depalo, Domenico/Papapetrou, Evangelia/Pérez, Javier J./Ramos, Roberto 2017: Understanding the public sector pay gap. *IZA Journal of Labor Policy* 6 (7), 1–29.

Carstensen, Jeanette/Seibert, Holger/Wiethölter, Doris 2021: *Entgelte von Pflegefachkräften 2020*. Nürnberg: Institut für Arbeitsmarkt und Berufsforschung.

Chamber of Employees Bremen 2018: Positionierung zu einer Pflegekammer im Land Bremen. https://www.arbeitnehmerkammer.de/fileadmin/user_upload/Downloads/Politik/Rente_Gesundheit_Pflege/Positionierung_Pflegekammer_Bremen.pdf (accessed 11 November 2021).

Christofides, Louis N./Michael, Maria 2013: Exploring the public-private sector wage gap in European countries. *IZA Journal of European Labor Studies* 2 (15), 1–53.

Destatis 2009: *Finanzen und Steuern. Personal des öffentlichen Dienstes 2008*. Fachserie 14, Reihe 6. Wiesbaden: Statistisches Bundesamt.

Destatis 2014: *Finanzen und Steuern. Personal des öffentlichen Dienstes 2013*. Fachserie 14, Reihe 6. Wiesbaden: Statistisches Bundesamt.

Destatis 2019: *Finanzen und Steuern. Personal des öffentlichen Dienstes 2018*. Fachserie 14, Reihe 6. Wiesbaden: Statistisches Bundesamt.

Destatis 2020a: *Pflegestatistik*. Wiesbaden: Statistisches Bundesamt.

Destatis 2020b: *Statistiken der Kinder und Jugendhilfe. Kinder und tätige Personen in Tageseinrichtungen und in öffentlich geförderter Kindertagespflege am 01.03.2020*. Wiesbaden: Statistisches Bundesamt.

Destatis 2020c: *Der Personalschlüssel in Kindertageseinrichtungen 2020. Methodische Grundlagen und aktuelle Ergebnisse*. Wiesbaden: Statistisches Bundesamt.

Destatis 2021a: Employment. Atypical Employment. https://www.destatis.de/EN/Themes/Labour/Labour-Market/Employment/Tables/atypical-employment-zr.html (accessed 17 June 2021).

Destatis 2021b: German labour market to Year 2010, 2019 and 2020. https://www.destatis.de/EN/Themes/Labour/Labour-Market/Employment/Tables/labor-market-key-figures.html#fussnote-2-266530 (accessed 12 November 2021).

Destatis 2021c: Long-term care. https://www.destatis.de/EN/Themes/Society-Environment/Health/Long-Term-Care/_node.html;jsessionid=E000E23222A833155288E5F0BDCC1A6F.live711 (accessed 17 June 2021).

Destatis 2021d: Long-term care Staff in nursing care facilities. https://www.destatis.de/EN/Themes/Society-Environment/Health/Long-Term-Care/Tables/staff-nursing-care-facilities.html (accessed 21 October 2021).

Destatis 2021e: Public children and youth welfare. https://www.destatis.de/EN/Themes/Society-Environment/Social-Statistics/Public-Children-Youth-Welfare/_node.html (accessed 17 June 2021).

DGB 2021: Deutscher Gewerkschaftsbund. Mitgliederzahlen. https://www.dgb.de/uber-uns/dgb-heute/mitgliederzahlen/2010 (accessed 21 June 2021).

DGB-Index Gute Arbeit 2018: Arbeitsbedingungen in der Alten- und Krankenpflege. So beurteilen die Beschäftigten die Lage. https://index-gute-arbeit.dgb.de/++co++df07ee92-b1ba-11e8-b392-52540088cada (accessed 15 November 2021).

DJI 2018: Kinder- und Jugendhilfe wird immer wichtiger. https://www.dji.de/themen/jugend/kinder-und-jugendhilfereport-2018.html (accessed 21 October 2021).

DJI 2019: Kinderbetreuungsstudie. https://www.dji.de/themen/kinderbetreuung/kinderbetreuungsstudie2019/20.html?print=1&cHash=bc7c9d2d3900fe47ec1126bdc777dcd0 (accessed 20 November 2021).

DJI 2021a: Kita-Personal. https://www.fachkraeftebarometer.de/laenderdaten/kita-personal (accessed 21 October 2021).

DJI 2021b: The German ECEC System. https://www.dji.de/en/about-us/projects/projekte/international-centre-early-childhood-education-and-care-icec/the-german-ecec-system.html (accessed 21 June 2021).

Dribbusch, Heiner/Birke, Peter 2019: *Gewerkschaften in Deutschland. Herausforderungen in Zeiten des Umbruchs*. Berlin: Friedrich-Ebert-Stiftung.

DW 2009: Erzieherinnen streiken in ganz Deutschland. https://www.dw.com/de/erzieherinnen-streiken-in-ganz-deutschland/a-4280444-1 (accessed 28 November 2021).

Eurofound 2020: Public services. Long-term care workforce: Employment and working conditions. https://www.eurofound.europa.eu/publications/customised-report/2020/long-term-care-workforce-employment-and-working-conditions (accessed 21 June 2021).

European Commission/EACEA/Eurydice 2019: *Key Data on Early Childhood Education and Care in Europe – 2019 Edition. Eurydice Report*. Luxembourg: Publications Office of the European Union.

Evans, Michaela 2016: Arbeitsbeziehungen der Care-Arbeit im Wandel. *WISO-Diskurs* 23, 1–52.

Federal Constitutional Court 2015: 2 BvR 2292/13. https://www.bundesverfassungsgericht.de/SharedDocs/Entscheidungen/DE/2015/07/rs20150715_2bvr229213.html (accessed 19 November 2021).

Gambaro, Ludovica/Spieß, C. Katharina/Westermaier, Franz G. 2021: Erzieherinnen empfinden vielfache Belastungen und wenig Anerkennung. *DIW Wochenbericht* 2021 (19), 323–332.

German Bundestag 2019: Bundestagsanfrage. Drucksache 19/11887. https://dipbt.bundestag.de/dip21/btd/19/118/1911887.pdf (accessed 29 October 2021).

German Bundestag 2021: Bundestagsanfrage. Drucksache 19/32662. https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwimj--

QoPzzAhXjQ_EDHTsoDFwQFnoECAoQAQ&url=https%3A%2F%2Fdserver.bundestag.de%2Fbtd%2F19%2F326%2F1932662.pdf&usg=AOvVaw2NkB3KgandRyl_mupZTgVW (accessed 3 November 2021).

German Government 2019: Konzertierte Aktion Pflege. Vereinbarungen der Arbeitsgruppen 1 bis 5. https://www.bundesgesundheitsministerium.de/konzertierte-aktion-pflege.html (accessed 18 November 2021).

Gesundheitsberichterstattung des Bundes 2021a: Personal in Pflegeheimen (Anzahl). https://www.gbe-bund.de/gbe/pkg_isgbe5.prc_menu_olap?p_uid=gastd&p_aid=21192582&p_sprache=D&p_help=1&p_indnr=406&p_indsp=&p_ityp=H&p_fid= (accessed 4 November 2021).

Gesundheitsberichterstattung des Bundes 2021b: Personal in ambulanten Pflege- und Betreuungsdiensten (Anzahl). https://www.gbe-bund.de/gbe/pkg_olap_tables.prc_set_svg?p_uid=gastd&p_aid=59827017&p_sprache=D&p_help=2&p_indnr=385&p_indsp=&p_ansnr=71652287&p_version=2&p_svg=2#SVG (accessed 4 November 2021).

Gesundheitsberichterstattung des Bundes 2021c: Pflegeheime (Anzahl). Gliederungsmerkmale: Jahre, Deutschland, Pflegeangebot, Träger, Kapazitätsgrößenklassen. https://www.gbe-bund.de/gbe/!pkg_olap_tables.prc_set_page?p_uid=gastd&p_aid=53969713&p_sprache=D&p_help=2&p_indnr=397&p_ansnr=98151376&p_version=17&D.983=23641&D.493=1000527 (accessed 4 November 2021).

Gesundheitsberichterstattung des Bundes 2021d: Ambulante Pflege- und Betreuungsdienste. https://www.gbe-bund.de/gbe/pkg_isgbe5.prc_menu_olap?p_uid=gastd&p_aid=67776538&p_sprache=D&p_help=0&p_indnr=571&p_indsp=5089&p_ityp=H&p_fid= (accessed 4 November 2021).

Gottschall, Karin 2009: Der Staat und seine Diener. Metamorphosen eines wohlfahrtsstaatlichen Beschäftigungsmodells. In: Obinger, Herbert/Rieger, Elmar (eds), *Wohlfahrtsstaatlichkeit in entwickelten Demokratien. Herausforderungen, Reformen und Perspektiven*. Schriften des Zentrums für Sozialpolitik/20. Frankfurt am Main: Campus, 461–491.

Gottschall, Karin/Abramowski, Ruth 2023: The State as Employer (and Regulator) of Care Services. In: Conley, Hazel/Sandberg, Paula Koskinen (eds), *Handbook on Gender and Public Sector Employment*. Cheltenham/Northampton: Edward Elgar [forthcoming].

Gottschall, Karin/Schröder, Tim 2013: Familienlohn – Zur Entwicklung einer wirkmächtigen Normierung geschlechtsspezifischer Arbeitsteilung. *WSI-Mitteilungen* 66 (3), 161–170.

Gottschall, Karin/Tepe, Markus 2021: The Welfare State as Employer. In: Beland, Daniel/Morgan, Kimberly/Obinger, Herbert/Pierson, Christopher (eds), *The Oxford Handbook of the Welfare State*. Oxford: Oxford University Press, 473–491

Gottschall, Karin/Kittel, Bernhard/Briken, Kendra/Heuer, Jan-Ocko/Hils, Sylvia/Streb, Sebastian 2015: *Public Sector Employment Regimes – Transformations of the State as an Employer. Transformations of the State*. Houndmills/Basingstoke: Palgrave Macmillan.

Hagemann, Karen/Jarausch, Konrad H./Allemann-Ghionda, Cristina (eds) 2011: *Children, Families and States. Time Policies of Child Care, Preschool and Primary Schooling in Europe*. New York: Berghahn Books.

Henninger, Annette/Von Wahl Angelika 2019: This Train Has Left the Station: The German Gender Equality Regime on Course Towards a Social Democratic Model (2013–17). *German Politics* 28 (3), 462–481.

Keller, Berndt K./Kirsch, Anja 2020: Employment relations in Germany. In: Bamber, Greg J./Lansbury, Russell D./Wailes, Nick/Wright, Chris F. (eds), *International and Comparative Employment Relations*. London: Routledge, 179–207.

Klaudy, Elke Katharina/Köhling, Klaudia/Micheel, Brigitte/Stöbe-Blossey, Sybille 2016: *Nachhaltige Personalwirtschaft für Kindertageseinrichtungen. Herausforderungen und Strategien*. Study Nr. 336. Düsseldorf: Hans-Böckler-Stiftung.

Kroos, Daniela/Gottschall Karin 2012: Dualization and Gender in Social Services. The Role of the State in Germany and France. In: Emmenegger, Patrick/Häusermann, Silja/Palier, Bruno/Seeleib-Kaiser, Martin (eds), *The Age of Dualization*. Oxford: Oxford University Press, 100–123.

Krüger, Helga 1999: Gender and Skills. Distributive Ramifications of the German Skill System. In: Culpepper, Pepper D./Finegold, David (eds), *The German Skills Machine. Sustaining Comparative Advantage in a Global Economy*. New York: Berghan Books, 189–227.

Marsden, David 2015: The future of the German industrial relations model. *Journal for Labour Market Research* 48 (2), 169–187.

Mayer, Peter/Schweisshelm, Erwin 2000: The modernization of industrial relations in Germany – trends and perspectives. http://www.fes-korea.org/media/publications/Achives/The%20modernization%20of%20industrial%20relations%20in%20Germany_Mayer-Schwiesshelm2000.pdf (accessed 14 November 2021).

Müller, Kai-Uwe/Wrohlich, Katharina 2014: *Two Steps Forward One Step Back? Evaluating Contradicting Child Care Policies in Germany*. Berlin: German Socio-Economic Panel Study (SOEP).

OECD 2017: *Government at a Glance*. Paris: OECD.

OECD 2021a: OECD members GDP Growth Rate 1961-2021. https://www.macrotrends.net/countries/OED/oecd-members/gdp-growth-rate (accessed 26 November 2021).

OECD 2021b: *Government at a Glance*. Paris: OECD.

Petermann, Arne/Ebbing, Tobias/Paul, Michael 2017: Das Tätigkeitsprofil von Betreuungspersonen in häuslicher Gemeinschaft. https://inicjatywa.eu/wp-content/uploads/2018/01/Petermann-Ebbing-Paul-Das-Tatigkeitsprofil-von-Betreuungspersonen.pdf (accessed 31 March 2021).

Rauschenbach, Thomas/Meiner-Teubner, Christiane/Böwing-Schmalenbrock, Melanie/Olszenka, Ninja 2020: *Plätze. Personal. Finanzen. Bedarfsorientierte Vorausberechnungen für die Kindertages- und Grundschulbetreuung bis 2030*. München: Deutsches Jugendinstitut.

Rothgang, Heinz/Fischer, Johanna 2019: Langzeitpflege. In: Obinger, Herbert/Schmidt, Manfred G. 2019 (eds), *Handbuch Sozialpolitik*. Wiesbaden: Springer, 645–668.

Rothgang, Heinz/Müller, Rolf 2019: BARMER Pflegereport 2019. Ambulantisierung der Pflege. https://www.socium.uni-bremen.de/uploads/News/2019/20191128_BARMER_Pflegereport_2019.pdf (accessed 31 March 2021).

Rothgang, Heinz/Görres, Stefan/Darmann-Finck, Ingrid/Wolf-Ostermann, Karin/Becke, Guido/Brannath, Werner/Cordes, Janet/Fünfstück, Mathias/Heinze, Franziska/Kalwitzki, Thomas/Stolle, Claudia/Kloep, Stephan/Zenz, Cora/Sticht, Sarah 2020a: *Abschlussbericht im Projekt Entwicklung und Erprobung eines wissenschaftlich fundierten Verfahrens zur einheitlichen Bemessung des Personalbedarfs in Pflegeeinrichtungen nach qualitativen und quantitativen Maßstäben gemäß § 113c SGB XI (PeBeM)*. Bremen: SOCIUM – Universität Bremen.

Rothgang, Heinz/Müller, Rolf/Preuß, Benedikt 2020b: *Barmer Pflegereport 2020: Belastungen der Pflegekräfte und ihre Folgen*. Berlin: Barmer.

Rothgang, Heinz/Sünderkamp, Susanne/Weiß, Christian 2015: *Die Rolle der privaten Anbieter in der Pflegeversorgung in Deutschland. Expertise für den bpa*. Berlin: Bundesverband privater Anbieter sozialer Dienstleistungen e.V.

Safuta, Anna/Noack, Kristin/Gottschall, Karin/Rothgang, Heinz 2021: Migrants to the rescue? Care workforce migrantisation on the example of long-term care provision in Germany. In: Kuhlmann, Joanna/Nullmeier, Frank (eds), *Causal mechanisms in the Global Development of Social Policies*. Cham: Palgrave Macmillan.

Schroeder, Wolfgang 2017: Geschichte und Funktion der deutschen Arbeitgeberverbände. In: Schroeder, Wolfgang/Weßels, Bernhard (eds), *Handbuch Arbeitgeber- und Wirtschaftsverbände in Deutschland*. Wiesbaden: Springer, 29–51.

Schroeder, Wolfgang 2018: Interessenvertretung in der Altenpflege. Zwischen Staatszentrierung und Selbstorganisation. Wiesbaden: Springer.

Schroeder, Wolfgang/Kiepe, Lukas 2020: Improvisierte Tarifautonomie in der Altenpflege. Zur Rolle von Gewerkschaften, Arbeitgeberverbänden und Staat. In: APuZ Aus Politik und Zeitgeschichte-Edition (eds), *Pflege. Praxis – Geschichte – Politik*. Bonn: Bundeszentrale für politische Bildung, 214–226.

Schroeder, Wolfgang/Weßels, Bernhard (eds) 2017: Handbuch Arbeitgeber- und Wirtschaftsverbände in Deutschland. 2nd edition. Wiesbaden: Springer VS.

Shire, Karen 2015: Family supports and insecure work: the politics of household service employment in conservative welfare regimes. *Social Politics* 22 (2), 193–219.

Spieß, Katharina 2008: Early Childhood Education and Care in Germany. The Status Quo and Reform Proposals. *Zeitschrift für Betriebswirtschaftslehre* 67, 1–20.

Tagesschau 2021: Die 24-Stunden-Pflege gerät ins Wanken. https://www.tagesschau.de/wirtschaft/pflege-kraefte-ausland-mindestlohn-urteil-101.html (accessed 24 June 2021).

Tepe, Markus/Kittel, Bernhard/Gottschall, Karin 2015: The competing state: Transformations of the public/private sector earnings gap in four countries. In: Rothgang, Heinz/Schneider, Steffen (eds), *State Transformations in OECD Countries. Dimensions, Driving Forces and Trajectories*, Transformations of the State Series. Basingstoke: Palgrave Macmillan, 41–66.

Theobald, Hildegard/Luppi, Matteo 2018: Elderly care in changing societies. Concurrences in divergent care regimes – a comparison of Germany, Sweden and Italy. *Current Sociology Monograph* 66 (4), 629–642.

VBE 2021: Verband Bildung und Erziehung. https://www.vbe.de/arbeitsbereiche/frauen-im-vbe/ziele-und-positionen (accessed 20 November 2021).

ver.di Kasseler Erklärung 2021: https://sozialearbeit.**verdi**.de/++file++618bc535fed9c352ff71855c/download/**Kasseler**... (accessed 27 November 2021).

ver.di Kircheninfo 2021: Beschäftigte der evangelischen Kitas in Erfurt organisieren sich. Gleiche Arbeit, gleiches Geld. *Kirchen.info 2021* (38), 8–10.

VKA 2021: Die Aufgaben der VKA. https://www.vka.de/verband/unser-verband/aufgaben-der-vka (accessed 20 November 2021).

WSI 2021: Frauenanteil in den DGB-Gewerkschaften 2005–2019. https://www.wsi.de/de/mitbestimmung-14620-frauenanteil-in-den-dgb-gewerkschaften-14770.htm (accessed 21 June 2021).

WSI Tarifarchiv 2021: Tarifbindung. https://www.wsi.de/de/tarifbindung-15329.htm and https://www.wsi.de/de/datenbank-tarifabschluesse-15320.htm (accessed 28 November 2021).

Appendix Part I: List of interviewees (organisation, role level)

Interview number	Organisation	Role level
1	University	Prof. of Public Health and Care Research
2	University of Applied Science	Prof. of Health and Care Management
3	University of Applied Science	President of the University of Applied Science and expert in the field of academisation of care
4	University	Prof. of Health Economics
5	ver.di (national level)	Trade Union Secretary for the Elderly Care Sector (and Member of the Honory Federal Commission for Elderly Care (Bundesfachkommission Altenpflege))
6	Employers' association BVAP (Bundesvereinigung Arbeitgeber in der Pflegebranche)	Founding member of the BVAP
7	ver.di (national level)	Expert in the field of daycare centres for children
8	LAG (Landesarbeitsgemeinschaft der Freien Wohlfahrtspflege)	Managing Director of the LAG
9	Self-employed Consultant	Expert in the field of Health Policy

Part II – Country Study Germany: REPORT for WP3: Local Case Studies[14]

[14] Our special gratitude goes to the interviewed experts for sharing their time and expertise. We would also like to thank Jennie Auffenberg and Felicitas Weber for supporting the field work and transcription, Silke Birkenstock for editing and Kate Bird for language editing.

II.1 Introduction

The local case studies on Germany aim to provide an analysis of the main issues concerning labour and employment relations in the welfare services of early childhood education and care (ECEC) and long-term care (LTC), reflecting the specific national political framework of service provision in both fields. Relevant conditions for Germany are federalism, which means that social services are regulated and provided on a federal state and local municipal level, as well as a conservative 'transfer-intensive' rather than 'service-intensive' welfare regime which privileges unpaid care within the family as well as non-profit and for-profit service providers instead of public service provision.

Nevertheless, the rising demand for childcare and long-term care over recent decades can no longer be met by unpaid care provided by female family members and has generated a considerable increase in service provision, staffing levels and public spending in both sectors. This welfare expansion was legally framed by national legislation: on ECEC by the Daycare Development Act 2005, the Childcare Funding Act 2008/13 and Childcare Quality Reforms in 2019 and 2022; and on LTC by the introduction of long-term care insurance in 1995. None of this legislation questioned governance and provision on the federal state level. Irrespective of the expansion of services, provision in both fields still does not match the growing demand, and ECEC and LTC both suffer from labour shortages. Employment in these services has been characterised by part-time work, low wages and poor career prospects. The social dialogue tends to be weak, and coverage by collective agreements is low, partly due to fragmented interest representation on both sides (employers and employees) and special labour law regulations for the Christian non-profit providers, who are stronger in LTC than in ECEC. More recently, and in light of the Covid-19 pandemic, these structural problems have entered the public debate, sometimes even termed a 'care crisis'. Criticism has been focusing not only on insufficient care capacities and poor quality of services, but also strenuous working conditions and low wages for care workers.

Given this background, the key issues we identified in employment regulation and working conditions in the two sectors in the WP1 and WP2 report are attracting personnel, staffing, wages and wage setting, and workload. Hence, when selecting the case studies, we looked for practices and arrangements at the local level[15] which present solutions aimed at addressing and resolving these key issues. Table 1 provides an overview of the case study selection, while a detailed description of the case studies is part of sections II.2 to II.5.

In the field of ECEC, *the first case study* addresses staffing levels and more precisely the mix of qualifications among the personnel (staff composition). We identified two reform projects in the city-state and the city of Bremen, where the general problems of ECEC provision and employment are especially pronounced. The first project, claiming 'Decent work in childcare' (*Gute Arbeit in Kitas*) (subcase a), was a tripartite dialogue for better working conditions in ECEC centres[16] which resulted in a statement listing concrete measures for achieving this goal. One of the outcomes of this dialogue is a project called 'Indexing ECEC centres' (*Index-Kitas*), which aims at better staffing of larger ECEC centres in (working-class and migrant) neighbourhoods with social problems in the city of Bremen (subcase b).

The *second case study* in ECEC first investigates a reform of the established 3–5-year school-based vocational training for child care assistants and early years educators, which traditionally often involves classroom tuition. The reform introduced an alternative track of practice-oriented training with remuneration. This type of training, present in several federal states, is based on a contract between employer and trainee and aims to attract a broader spectrum of potential staff, such as male and migrant workers. We selected a project for practice-oriented training in the city-state of Bremen, called the *PiA project* (*Praxis-orientierte Ausbildung*),

[15] Due to the pandemic situation restricting travel and long-distance contacts, we tried to narrow the regional focus, but nevertheless made sure that the selected cases, especially in the state of Bremen, are exemplary.

[16] In this report we follow OECD terminology (e.g. as used in the Starting Strong series) for centre-based ECEC: a crèche is for children under the age of three, kindergarten is for children aged three to six years and ECEC centre is the collective term for both.

which also was addressed (as a necessary reform) in the tripartite dialogue statement (first case study – subcase a). Furthermore, we also look into new regulations for remunerating the established school-based training track and on-the-job training (subcase b).

In the field of LTC, we focus on the role of the social partners in wage setting in non-profit and private organisations providing LTC. Christian non-profit providers are of special interest because they offer employment contracts based on consensus-oriented guidelines that do not allow for strikes. Private employers are also relevant because they account for a large share of LTC provision and tend to be opposed to collective bargaining and firm-level interest representation. Hence, for non-profit providers we selected two 'best practice' exceptions where unions were successful in establishing collective bargaining with religious providers: *Case study 3* refers to religious employers and covers a collective agreement between the service sector union ver.di and local Protestant service providers in the federal state of Hessen (*Tarifvertrag diakonische Altenpflege*, subcase a) and an agreement between Protestant and Catholic service providers in the city-state of Bremen (*Tarifvertrag Pflege in Bremen*, TV PfliB, subcase b).

Case study 4 investigates the willingness of private providers to negotiate collective bargaining agreements. The first example is a private residential care provider called Korian, who for one of its units (in the city of Luneburg) negotiated an agreement with the service sector union ver.di (subcase a). The second example is a collective agreement between a private homecare employers' association, called Arbeitgeber- und privater BerufsVerband Pflege e.V. (ABVP), representing around one hundred small providers of home-based LTC across Germany, and a small Christian union (subcase b). Both cases can be seen as 'pioneers', since a recently passed national law (*Gesundheitsversorgungsweiterentwicklungsgesetz*, GVWG) obliges all providers to pay wages in line with regional collective agreements or at least average wages from September 2022 onwards. Hence, this act can be considered the institutional enforcement of generalised wage setting.

Table 1: Case study selection

Main issues in ECEC: **Staffing levels and attracting personnel**	**Main issues in LTC:** **Willingness of non-public providers to engage in collective wage setting**
Case study 1: Staffing levels and staff composition (City-state Bremen) Subcase a) City state of Bremen with tripartite dialogue for decent work (*Gute Arbeit in Kitas*) Subcase b) City of Bremen reform project for better staffing (*Index-Kitas*) in disadvantaged neighbourhoods	**Case study 3: The role of Christian and other non-profit providers in collective bargaining** Subcase a) Non-profit providers in city-state of Bremen (TV PfliB) and service sector union ver.di Subcase b) Protestant elder care providers in the federal state of Hessen and service sector union ver.di
Case study 2: Reform of training: practice-oriented training and remuneration (City-state Bremen) Subcase a) Practice-oriented training: PiA project Subcase b) Measures for remunerating school-based and on-the-job training	**Case study 4: The role of private providers in collective bargaining** Subcase a) Collective agreement between private provider Korian (local unit Luneburg) and service sector union ver.di Subcase b) Collective agreement between private homecare providers' association ABVP and a small Christian union

Source: Authors' description

In addition to desk research, we also employed the following methods: qualitative semi-structured expert interviews with social partners, local authorities, companies involved in the provision of the services, political representatives and other actors potentially involved as well as a document analysis of relevant reports, media outlets and policy regulations. The 15 interviews, based on tailored expert interview guidelines, conducted mainly online, lasted from 45 to 90 minutes. They were recorded and transcribed, and then analysed by content analysis (see appendix A1 for the list).

The report is structured as follows. The next chapter presents the first case study, addressing the staffing levels and staff composition in ECEC, followed in chapter II.3 by the second ECEC case study focusing on training reforms including a new format of practice-oriented training (PiA) and measures for remunerating school-based and on-the-job training. In chapters II.4 and II.5, the LTC case studies on the role of Christian and other non-profit providers (case study 3) and the role of private providers in collective bargaining (case study 4) are presented. In the final section we discuss sectoral similarities and differences, try to assess lessons from the local case studies and reflect on the relevance and potential for generalising the local solutions.

II.2 Case 1 ECEC: Staffing levels and staff composition

II.2.1 The case study: the context, service governance and employment relations at the local level[17]

Context

As a federal republic, Germany consists of sixteen federal states including the three city-states Berlin, Hamburg and Bremen. The city-state of Bremen, situated in North-Western Germany, encompasses the two cities of Bremen and Bremerhaven. It is the smallest federal state in terms of population and surface area. In total, almost 683,000 inhabitants lived in Bremen in 2021 (569,400 in the city of Bremen and 113,600 in the city of Bremerhaven) (EURES 2022a).

Historically, Bremen has been shaped by the Protestant church and the Hanseatic League. Shipping and trade are still important economic factors, alongside the food and drink industry, including coffee and beer. The state was hit hard by the crisis in the European steel and shipping industries in the last third of the 20th century, which is still reflected in high unemployment rates and an intergenerational transmission of poverty in disadvantaged neighbourhoods, similar to many cities in North Rhine-Westphalia. Attempts for economic recovery from the 1970s onwards were partly successful, such as the founding of the University of Bremen, and promoting research and new knowledge industries. Indeed, Bremen has become a strong location for research in marine sciences, artificial intelligence and engineering and an important industrial location for aviation (it is the second largest Airbus commercial location in Germany), alongside steel, automobile and food industries, while the expansion of service industries has been less pronounced.

As an industrial and port city, throughout the 19th and 20th century Bremen was strongly influenced by workers' movements and interests, which is still reflected in the political dominance of the Social Democratic Party (SPD), which has governed the city-state (with changing partners) since World War II without interruption. In addition, alongside the Chamber of Commerce and the Chamber of Crafts, as early as 1921 the city-state of Bremen established a Chamber of Employees,[18] which provides legal advice and represents employees' interests on the political level (Arbeitnehmerkammer Bremen 2022a).[19] Currently, the state government of Bremen consists of a coalition of the Social Democratic Party, the Green Party and the leftist party Die Linke. Regarding the public budget, for more than two decades, Bremen stands out as one of the poorest federal states, characterised by a high level of per capita public debt (Statista 2022). Irrespective of

[17] The following contextual information on the city-state of Bremen applies not only to case study 1, but also to the case studies 2 and 3 (subcase 3a), as they are also located in Bremen.

[18] Among the West German states, only the Saarland established a similar institution after WWII. Similar to the Chamber of Commerce and the Chamber of Crafts, membership in the Chamber of Employees is compulsory. The Bremen Chamber has about 390,000 members (2021) and represents the interests of all employees in the state. In contrast to similar institutions in Austria (called Chamber of Labour), where the chambers play an important role in industrial relations, the Chambers in Germany do not replace unions as social partners, especially not in wage setting (https://de.wikiup.org/wiki/Arbeitnehmerkammer_Bremen).

[19] Services for members include legal counselling, tax law advice and legal advice for employees with low wages (https://www.arbeitnehmerkammer.de/sprache/englisch.html). Additionally, the Chamber serves as a platform for public debates and exchange between social partners, politicians and civil society on current topics regarding work and employment. In recent years, working conditions and wages in social services, among other topics, have been on the agenda. The Chamber also engages in further education and in research in cooperation with the Institute Labour and Economy (iaw) at the University of Bremen (https://www.iaw.uni-bremen.de/the-institute).

a slight decrease in recent years, unemployment rates continue to be high; in March 2022 the rate was 10.0% compared to 5.1% in Germany as a whole (EURES 2022a).

In terms of social structure, Bremen has a high share of single parents (27.7% of all families; about 90% female-headed), a group with low and even decreasing integration into the labour market; in 2017 only 65.4% of this group was active in the labour market compared to the national average of 79.6% (ZGF 2022). In general, mothers' labour market participation is low at 47.5% for those with children under three and 50% for mothers with children aged three to six in 2020 (Bertelsmann Stiftung 2022a: 1). In 2020, the share of residents with a migrant background was 19.0%, compared to the national average of 12.2% (Statistisches Bundesamt: GENESIS-Online Datenbank: Bevölkerung (Stand: 08/2021)). In the same year, the share of migrant children reached nearly 60% in the age group of the under threes (total number of children under three: 20,616) and 65% in the age group three to six (in total 20,017). Nearly one third (31.7%) of children under six live in households that receive welfare benefits (Bertelsmann Stiftung 2022a: 1). Additionally, the quality of the school system in the city-state continuously ranks low (Bildungsmonitor 2022), although some progress has been made over recent years. Hence, the federal state of Bremen is confronted with several structural problems: intergenerational poverty and low school achievement especially among migrant and working-class children, low employment rates of mothers and high unemployment. At the same time, the nationwide debt constraint for public budgets anchored in the German Basic Law has been restricting public policies for enhancing labour market integration and education on the state level (Wolnik et al. 2019: 11), irrespective of recent exceptions from the debt constraint permitted in light of the Covid-19 pandemic and the energy crisis.

Governance and service provision at the local level [20]

As mentioned earlier, governance of ECEC in Germany has historically been framed by the subsidiarity principle which restricts the role of the state in favour of family and non-profit actors in service provision. After WWII, the West German welfare state also established strong institutional incentives for fostering a male breadwinner model, characterised by a family wage allowing for mothers to be housewives and to care for children at home (Gottschall/Schröder 2013). These incentives include a taxation system favouring married couples with one part-time or marginal earner, a half-day structure for kindergartens and primary schools (Hagemann et al. 2011) and a preference for relatively generous cash transfers to families (numerous childcare benefits and tax deductions for household expenses for childcare and domestic services) instead of service provision for children (Spieß 2008). Additionally, although framed by a central law in the Social Security Code (SGB VIII, *Kinder- und Jugendhilfe*), the constitutional structure of federalism attributes some legislative and all organisational authority in the areas of child and youth welfare to the federal states: Hence, coverage and provider structure as well as training for ECEC workers vary on the federal state level. Finally, in Germany ECEC is institutionally separated from schooling, the latter exclusively governed by the federal states (a principle secured by the German Basic Law, called *Kulturhoheit der Bundesländer*).[21] However, in the case of the city-state of Bremen, responsibility for ECEC and for schooling is currently located in the same Ministry (which was not the case in the past), the State Ministry (Senatorial Authority) for Children and Education.

From 2000 onwards, the central state (i.e. the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth, BMFSFJ) has gained importance as an actor by introducing policies for reforming and funding the expansion of childcare, starting with the legal right to a half-day kindergarten place for all children aged 3–6 years in 1996, followed by an expansion of crèches (with the aim of providing places for 30% of children

[20] Please note: The following contextual information on governance, service provision and employment relations in ECEC pertains to both case studies in this field. In brief, the justification for choosing the city-state for both ECEC case studies is that the nation-wide problem of staff shortages and weak social dialogue applies here too. At the same time, due to unfavourable social indicators for part of the population, the need for expanding childcare provision and improving quality is especially pronounced although, in light of tight public budgets, especially difficult to achieve. Hence, good practice cases in this context could be instructive across the board, not only for well-off regional and local settings.

[21] After German reunification, these institutional structures were extended to East Germany.

aged 1–3 years from 2013 onwards, since that date marked the extension of the right to half-day ECEC to this age group). Further reforms in 2019 (*Gute-KiTa-Gesetz*) and its successor in 2022 (*KiTa-Qualitätsgesetz*) have focused on childcare quality (better child-staff ratios, language education).[22] Since political responsibility and funding are shared between the national and the regional level, all reforms had to be approved by the federal states, including Bremen. In expanding ECEC coverage to support working parents and in emphasising early childhood provision as education rather than just care, these developments have been in line with the EU social investment strategy. Especially for West Germany, these reforms marked a catching-up modernisation, attenuating both the male breadwinner model and the subsidiarity principle in social policy. Nevertheless, the current situation is still characterised by low coverage rates and child-staff ratios deemed highly unsatisfactory by experts and parents alike.[23] Part of the problem is the fact that, irrespective of the national expansionary trend, differences in provision, employment and training on the federal state level (in terms of East and West, city-states and others, North and South) still matter. Due to the state-socialist legacy of extensive public childcare and high female employment rates, states in East Germany including Berlin have higher provision rates for one-to-three-year-old children than states in West Germany in general, and particularly compared to the states where Catholicism is still strong. At the same time, staff shortages continue to be high in all regions.

The city-state of Bremen drew on national funding to follow the national expansionary trend, but nevertheless still shows deficiencies in coverage, child-staff ratios and training capacities. From 2006 to 2021 coverage for children under three (total no. in 2020: 20,737 children) rose from 9.25 to 29.4%. However, this is still far below the coverage rates of the other city-states, e.g. the neighbouring city-state of Hamburg (47.2%), and nor does it meet parental demand (46.2%) (Arbeitnehmerkammer Bremen 2022b: 4). For children aged three to six years, coverage in 2021 reached 86%, which is below the national average of 92% and again below the parental demand reported in surveys. On the positive side, the time children spent in crèches and kindergartens mostly ranged from 25–45 hours per week, with lower shares for shorter and longer time slots than the national average, indicating an attenuation of the half-day norm (Bertelsmann Stiftung 2022a: 4). Nevertheless, in Bremen the share of ECEC centres that open later than 7.30 am and close before 4.30 pm is far higher than in other federal states (Arbeitnehmerkammer Bremen 2022b: 19). Not surprisingly, these opening hours do not meet the needs of all working parents. According to a survey by the University of Bremen, in 2019 about one third of the parents interviewed stated that they needed longer hours (Böhme 2021).

In terms of provider structure, Bremen stands out with the highest share of (usually smaller) ECEC centres provided by parents' initiatives and associations (25%) (mostly crèches) among all federal states. At the same time, with a share of 22%, public providers are less common than the national average (32%); religious and other non-profit providers have a share of around 20% each (Bertelsmann Stiftung 2022a: 19). Of the children under three attending childcare (in total 5,193) in 2021, 55% attended crèches run by (religious and other) non-profit organisations while 23% were in state-run facilities. The role of state-run facilities in Bremen becomes more pronounced for children from three years onwards (in total 20,833) as they provide nearly 40% of the places alongside 50% provided by non-profit organisations (ibid.: 20). Hence, in the city-state of Bremen, non-profit providers and public providers are equally important.

From 2014 to 2021 the staff-to-child ratio in crèches improved from 1:3.4 to 1:3.2; but slightly worsened in kindergartens from 1:7.8 to 1:8.0. These figures are more or less in line with the national average as is the share of fully trained staff (65%) and the time reserved for management tasks (ibid: 4–5). However, a closer

[22] https://www.gute-kita-portal.de/englisch; https://www.bmfsfj.de/bmfsfj/service/gesetze/zweites-gesetz-zur-weiterentwicklung-der-qualitaet-und-zur-teilhabe-in-der-kindertagesbetreuung-kita-qualitaetsgesetz--201142

[23] In September 2022, ECEC professors and researchers published an open letter, stating that the ECEC system in Germany was close to collapse due to a lack of trained personnel. Only a month later, the renowned Bertelsmann Foundation published an analysis predicting a lack of 384,000 kindergarten places in 2023 (Bertelsmann Stiftung 2022ab). Meeting this demand would imply employing up to 100,000 additional childcare workers (Süddeutsche Zeitung 22/11/2022, No. 269, p. 4).

look at further quality indicators (group size and qualification levels) shows that nearly 40% of the kindergarten groups are larger than recommended by the well-established Bertelsmann national expert group. Moreover, in Bremen the expansion of the total pedagogical workforce from 2016 to 2021 (from 5,000 to nearly 6,000 persons) was driven by a greater increase in unskilled workers and assistant childcare workers with two-year training (*Sozialassistent/Sozialassistentin*) than in early years educators with five-year training (*Erzieher/Erzieherin*). At the same time, training capacities only expanded at a slow pace (Bertelsmann Stiftung 2022: 4/5, 17).

Social Dialogue on the national and local level

Turning to employment relations and wage setting, the general legal framework in Germany, characterised by different labour law systems as described in the national report on WP1 and WP2 (see chapter I.3, page 26–28), also applies to the field of ECEC and impacts on local level employment relations. While the "first way", in which the employer unilaterally determines pay and working conditions (as in the civil service), is not relevant, the "second" and "third ways", which imply more or less binding bilateral agreements depending on the provider, are important. The second way refers to the collective agreement model based on the norm of the social partnership codified in article 9, paragraph 3 of the German Basic Law (*Grundgesetz*) and specified in the Collective Agreement Act (*Tarifvertragsgesetz*) and Works Constitution Act (*Betriebsverfassungsgesetz*), and applies to all public providers and private for-profit providers. Non-profit providers may follow these laws and, in the case of non-religious providers, often do. However, Christian non-profit providers (Caritas and Diakonie), which are relevant employers in the childcare sector, can draw on the "third way" of church labour law regulation, anchored in article 140 of the German Basic Law. This regulation permits guidelines for employment contracts (*Arbeitsvertragsrichtlinien*, AVR) to be drawn up and agreed upon by labour law commissions (*Arbeitsrechtliche Kommission*, ARK), consisting of equal numbers of employees and employers. As the guidelines are less binding than collective agreements, individual employment contracts may deviate from them (Ver.di 2021: 9–10). Moreover, irrespective of equal representation in the commission, employees in church-run organisations do not have the right to strike (2 BvR 2292/13, Federal Constitutional Court 2015; interview 5).[24]

Insofar as ECEC employees are union members, they are mainly organised in the United Services Trade Union (ver.di), while professional organisations or so-called 'yellow unions' play only a minor role, and tend to focus on highly-qualified staff and professionalisation. Union membership is highest among employees in public ECEC facilities run by municipalities. In contrast, employees in ECEC centres run by the religious organisations Diakonie and Caritas show lower membership numbers, as these non-profit employers usually frame the employment relationship as a community where both sides equally follow Christian values (*Christliche Dienstgemeinschaft*) and specific interest representation as well as a right to strike are deemed unnecessary.[25] Nevertheless, the activities of the United Services Trade Union are not only geared towards employees in public organisations but also to childcare workers in non-profit organisations, since central issues such as low wages, stressful working conditions and understaffing apply across the board.

Regarding collective agreements, wage bargaining between ver.di and public employers, organised in the national association of municipal employers (*Vereinigung kommunaler Arbeitgeberverbände*, VKA) plays a crucial role. Not only do the collective agreements for ECEC and social work negotiated at this central level apply to all municipally-run facilities in the country, but they usually also serve as a benchmark for non-profit providers which might be difficult to undercut.

Similar to the wage bargaining round in 2015, the 2022 central wage bargaining round for ECEC and social workers between the VKA and ver.di was also accompanied by powerful strikes and demonstrations in

[24] In 2015, the Federal Constitutional Court confirmed the third way principle of prohibiting the right to strike in church organisations contained in church labour law (Evans 2016: 24).

[25] Although no regional figures are available, experts assume that these membership trends also apply to Bremen.

many cities, mobilising about 45,000 workers across the country. The 'power of the street', as well as supportive public opinion and solidarity from parents helped to achieve a favourable wage agreement consisting not only of a wage rise of € 130 for ECEC workers but also an additional two to four days off and better regulations for career advancement. Ver.di states that the agreement, currently covering 330,000 employees in ECEC and social work in municipal organisations, will also be adopted by many non-profit providers in the field (Ver.di 2022a). The successful wage bargaining round rested on strong local support. In Bremen, local ver.di officers as well as staff representatives from public ECEC centres organised many activities, engaged in publicity, prepared the strike activities and included parents in organising alternative childcare during the strike days. During the last strike in 2015 they had already shown a high level of engagement. The 2022 collective agreement has been well received, as a statement by the professional ECEC worker Christina from Bremen shows: "I am very happy with the collective agreement as I much appreciate the pay rise of € 130 and because I think it signals an upgrading of the profession. And this in turn might help to counteract staff shortages […]." (Ver.di Magazin 2022)[26]

II.2.2 The issue – subcase a): City of Bremen – tripartite dialogue for decent work in childcare (*Gute Arbeit in Kitas*)

In Germany, during the course of expanding ECEC from 2005 onwards (a move that was prompted by societal needs and national policies alike), staffing levels and staff composition have become a challenge. In the city-state of Bremen, this challenge was more pronounced than in the neighbouring city-state of Hamburg and other West German states, as childcare coverage not only for 1–3-year-olds had been very low and public budgets were tight. Following the Daycare Development Act of 1996 granting a half-day kindergarten place for all children aged 3–6 and the Childcare Funding Act 2008 stipulating a 30 per cent coverage rate for one-to-three-year-olds from 2013 onwards as well as the right to half-day ECEC for children in this age group, the city-state had to make great efforts to expand ECEC services commensurately. Crèches and kindergartens expanded in number and size. However, irrespective of staffing increases, employees and union representatives as well as parents perceived the working conditions as strenuous. Additionally, providers reported difficulties in recruiting qualified staff, especially for ECEC centres in disadvantaged neighbourhoods, where many households are characterised by unemployment or labour market inactivity of adults, and the share of children with a migrant background was high. Not least due to the poor performance of secondary school pupils in the city-state in the PISA tests of 2000, 2009 and 2015, local public debates in newspapers and television also focused on the need for sufficient and better early childhood education (interview 1).

II.2.3 The process

Given this background, in 2015 Bremen's then new Senator for the State Ministry for Children and Education took the initiative to institute a tripartite dialogue for decent work in childcare (*Gute Arbeit in Kitas*). The idea was to create a forum where providers as well as union representatives together with the State Ministry, which is responsible for the financing and governance of ECEC provision in the city-state, should agree on reform measures for establishing better working conditions and service provision in childcare. The Senator was especially keen to include the largest public provider in the city of Bremen, called KiTa Bremen, an owner-operated municipal enterprise, which runs ECEC centres predominantly in low-income neighbourhoods. KiTa Bremen is also characterised by well-organised co-determination and relatively high membership rates of the trade union ver.di. Given this background, ver.di representatives were highly willing to cooperate. The outcome was a binding statement for better working conditions in childcare ("Bremer Erklärung 'Gute Arbeit in Kitas'", Freie Hansestadt Bremen and ver.di 2018), signed by the representatives of the state government (the Mayor and the Senator for Children and Education) and the regional and local representatives of the service sector union ver.di (interview 1).

[26] Original quote: "[…] ich bin mit dem Verhandlungsergebnis sehr zufrieden, weil ich im Punkt finanzielle Aufwertung die 130 € sehr zu schätzen weiß und weil ich finde, dass das ein guter Schritt in die Aufwertung dieses Berufes ist. Und das ist dann wiederum ein Schritt in Richtung Beseitigung des Fachkräftemangels […]." Streikberichterstattung – Stimmen in Ver.di Magazin 2022.

II.2.4 The solution

The statement consists of seven paragraphs starting with a complex assessment of the current challenges. In paragraph I all partners concede that the country-wide challenge of expanding childcare but not at the expense of the quality of working conditions and of childcare itself is especially pronounced in the state of Bremen. Reasons named are a high poverty rate among children and their families and high competition for pedagogical staff due to the close proximity of the neighbouring states of Lower Saxony and Hamburg, which might be more attractive. They also acknowledge that the aim of including children with disabilities and supporting the development of children from socially disadvantaged households calls for specific measures such as intensifying partnerships with parents by expanding ECEC centres into family centres and providing specially trained staff for language development. In paragraphs II and III the statement expresses the will of the local government to introduce new formats for training with remuneration for the trainees,[27] and to support the management of ECEC centres in developing measures for career advancement. The measures primarily highlighted by the union representatives are the aim to upgrade wages for trained staff in ECEC centres serving children from socially disadvantaged households by allowing for better positioning in the pay scale (paragraph IV),[28] granting additional staff in specific staffing shortage situations (paragraph V) and establishing better measures for occupational health (paragraph VI). Finally, the document also stipulates the establishment of a group consisting of the social partners, government representatives and parents' representatives to support the implementation of the measures contained in the statement (Freie Hansestadt Bremen and ver.di 2018, Pressemitteilung 2018).

The statement is innovative in several respects. First, it demonstrates tripartite cooperation and thus involves local government as the most important actor since it is responsible for funding. This relieves both social partners to some extent from having to negotiate hard for better working conditions (health and safety issues), better staffing and pay scale upgrades, but at the same time does not offset the right to and need for wage bargaining. Second, the statement addresses both the quality of working conditions and the quality of service provision and thus acknowledges that both issues are closely connected. In this sense the document also speaks to the interests and political agenda of the then non-governing parties, in this case the Christian Democrats, and to non-profit providers more present in middle-class neighbourhoods. Third, the document envisions measures such as the reform of training or better positioning in the pay scale that are structural in character and thus not so easy to rescind if the government changes. The tripartite cooperation and the structural character of the statement indicate its relevance for other local contexts as well. Nevertheless, it is worth noting that precisely the innovative participation of the government also marks a potential shortcoming: as with all public funding, funding of the above listed measures is subject to the general budget restrictions (*Haushaltsvorbehalt*), which, in a poor state such as Bremen, especially under the current crisis conditions, might easily apply. In this case, implementing the envisioned measures might be stalled because insufficient state funding is available.

II.2.5 Success factors[29]

The interviewed experts named several factors that contributed to the success of this tripartite dialogue: First, the existence of a large public provider (KiTa Bremen) with strong works councils and high union membership, whose members were exerting a certain political pressure by arguing that a public provider should and could address strenuous working conditions and low wages. Second, the initiative and will of the new Senator, a member of the Social Democratic Party, who had previously worked in the research unit of a union affiliated foundation (and herself mother of two children of kindergarten and school age), to change the unsatisfying situation in childcare regarding coverage, quality of ECEC as well as working con-

[27] See case study 2, chapter II.3

[28] In detail: Shift to pay group 8b instead of group 8 of the pay scale for public-sector employees (TVÖD) for qualified early years educators in ECEC centres in neighbourhoods with a social index score higher than 50.

[29] Here we will refer to the success factors for the tripartite dialogue only, while the implementation of specific measures announced in the statement is described as Case 1, subcase b (better staffing) and Case 2, subcase a (new training schemes).

ditions, and to start this process with a public provider who is strong in socially disadvantaged neighbourhoods. As one expert explained, the latter argument played a crucial role, since former Senators responsible for childcare had focused more on reforms in cooperation with (religious) non-profit childcare providers, who are more common in middle-class neighbourhoods. However, the new Senator acknowledged that working conditions both for childcare workers and the management in ECEC centres in disadvantaged neighbourhoods are especially hard and that these neighbourhoods have a greater need than others for higher coverage as well as more and better trained staff. Moreover, the Senator was not only dedicated 'to making a change', but also had the assertiveness to push the reform agenda in the red-green coalition government and to win over both social partners for cooperation (interview 1). Finally, the willingness of the Senator and local government to take the problems of the sector seriously and to allocate funds especially for higher wages and occupational health facilitated the bargaining process with the social partners, as some issues were now explicitly the responsibility of the Ministry. In this respect the employers as well as employee representatives and the union were able to perceive the tripartite dialogue outcome as a 'win-win situation'.

II.2.6 Subcase b): Better staffing (*Index-Kitas*)

Issue, process and solution

Already from 2008 onwards, the city-state of Bremen tried to allocate differential funding for childcare based on the social needs of neighbourhoods. As the influx of refugee families and children in 2015/16 was especially high in already socially disadvantaged neighbourhoods, ECEC centres in these residential areas often had to expand group sizes from 20 to 21 children, deteriorating the child-staff ratio and confronting ECEC workers with additional challenges such as language problems. In this situation, a programme for recruiting additional pedagogical staff (usually university graduates) was developed for city of Bremen ECEC centres facing specific challenges (called *Kita-Verstärkungsmittel für Einrichtungen mit besonderen Herausforderungen SozPäd I*). Following this initiative, a second overlapping programme (*Personelle Verstärkung in Kitas in Index-Lagen – SozPäd II*) was set up, this time addressing city of Bremen ECEC centres in socially disadvantaged neighbourhoods. The residential areas that were to receive additional funding were identified with the help of a social index which takes into account educational level, income, employment and participation. Hence, high scores on the indicators 'no secondary school degree', 'low household income/welfare benefit receipt', 'unemployment' and 'low voter turnout' indicate a socially disadvantaged neighbourhood (Die Senatorin für Kinder und Bildung 2019). In 2020, based on a redefined social index, the two programmes were harmonised and covered about 100 (out of 437) ECEC centres (Die Senatorin für Kinder und Bildung 2020). The additional pedagogical staff, usually one part-time worker in centres with up to 120 children or one full-time position in larger centres, has the task of cooperating with parents and families, opening the centre to other institutions in the neighbourhood and supporting management in conceptual work (interview 2). A still ongoing evaluation of the first programme, carried out by the Institute Labour and Economy (iaw) at the University of Bremen, provides a preliminary mixed picture. Some ECEC centres report that integrating the additional staff needs more time, and that their tasks and especially the cooperation with other institutions in the neighbourhood and with municipal bureaucrats still need to be defined better. In addition, the more recently emphasised political intention to develop the so-called Index-Kita ECEC centres further and turn them into 'children's and family centres' (*Kinder- und Familienzentren*) does not as yet seem to be appreciated equally by all providers, not least because of open questions regarding funding and governance (interview 2).

Success factors (and problems)

Clearly, establishing the tripartite dialogue and issuing the joint statement for quality of working conditions in childcare ("Bremer Erklärung 'Gute Arbeit in Kitas'") laid the groundwork for employing additional expert staff, which means that the initial measures have been continued. Nevertheless, one shortcoming indicated by experts is the low involvement of employee representatives in the implementation of these programmes, even in the state-run ECEC centres of KiTa Bremen, where employee representation is well established. As one expert stated, it is mainly the management of the ECEC centres and the providers who

take on this role, as they are able to approach the municipal and state bureaucrats and political representatives (interview 2). Moreover, there seems to be a misbalance between the high expectations regarding the additional staff and their still low number. Meanwhile, the extension of the 2019 federal reform for better quality in childcare (*Gute-KiTa-Gesetz* 2019) with a follow-up reform in 2022 (*KiTa-Qualitätsgesetz*) is supporting the process of bringing more expert staff into ECEC centres and thus can be seen as a further success factor. While the 2019 reform permitted the federal states to spend part of their funding for childcare provision on offsetting or decreasing parental fees,[30] a regulation of which the city-state of Bremen made substantial use, the new legislation slightly restricts this measure and more explicitly focuses on better child-staff ratios and enhancing the quality of ECEC.[31] In detail, the city-state spent around 46% of the funds from the 2019 programme on reducing fees for parents, nearly one third on improving the staff-child ratio and about 20% on recruiting and retaining trained personnel (interview 1a and BMFSFJ 2021: 28/29). So far, official statements welcome the follow-up programme and indicate that the measures concerning investments in staff will be continued[32] (interview 1a). The effects of the 2019 federal reform on training policies on the regional level will be addressed in the next case study.

II.3 Case 2 ECEC: Reform of training: practice-oriented training and remuneration

II.3.1 The case study: the context, service governance and employment relations at the local level

As described in the WP1/WP2 report, the ongoing expansion of ECEC in Germany is accompanied by staff shortages, and by staffing levels and staff composition not meeting the quality standards deemed necessary by experts, politicians and parents. In the city-state of Bremen these quantitative and qualitative challenges are especially pronounced, as ECEC coverage for both 1–3-year-olds and 3–6-year-olds is below average and the increase in the number of assistant childcare workers is higher than that of fully trained pedagogical staff (see chapter II.2.1). Over recent years, politicians, the Chamber of Employees and union representatives in the city-state have shared the assessment that given the high shares of low-income households and children with migrant background as well as the demands of (working) parents, a substantial expansion of ECEC, in particular crèches and all-day care, has to be at the top of the political agenda. The current governing coalition again acknowledged the gravity of this situation by formulating the ambitious aim of providing a coverage rate of 60% for children under three in every residential area by the year 2025 (Schwarzer 2022: 93).

However, expanding the quantity and improving the quality of ECEC not only rests on the availability of funds, but also on the abilities of trained staff. In light of the ongoing expansion of provision across the country, the demand for fully trained pedagogical staff with 3–5 years of training has been higher than the supply; and for the near future (until 2025) experts predict a shortfall of at least 72,000 pre-primary educators, predominantly in West Germany (Rauschenbach et al. 2020). Moreover, demand will likely be exacerbated by the right to all-day schooling for primary school children which is to be implemented by 2026 (Fuchs-Rechlin 2022; interview 3). Labour market and ECEC scholars have identified several reasons for this labour shortage: first and foremost, training capacities have not expanded at the same pace as the expansion of childcare provision. Additionally, the school-based 3–5 years training formats in ECEC in Germany, often requiring trainees to pay fees, seem less attractive than the standardised three-year vocational

[30] Since governance for childcare rests with the federal states, they can decide whether and to what extent parents have to pay fees, especially for all-day care. Regional regulations vary and especially all-day care for children under three is often costly because coverage is still low and below parental demand.

[31] https://www.gute-kita-portal.de/englisch; https://www.bmfsfj.de/bmfsfj/service/gesetze/zweites-gesetz-zur-weiterentwicklung-der-qualitaet-und-zur-teilhabe-in-der-kindertagesbetreuung-kita-qualitaetsgesetz--201142

[32] Fee reductions will be continued, although this measure is being debated controversially as it does not directly enhance childcare quality, but rather addresses a still existent overall shortcoming in the public funding of childcare, especially for all-day places and in some Western states (interview 3, interview 4). Whereas for example in Berlin and Mecklenburg-Vorpommern no fees are required, in Bremen, North Rhine-Westphalia, Baden-Württemberg and Saarland parents have to pay on average around 300 euros per month for an all-day place in crèches (BMFSFJ 2021: 23/24). The Federal Ministry as well as the Senator for Children and Education in Bremen argue that fee reductions are still crucial for incentivising parents with low income to make use of public childcare, which in turn enhances the children's chances for social participation (interview 1b).

training with remuneration – common for most industrial jobs and commercial services – or fee-less university degree programmes. Furthermore, over recent years, in competitive labour market employment conditions in ECEC in terms of wage levels, working conditions and career prospects are perceived as problematic (Fachkräftebarometer 2021; Mende/Fuchs-Rechlin 2022; Gambaro et al. 2021). While since 2000 federal policy has addressed the lack of childcare provision with legislation guaranteeing and funding coverage, thus mitigating the federal states' responsibility for ECEC, the growing labour shortage and especially the provision of training has long been regarded as a problem that the federal states are responsible for. Only a few years ago, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) started to take action. In 2019, the Ministry launched a promotional campaign for attracting trained workers into ECEC, the so-called *Fachkräfteoffensive*, with measures to fund additional places in training programmes with remuneration, funding for enhancing professional on-site instruction for trainees participating in school-based training, and funding for career bonus payments for experienced early years educators to keep them in the field of ECEC. The *Gute-Kita* programme from 2019 also contained funding for measures to attract and keep staff. In the follow-up to both programmes, attracting staff and training again feature prominently. The reform measures (subcases a) and b)) in the city-state of Bremen presented in the following section both figure in this broader context.

II.3.2 The issue: subcase a) Practice-oriented training – PiA project

As described in chapter II.2, childcare provision in Bremen has expanded over recent years, as has the number of ECEC staff. At the same time, ECEC centres and parents have been continuously reporting staff shortages. While data on these shortages over time at the federal state level and especially in the city-state of Bremen are difficult to find, partly due to insufficient documentation and varying assessment criteria, the workforce supply in terms of training places and number of graduates can be determined. In the city-state of Bremen in the years from 2007/08 to 2019/20 the expansion of training capacities in school-based training was extremely slow compared to other states: While the city-states Berlin and Hamburg saw a rise of 198% and 137% respectively, the number of graduates in Bremen only rose by 50% (from 211 to 302) (Autorengruppe Fachkräftebarometer 2021: 265). The same trend can be observed in the growth dynamics of the number of trainees in their first year, where the increase rates in Bremen are lower than the national average (ibid: 120). According to the Bremen State Ministry, the reasons for this slow increase are a lack of demand from secondary school graduates rather than the unwillingness of the Ministry to provide more training capacities (interview 1). Figures for 2019/20 are 333 participants in the first year of the early-years teacher education and 302 graduates (Schwarzer 2022: 98).

Indeed, the school-based training format for ECEC in Germany has been criticised from different directions as it deviates from both the university-based training for early years educators in other European countries[33] as well as from other vocational training in Germany that is regulated by national law (*Berufsbildungsgesetz*), the so-called *duale Ausbildung*. This form of standardised and nationally regulated vocational training takes place in schools and in firms (hence 'dual') and is financed and governed by employers and the state alike, whereas school-based vocational training is regulated and financed on the federal state level and is thus far less standardised.[34] Implications of this type of governance are that the social partners do not have a say in the development of the curricula, nor do trainees have a right to interest representation because they have the status of students rather than employees. Moreover, the training is costly: even if most states, such as Bremen, no longer charge fees, participants in school-based training have no income because, unlike dual

[33] Additionally, compared to France or Scandinavian countries where training for ECEC workers is closer to the tertiary education of teachers, the school-based training in Germany is separated from academic expertise in early childhood education, not least because teachers/instructors for ECEC and long-term care training are not required to have a university degree (Krüger 1999; Kroos/Gottschall 2012). Nevertheless, in the European Qualification Framework, German three-to-five-year school-based vocational training is accepted as equivalent to a bachelor's degree, mainly due to its duration and the entry requirement of a ten-year (secondary) school degree.

[34] Dual vocational training is offered for industrial and most commercial service occupations and is male-dominated, whereas school-based vocational training applies to all occupations in healthcare, ECEC and other social services, and is dominated by women.

vocational training, school-based training is not remunerated. The length of training, its character as classroom education removed from practice in ECEC centres, the lack of interest representation and remuneration are all seen as factors which rather deter than attract motivated secondary school graduates, and especially males and migrants. For reasons of diversity these two groups are highly sought after in the ECEC sector.

Recently, the service sector union ver.di has presented a fully-fledged reform concept for ECEC training modelled on dual vocational training (ver.di 2020). Although experts in the field are sceptical about whether this approach will be successful, not least because it is at odds with a competing trend for professionalisation via university degrees, the union and practitioners in the field see a need for change (interviews 1, 3 and 4). Indeed, for some years now, a practice-oriented training format in the form of a model called PiA has been implemented in several federal states (Autorengruppe Fachkräftebarometer 2022: 117).

II.3.3 The process and solution

PiA was only implemented in the city-state of Bremen in 2019. The implementation was triggered by the (national) Ministry's promotional campaign for attracting trained workers into ECEC, starting in 2019 and renewed in 2021, the so-called *Fachkräfteoffensive,* which provided (national) funding for additional places in a practice-oriented training programme lasting three years and characterised by a combination of on-site and school-based training. Furthermore, trainees received employment contracts and remuneration, entitling them to social benefits and firm-based self-representation. The qualification corresponds to the 3–5 years of school-based training/further education for becoming an early years educator *(Erzieher/Erzieherin).* The project was introduced as a pilot with 50 training places. As training capacities for childcare assistants and early years educators in the city-state had been at a low level for quite some time and the PiA model implied a different format in teaching and in cooperation with the childcare facilities, training for this format was not taken on by state-run professional schools but by a private institute called ibs (Institut für Berufs- und Sonderpädagogik; Schwarzer 2022: 96).

II.3.4 Success factors and limitations

Basically, success factors for introducing this model were the availability of national funding and the broad acceptance of this training format not only by other federal states, but also by the social partners. Moreover, local experts unanimously state that the programme was well received from the very beginning (expert interview 1a and 4). The programme has also proved to be attractive for male trainees and people with migrant background, which is in line with experiences from other federal states (expert interview 3). While entry requirements are similar to the school-based training for early years educators (at least a two-year vocational training or high school diploma), duration, income, social security benefits and status seem to be more attractive. Childcare providers have been willing to engage as contract partners for the on-site training as they welcomed the opportunity to keep the trainees on after graduation as skilled and reliable workers (interview 1a), thus attenuating their recruitment problems. Participants in an online dissemination workshop organised by the SOWELL team in November 2022 to communicate and discuss the results of the ECEC case studies with experts and stakeholders, were also highly in favour of establishing PiA as regular training format.

However, compared to school-based training, the PiA model involves higher costs, because instructors are needed in the childcare centres and the federal state has to bear at least part of the training costs, since they are not completely covered by the national funding (interview 2). Hence, in the case of the state of Bremen, the willingness of the federal state to engage in this format strongly rests on the availability of this additional funding. Indeed, efforts by the Bremen Chamber of Employees to expand this programme to 150 places and make it part of the normal training portfolio, which is the case in several other federal states, have so far not been successful (interview 1a). Instead, the programme is still labelled as a pilot and will be continued for another round only in its existing magnitude.

It should also be mentioned that national experts see PiA rather as one element than a sole solution to the question of more attractive and better training for ECEC personnel. They point out that completely replacing the established school-based training by the dual vocational training format could imply a risk of de-professionalisation, because current early years educator training has so far been recognised in the German Qualification Framework as equivalent to a Bachelor degree (DQR 6), whereas dual vocational training formats for industry and service occupations rank lower, which is also the case for the two-year childcare assistant training (expert interview 3). However, until now, successful completion of PiA is considered equivalent to the school-based training outcome (*Erzieher/in*). On the other hand, granting German school-based training equivalent status to a BA has given rise to criticism too, because the training instructors do not have to have a university degree and current scientific research findings do not feature prominently in the curriculum, which has to be the case in a university-based BA study programme in early years education. Hence, there is also a call for expanding ECEC programmes at universities, especially for management and expert positions in childcare centres (expert interview 3, Deutscher Verein 2020).

II.3.5 Subcase b): Measures for remuneration in school-based training and on-the-job training[35]

In the *Gute-KiTa-Gesetz* of 2019/2022, attracting staff and training also feature prominently. Parallel and complementary to the *Fachkräfteoffensive*, this programme also focused on school-based training and incentivised part-time training, different kinds of partial remuneration and new and more flexible formats for further education and career advancement. Referring to goal in the *Gute-KiTa-Gesetz* of attracting more skilled staff, the city-state Bremen planned to implement several measures, one aiming at state-wide remuneration for trainees in school-based training (700 euros per month) based on a reformed curriculum better integrating on-site training. However, as the pandemic delayed political coordination for revising the curriculum, the remuneration was not introduced. Instead, since 2020/21 trainees in the city of Bremen[36] can draw on a moderate monthly bonus called *Bildungsprämie* (300 euros for full-time, 200 euros for part-time training). In order to receive the bonus, trainees have to commit to spending the one-year internship, which is part of the training, in an ECEC centre in the city of Bremen and to staying on in a facility in the city of Bremen for at least two years after graduation. By the end of 2021, 190 trainees had joined this programme. Meanwhile, this bonus programme has been modified, so that trainees who receive a further education stipend under the Federal Education and Trainings Assistance Act *(Aufstiegs-BAFöG)* can apply for an additional annual bonus of 1500 euros (Schwarzer 2022: 97, Gute Kita Bericht 20/21: 334). Regarding the success of these measures, experts from the federal state administration as well as employees and union representatives maintain that the number of trainees is still too low. Moreover, experts from the Senator's office perceive not only attracting trainees but also keeping those who have successfully graduated as a challenge; they see a need to identify what causes the relatively high level of fluctuation (expert interview 4). While heads of local childcare centres assume that better working conditions and remuneration in the neighbouring state of Lower Saxony play a role, administrative and scientific experts rather focus on the need for establishing better defined career tracks (expert interview 4).

Another measure to attract personnel, implemented in 2020 for three years, focused on career changers: people with vocational training and experience in a field close to childcare are admitted to nine-month on-the-job training; when they successfully graduate, they can take on a group leader position in childcare centres, which usually requires full early-years teacher training. So far, 75 people have made use of this offer.

In the same vein, a specific further education programme focusing on skilled early education teachers recruited from Spain was implemented. The programme comprised one-year attendance of school-based language and job training parallel to working in a childcare facility and resulted in the recruitment of around 50 skilled Spanish workers per annum in 2021 and 2022 (Gute Kita Bericht 20/21: 333/334).

[35] This subchapter in a condensed way refers to issue, solutions and success factors and limitations.

[36] An equivalent in the city of Bremerhaven is a monthly stipend of 500 euros for two years, taken on by 80 trainees.

The main incentive for the introduction of all these measures has again been the possibility to draw on national funding provided by the *Gute-KiTa-Gesetz* 2019 and its follow-up in 2022. So far these measures are fixed-term and still need to be anchored in the regular federal infrastructure, as regulation and provision of ECEC is a responsibility of the federal states and political intervention and financial subsidies from the national Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) are restricted to specific programmes. Irrespective of a broad consensus to continue these measures, experts also state that this might not be enough to meet the still rising demand for early years educators.

In light of the ongoing need for childcare workers, the city-state continues to rely on short-term school-based training over two years for becoming a childcare assistant (*Sozialassistent/Sozialassistentin*). However, in the kindergarten groups these assistants may only work alongside fully-trained early years educators, due to the law requiring skilled workers (*Fachkraftgebot*) contained in the Social Code Book VIII, §72. The highly debated political rationale for sticking to this short-term training is the low-threshold accessibility (for secondary school leavers, migrants) and the chance for advancement by means of follow-up early years educator training. However, in reality it has proven difficult to keep childcare assistants in ECEC in the long run, especially full-time, and to convince them to embark on the lengthy additional training to become an early years educator. Against this backdrop, debates on the logic of this training continue. While union representatives criticise low wages which might serve as an additional but not a breadwinning income, scientific ECEC experts question the contribution of this training format to enhancing quality in ECEC; they critically assess that counting these staff as fully skilled workers in the child-staff ratio statistics might cover up a lack of investment in a professional workforce (expert interview 1 and 3).

II.4 Case 3 LTC: The role of Christian and other non-profit providers in collective bargaining

II.4.1 The case study: the context, service governance and employment relations at the local level

The local context of the third case study on LTC "The role of Christian and other non-profit providers in collective bargaining" are the federal states of Bremen and Hessen.

For the following contextual information, we will refer to Hessen only since the corresponding information for Bremen has already been provided in chapter II.2.1. In contrast to Bremen, Hessen is an economically strong federal state, located in West Germany, with Wiesbaden as its capital. Historically, the region is characterised by the Protestant and the Catholic church alike (in 2018, 33.4 per cent of the population was Protestant and 22.3 per cent Catholic; BPB 2018). Economically, financial services are important with Frankfurt am Main, the largest city in Hessen, being Germany's financial centre. Hessen's economic strength is not only based on financial services but more generally on a strong service sector as well as the automotive and automotive supplier industries, the metal and electrical industries, the chemical and pharmaceutical industries, biotechnology, medical technology, mobility and logistics (Arbeitswelt Hessen 2022). In 2021, the unemployment rate was 5.5 per cent, slightly lower than the national average of 6.3 per cent, and 43.9 per cent of the unemployed were female (EURES 2022b). In 2021, Hessen had 6,295,017 inhabitants (Destatis 2022), and, similar to Bremen, population aging is a key demographic issue. From 1999 to 2017, the number of persons in need of care increased continuously (1999: 145,000; 2005: 163,000; 2009: 187,000; 2013: 212,000; 2017: 259,000; Rothgang et al. 2020: 59).

Public and private service provision in Bremen and Hessen

In both federal states, as in Germany in general, private providers play a crucial role, predominantly in homecare, while public providers are far less important (1.4 per cent in homecare services and 4.7 per cent in residential care in 2017; Gesundheitsberichterstattung des Bundes 2021a). In Bremen, the share of private homecare providers (65 per cent in 2017) was roughly equal to the national average of 65.8 per cent in 2017, in Hessen the share (74.4%) was substantially higher (see table A2 in the appendix). Regarding the equally important residential care, in Bremen, the share of private residential care home providers (37.7 per cent) is

slightly below, and in Hessen slightly above the national average of 42.6 per cent (see table A3 in the appendix; Rothgang et al. 2020: 50).

The importance of private providers in Germany is reflected in the number 60eoplee in need of care who use their services. In 2017 this was the majority (51.6 per cent, see table A4 in the appendix; Rothgang et al. 2020: 100). In Bremen, this share (48.4 per cent in 2017) is slightly below the average, while Hessen is a federal state with a high share (59.0 per cent in 2017). In residential care, Hessen figures slightly above (66.8%) and Bremen significantly below (47.6%) the national average of 63.7% of private provision (see table A5 in the appendix; Rothgang et al. 2020: 102).

Labour market and workforce in LTC in Bremen and Hessen

In 2017, 390,322 persons worked in homecare services in Germany, including 4,678 in Bremen and 28,687 in Hessen. Bremen is the federal state with the lowest full-time employment rate of 18 per cent in homecare services. In contrast, Hessen is among the West German states with the highest full-time employment rate. Part-time work is the standard employment form in homecare services in all German federal states, however, it is far more widespread in Bremen than in Hessen (see table A 6 in the appendix; Rothgang et al. 2020: 95).

In the case of residential care homes, Bremen has the lowest full-time employment rate again (23.3 per cent in 2017), while the full-time employment rate in Hessen (32.7 per cent) is comparable to the national average of 28.1 per cent (see table A7 in the appendix; Rothgang et al. 2020: 103). Part-time work is also very widespread in residential care. The total number of employees in German care homes is 764,648 in 2017, including 6,754 in Bremen and 51,442 in Hessen.

The governance of the service at the local level

As described in the WP1 and WP2 report, provision of LTC in Germany has historically been framed by the subsidiarity principle restricting the role of the state in favour of family and non-profit actors in service provision. Even the introduction of national LTC insurance in 1995 reflects this heritage; at the heart of this reform is a cash benefit for people in need of care (*Pflegegeld*) which can be spent either on care provided by family members or by formal homecare services, and hence incentivises care within the family. Nevertheless, the demand for care provision has been constantly rising and the founding and licensing of private providers for care services from 1995 onwards can be seen as a political answer to meet the rising demand. While central government sets the legal framework for care provision, the federal states are mainly responsible for providing the infrastructure for long-term care services. In 2017, the third Long-term Care Strengthening Act came into force which strengthened the role of the municipalities in the delivery of long-term care, advisory services and promotion of assistance services for daily life (European Commission 2018: 4).

Employment relations on the national and local level

Compared to the German employment relations system as a whole, interest representation in LTC is particularly weak and deficient, not least due to an inability of both sides to organise (see chapters I.3 and I.4 of the WP1/2 report for details). Not only is the self-organisation of LTC workers "from below" very low. Obviously, and in contrast to the ECEC sector, the strong presence of private providers who are unwilling (and in part unable) to organise also contributes to a system of highly fragmented employment relations and what experts call an improvised collective bargaining autonomy (*improvisierte Tarifautonomie*) (Schroeder/Kiepe 2020: 214). In total, the estimated proportion of workers covered by collective bargaining in LTC is about one-third (Eurofound 2020: 51). At the same time, low wages and strenuous working conditions are perceived as severe problems in the sector, aggravating the labour shortage. In this context, political regulations that are mainly national, such as the minimum wage introduced in 2013, impact on employment relations.

In 2021, the United Services Trade Union (ver.di) demanded an increase in the minimum wage for registered geriatric nurses as well as minimum holiday entitlement as measures to improve pay and working conditions in the sector. However, an attempt by ver.di and the employers' association BVAP[37] to reach a generally-binding collective agreement above the level of the national minimum wage failed because church providers refused to join the collective agreement. The right of church providers to self-determination allowed the Catholic provider Caritas to veto the extension of the collective agreement. Religious providers are a challenge for trade unionist work because they generally discourage trade union activities (Schroeder 2018: 212/213). Hence, although it was initially desired, the attempt to reach a general national collective agreement failed. In contrast to the decision against a generally-binding collective agreement and the integration of Christian providers into collective bargaining at the national level, there are some 'good practice' examples of Christian non-profit providers who joined collective agreements at the local level in Bremen and Hessen. These 'good practice' examples are analysed in our third case study in order to identify factors that potentially facilitate (or inhibit) a joint collective agreement.

II.4.2 The case study: the issue

This case study addresses the role of Christian non-profit providers in collective bargaining because they usually apply their own employment contract guidelines (secured by law) instead of participating in general collective bargaining agreements. The focus is on the hitherto existing 'good practice' exceptions, such as the TV PfliB in the city-state of Bremen and the *Tarifvertrag diakonische Altenpflege* in the federal state of Hessen. In contrast to the failed generally-binding collective agreement at the national level (see section II.4.1), both examples show that and how Christian non-profit providers can and do participate in collective agreements with the service sector union ver.di. In general, there is no need for Christian providers to engage in collective bargaining, but the Christian providers in our case study perceived the trend towards low wages driven by private providers as a problem that might be stopped by a collective agreement. Interestingly, it was the Christian employers who contacted ver.di to negotiate a collective agreement in Bremen and Hessen. A strong motivation for the local union representatives to positively respond to this request for joint action in collective bargaining was their interest in recruiting new members. The favourable regional (case-specific) outset was the interest in reaching a collective agreement shared by local Christian providers as well as by the union ver.di.

This case study is relevant for employment relations in Germany because there is a gap between the national veto constellation of Christian providers in collective bargaining and local Protestant and Catholic non-profit providers that have joined collective agreements. The case study might help to identify push factors at the local level that could contribute to reaching a collective agreement at the national level and thus improve working conditions in the LTC sector, including wage setting and workload issues.

II.4.3 Subcase Bremen

II.4.3.1 Subcase Bremen: The issue

The starting point for the first subcase was the year 2012/13, when various LTC providers in Bremen faced considerable economic insecurity and existential fears (interview 7), among them Caritas, who as a religious provider was applying their own employment contract guidelines (AVR). The local Caritas unit in Bremen was no longer able to pay its employees according to the AVR. One way for Caritas to rescind the AVR was an insolvency procedure.

[37] The BVAP is the first and only association which aims to represent public, private and non-profit employers together (expert interview 6 of the WP1 and WP2 report). Despite this aspiration, the BVAP's members are as yet not very heterogeneous, as the association mainly includes employers who are part of the AWO as well as a few others from the Diakonische Dienstgeber Niedersachsen, the Arbeiter-Samariter-Bund, the Paritätischer Gesamtverband, and the Volkssolidarität (for a list of BVAP members, see ASB 2021). As part of the Concerted Action on Care (*Konzertierte Aktion Pflege*, KAP) of the German Ministry for Health, the Federal Ministry for Family Affairs, Senior Citizens, Women, and Youth, and the Federal Ministry for Labour and Social Affairs, the Law for the Improvement of Wages in the Care Sector (*Pflegelöhneverbesserungsgesetz*) was introduced in 2019 in order to extend collectively agreed minimum working conditions to all LTC providers. BVAP was founded in 2019 in response to this government intervention.

In this situation, the idea arose to establish a regional collective agreement in Bremen, as market density and competition for staff had been increasing constantly due to a broad wage spread of about 25 per cent between the wages offered by different LTC providers (not least due to the AVR, as religious providers pay relatively higher wages compared to private and public providers). In addition, the interviewee from Caritas criticised that the AVR did not take regional peculiarities into account. He argued that it would make a great difference whether wages of the Caritas providers in Bavaria are based on the AVR, in an area where they have a market share of 90 per cent and can therefore build up political pressure on the funding bodies and the authorities, in contrast to Bremen, where Christian non-profit LTC providers do not have this market power to lobby with (interview 7).

"The basic idea of the regional collective agreement was to create a structure that regulates competition in LTC in Bremen not merely by remuneration, but by quality and content" (interview 7). Due to the broad wage spread, the collective agreement was set at a lower wage level than the public sector collective agreement (TVöD), but with the long-term goal of convergence to this level.

The collective agreement association was founded in 2014 (main founding members were: Caritas, Workers' Welfare Association AWO (Arbeiterwohlfahrt), Red Cross (Rotes Kreuz), Diakonie (Diakonisches Werk), and the Parity Welfare Association (Paritätischer)). In 2015, the first collective agreement was concluded for trainees only. After the successful introduction of the trainees' contract, a collective agreement covering the LTC workforce of the providers involved, the TV PfliB, was implemented in March 2017.

One specificity was that the LTC employers contacted ver.di and not the other way round, as is usually the case. The employers and ver.di were "fully on the same page and therefore the collective bargaining process went relatively quickly" (interview 7). With the introduction of the TV PfliB, Bremen was the first federal state to introduce a comprehensive sectoral collective agreement in LTC. Meanwhile, by 2022, 18 non-profit residential and homecare service providers had become members of the collective agreement TV PfliB.[38] "It is the only collective agreement in LTC in Germany that brings together so many providers" (interview 5). Indeed, the TV PfliB has become a "gold standard" or benchmark for setting remuneration levels in Bremen, even for private providers (interview 7). Convergence with the collective agreement for public-sector employees of the federal states (TVL) has almost been achieved. Today, the TV PfliB is only 1.1 per cent below the TVL (interview 5).

II.4.3.2 Subcase Bremen: Initial positions of the social, public and other relevant actors on the issue

Although the TV PfliB originally envisaged a low salary level, the introduction of this collective agreement was already associated with the hope that it would become a benchmark for wage levels as the interviewee from the Chamber of Employees mentioned (interview 6). "The introduction was necessary in order to achieve a downward wage limit" (interview 6).

For the interviewee from the trade union ver.di, a further important issue is to equalise wages in elder care with those of hospital care (interview 5) as many LTC workers move to better-paid hospital care which compounds staff shortages in LTC. To mitigate staff shortages, "LTC employees should not compete on jobs, instead, employers should compete on the best working conditions" (interview 5).

Regarding the discrepancy between Caritas's position in the national veto constellation on collective bargaining and the local Caritas unit in Bremen, which joined the TV PfliB, the trade union secretary of ver.di Bremen describes the local Caritas as more courageous than Caritas at the national level. At the national

[38] The 18 full members are: Arbeiter-Samariter-Bund (ASB) Altenwohn- und Pflegeheim GmbH, Bremische Schwesternschaft vom Roten Kreuz e.V., Caritas – Gepflegt in Bremen gGmbH, Paritätische Dienste Bremen gGmbH, Bremer Heimpflege gGmbH, Egestorff-Stiftung Altenheim, AWO Ambulant gGmbH, Diakonisches Werk Bremerhaven e.V., Caritas – Gepflegt zu Hause gGmbH, Paritätische Pflegedienste Seestadt Bremerhaven GmbH, Bremer Heimstiftung, DIAKO Kurzzeitpflege gGmbH, mission:ambulant gGmbH, AWO Pflege gGmbH, DRK Pflege Bremen GmbH, Caritas – Haus St. Elisabeth gGmbH, Paritätische Pflegedienste Bremen gGmbH, and ambulante Pflege Bremer Heimstiftung gGmbH. In addition, two more providers (the Protestant provider "Friedehorst" and the AWO Bremerhaven) have guest status (Tarifgemeinschaft Pflege in Bremen 2022).

level, Caritas was concerned about the overall implications for its third way and therefore rejected the collective agreement based on the hypocritical justification that they would pay more than provided in the collective agreement. "However, that was not really the point. From ver.di's perspective, it was a major concern to introduce a minimum wage level" (interview 5).

II.4.3.3 Subcase Bremen: The process

In Bremen, ver.di and the Chamber of Employees pursued a strategy of tackling the issue of low wages paid by private providers and stopping a downward trend by introducing the TV PfliB as a leading wage indicator. Due to the low wage level at the beginning of this collective agreement, it was possible to reach a mutual agreement between employers and the trade union ver.di. Ver.di provisionally accepted the low wage level based on the condition that it would be gradually increased, including the long-term goal of convergence with the TVL. Furthermore, the collective bargaining process was a chance for ver.di to recruit new members as many different non-profit residential and homecare service providers joined the TV PfliB.
The local Caritas unit in Bremen had financial difficulties, was affected by an insolvency procedure, and could no longer offer comparatively high payments based on the AVR. Therefore, the TV PfliB gave Caritas the opportunity to reduce wages in the short term, but at the same time strengthen employees' rights with a joint collective agreement (regarding employees' challenges of the AVR, see section II.2.1).

II.4.3.4 Subcase Bremen: The solution

A general characteristic of the TV PfliB is the long-term innovation process. In the short term, Caritas reduced wages, while the wage level of other non-profit providers who joined the TV PfliB increased. Today, the aim of convergence with the TVL has almost been achieved – but this process has taken some time. Apart from the salary level, the TV PfliB also covers service quality. On the one hand, members of the TV PfliB advertise their LTC services by stressing "quality and content" (interview 7). On the other hand, good working conditions are key to high service quality. The solution of implementing a local collective agreement is highly innovative in its output for two reasons: Firstly, wages and wage setting procedures could be improved. Secondly, and in contrast to the national level, Caritas as a church provider is involved in collective bargaining at the local level. Overall, the willingness to engage in collective wage setting by non-public providers in Bremen could be improved.

II.4.4 Subcase Hessen

II.4.4.1 Subcase Hessen: The issue

The umbrella organisation Diakonie (Diakonische Altenhilfe Hessen) is the largest single LTC employer in Hessen (interview 8) and recently concluded a collective agreement with the trade union ver.di. However, the collective bargaining process took a very long time. As Protestant providers, church labour regulations had been applied in the past. In the years 2012, 2013 and 2014, the employees' representatives in the labour law commission (ARK), which usually consists of equal numbers of employee and employer representatives, boycotted the commission because they no longer wanted to support the third way (interview 9). From the employers' perspective, there was strong competition between providers for staff (interview 10) since staff shortages are a core problem in LTC, not least in Hessen. Due to staff shortages, the employers' goal was to acquire new employees (interview 10). The lack of employee participation in the ARK and the competition for staff were the main reasons for the Protestant employers to improve working conditions with a new collective agreement. Within the framework of this specific situation, the Protestant elder care providers in Hessen that are part of the Diakonie have realised that it can be advantageous to conclude a collective agreement (interview 10). In general, the AVR are regulations that apply to all areas of the Diakonie's activities. The aim was to develop a specific, suitable collective agreement for the LTC sector (interview 10). The AVR are a complicated and long sets of rules that are not always in line with modern framework conditions (interview 9). Therefore, employers wanted to introduce modern, streamlined, attractive collective bargaining, and the employees were interested in being part of the bargaining process and influencing the negotiations (interview 10). As a result, the collective bargaining process started because the Protestant employers recognised that the third way could no longer continue as in the past (interview 9). "This is my personal opinion. I do not believe that the church and Diakonie need their own labour law regulations. We can live

well with the second way. If we want to do something better and can afford it, then we can do it within the state framework" (interview 9). Similar to the subcase of Bremen, a specific peculiarity was that the employers contacted ver.di and not the other way around. The collective agreement came into force on 1 April 2022 (interview 8) and is applied by five Protestant LTC providers[39] in Hessen (ver.di 2022b).

II.4.4.2 Subcase Hessen: Initial positions of the social, public and other relevant actors on the issue

Apart from ver.di's intention to recruit new members, the interviewee from ver.di mentioned the necessity for LTC workers to organise themselves (interview 8), as employee co-determination is very weak in the whole LTC sector and should be promoted more strongly. Similar to the Bremen subcase, ver.di's representative emphasised the necessity of aligning wages in elder care with those in hospital care. In addition, the plannability of work and leisure time for employees and a general reduction in working time to five days a week were named as important needs from ver.di's perspective (interview 8).

The lead negotiator for the employers also mentioned that employees expressed the wish for reliable working hours, which is very difficult to achieve from the employers' perspective because care work is time-intensive and there is the ongoing problem of staff shortages. The employers' aim was to achieve a high degree of flexibility, but, at the same time, to consider the wishes of the employees and offer them reliable working hours (interview 10) in order to retain staff and attract new workers.

II.4.4.3 Subcase Hessen: The process

In Hessen, the Protestant providers' strategy was to solve the problem of staff shortages and competition for staff between non-profit, private and public providers by improving working conditions to attract and keep staff. During the bargaining process, reliable working hours were a particularly difficult topic (interview 9). On the one hand, ver.di demanded a reliable duty roster and on the other, employers had a great need for flexibility due to staff shortages (interview 9). Both sides agreed on the compromise that employees have a whole weekend off every fortnight but they may be on stand-by on their other free days (interviews 9, 10). If an employee has to cover for another colleague, they receive extra remuneration. Furthermore, the collective agreement also contains provisions for arbitration instead of strikes (interview 9).
Ver.di's main objective was to represent the employees and to recruit new members because their degree of organisation in religious LTC organisations is very low (interview 10).

II.4.4.4 Subcase Hessen: The solution

In the subcase of Hessen, a long-term innovation process is also a general characteristic (interviews 9, 10). Although the negotiations were difficult, the desire to achieve a good outcome for employees and employers was even stronger (interviews 9, 10). The collective agreement not only includes better remuneration but also shorter working hours. For employees, an increase in earnings is not always the most important thing: reliable working hours can be more important (interview 9). The collective agreement in the Hessen case study is very innovative because it contains the working time regulation of two whole weekends off per month, which is a unique selling proposition in the overall LTC sector. Thus, the collective agreement increases the attractiveness of the Protestant providers in the competition for urgently needed staff (ver.di 2022b).

II.4.5 The implementation in Bremen and Hessen

Subcase Bremen: Interestingly, at the beginning of the collective bargaining process, the trade union ver.di had a rather passive role. Ver.di was sceptical because the employers approached them and not the other way round. In addition, the low wage level of the collective agreement was an obstacle for ver.di. However, the long-term goal of convergence with the TVL, halting the downward trend in wages, the involvement of so many different non-profit providers and the opportunity to recruit new ver.di members were decisive factors for the success of the collective bargaining process. Furthermore, a prior collective agreement for trainees served as a kind of good practice example for the implementation of a collective agreement covering all

[39] The members of the collective agreement are DiaCom Elder Care Eschwege, Senior Centre Wolfhagen, DIAKO Waldeck-Frankenberg gGmbH in Arolsen and Frankenberg, and Innere Mission Frankfurt (ver.di 2022b).

LTC workers. On the employers' side, the main and general success factor in both subcases in Bremen and Hessen was that church employers were willing to renounce the church-specific labour law regulations and accept ver.di as an employee representative for negotiating wage levels and working conditions.

Subcase Hessen: Similar to the Bremen subcase, in the Hessen subcase the employers also contacted ver.di and not vice versa (interview 8). At the beginning of the collective bargaining process, ver.di had doubts about cooperating with the employers as very few employees were organised in a union. On the basis of the condition of achieving better working conditions and wage levels than the AVRs offered, ver.di entered into the negotiations. The main specific success factor in the Hessen case is the agreement on reliable working times. Due to staff shortages, one of the core problems in LTC is a high workload and unpredictable working hours. In Hessen, the social partners were able to agree on a specific regulation for reliable working hours, namely that employees have a whole weekend off every fortnight. For the employees this guaranteed time off is seen as crucial because the profession is very challenging both mentally and physically; employers on the other hand acknowledge that reliable working time is crucial for attracting and keeping a trained workforce.

The central outcome of both subcases in Bremen and Hessen is that non-profit employers (including church providers) and ver.di concluded a collective agreement, secured better wages and working conditions for most employees, and counteracted the low wages of private providers.

II.5 Case 4 LTC: The role of private providers

II.5.1 The case study: the context, service governance and employment relations at the local level

The local or regional context

The fourth LTC case study on the role of private providers in collective bargaining is based on the collective agreement between ver.di and Korian, located in Luneburg, and the collective agreement between the private homecare employers' association ABVP, representing some one hundred small providers of home-based LTC across Germany, and a small Christian union.

The local context of the *first subcase* is the Hanseatic city Luneburg, located in Northern Germany in the federal state of Lower Saxony. Since 2007, Luneburg has been called a Hanseatic city to acknowledge its historical membership in the Hanseatic League. Nowadays, the county of Luneburg is known for its rural areas (in particular the Luneburg Heath), agriculture, medium-sized companies (e.g. the fashion company Roy Robson) and breweries, and its local proximity to Hamburg. In 2021, 75,599 inhabitants lived in the historically Protestant-influenced city of Luneburg, and 185,129 inhabitants in the surrounding county of Luneburg (Landkreis Luneburg 2022).

Similar to other German regions, the need for long-term care has also increased in Luneburg. The number of people in need of care in the county of Luneburg has more than doubled between 1999 and 2019 (1999: 41,904; 2003: 45,034; 2007: 49,187; 2011: 55,977; 2015: 65,686; 2017: 78,465; 2019: 91,788; Niedersächsisches Ministerium für Soziales, Gesundheit und Gleichstellung 2021: 33). Furthermore, from 1999 to 2019, an increase in the number of homecare service providers and residential care homes can be observed (the absolute numbers of homecare service providers in Luneburg are: 1999: 209; 2003: 222; 2007: 229; 2011: 241; 2015: 251; 2017: 261; 2019: 264 and the numbers of residential care home providers are: 1999: 304; 2003: 327; 2007: 352; 2011: 406; 2015: 417; 2017: 434; 2019: 449; ibid: 40, 50). Luneburg is one of the German regions with the highest market shares of private providers (Rothgang et al. 2015: 49), standing at around 70 per cent (ibid: 84).

In 2019, 1,668 registered geriatric nurses and 302 care assistants worked in homecare services in Luneburg, and 4,391 registered geriatric nurses as well as 1,102 care assistants in care homes (Niedersächsisches Ministerium für Soziales, Gesundheit und Gleichstellung 2021: 78). In all regions of the county of Luneburg, the full-time employment rate in homecare services is much lower than the full-time employment rate in

residential care homes (ibid: 86). The unemployment rate in the county of Luneburg was, like the national average, 5.1 per cent in December 2021 (Bundesagentur für Arbeit 2022).

No specific local contextual information is relevant for the *second subcase*. The private homecare providers' association ABVP is located in Hanover, but it represents different homecare providers in different regions across Germany. The ABVP includes micro-firms, large concerns, sole proprietorships and limited companies (ABVP 2022).

The governance of the service at the local level

In Germany, one of the major changes to the LTC system was the introduction of mandatory long-term care insurance in 1995. As described in the WP1 and WP2 report, long-term care insurance is regulated by law, the Social Code Book XI (SGB, *Sozialgesetzbuch, Elftes Buch*), and includes a cash benefit for people in need of care (*Pflegegeld*) which can be spent either for care provision by family members or on formal homecare services. The rising demand for homecare services not only led to increasing care provision by family members, but also to increased licensing of private providers of care services from 1995 onwards. Private providers are profit-oriented, usually pay relatively low wages, and are rarely involved in collective bargaining processes. However, the recently passed national law *Gesundheitsversorgungsweiterentwicklungsgesetz* (GVWG) obliges all providers to pay wages in line with regional collective agreements or at least average wages from September 2022 onwards. It also stipulates mandatory staffing levels and regulates subsidises for co-payments (*Eigenanteile*) for care home residents (BMG 2021). This act is a national political instrument to generalise wage setting in LTC at the regional level.

II.5.2 The case study: The issue

Characteristics of the issue

The fourth case study on the role of private providers in collective bargaining focuses on private LTC providers who entered into collective agreements before the GVWG came into effect. In Germany, private providers are rarely involved in collective agreements, but there are some local 'best-practice' exceptions which are investigated in two subcases. Both subcases of the fourth case study are 'pioneers', as the collective agreements were negotiated before the GVWG came into effect. The first subcase is a collective agreement between the private residential care provider Korian in Luneburg and the service sector union ver.di. The second subcase is a collective agreement between the private homecare employers' association Arbeitgeber- und privater BerufsVerband Pflege e.V. (ABVP), which represents some one hundred home-based LTC providers in Germany, with a small Christian union (GÖD). In both subcases the focus is on pay and working conditions offered by the selected private providers.

Relevance for employment relations and working conditions in the LTC sector

The case study is highly relevant for employment relations and working conditions in the German LTC sector as a trend towards privatisation has occurred over the last two decades and the market power of private providers has increased continuously. In Germany, the LTC sector is characterised by private for-profit, non-profit and public providers regulated by the SGB XI. This law firstly strengthened homecare, and secondly the founding and licensing of private providers led to a privatisation of public LTC infrastructure. As described in the WP1 and WP2 report, people in need of care can generally choose between different care providers who are authorised by a care contract (§ 72 SGB XI). They have a fundamental right to choose on the basis of SGB XI and competition between providers is promoted by this legislation. The long-term care insurance fund is obliged to provide an overview of available local services and their costs (§ 7 Section 3 SGB XI). Section 11 (2) SGB XI stipulates that non-profit and private providers have priority over public providers in care for the elderly (Evans 2016: 28).

In 2019, a majority of 66.5 per cent of home-based LTC providers were private providers (9,770 in total), 32.2 per cent were non-profit (4,720 in total), and only 1.3 per cent of homecare service providers were public (198 in total) (Gesundheitsberichterstattung des Bundes 2021b). In the field of residential LTC, 42.7

per cent of residential care home providers were private (6,570 in total), 52.8 per cent non-profit (8,115 in total), and only 4.5 per cent public (695 in total) (Gesundheitsberichterstattung des Bundes 2021a).

Thus, a core problem for employment relations is that a substantial share of LTC providers are private providers that are profit-oriented and seldom participate in collective bargaining in order to keep staff costs low. Furthermore, for reasons of flexibility and staff deployment, employers often fear convergence with the public sector collective agreement TVöD (interview 11).

II.5.3 Subcase Korian and ver.di

II.5.3.1 Subcase Korian and ver.di: The issue

Due to their desire to improve wages, especially for care assistants, representatives of Korian's works council[40] contacted ver.di in 2020 and asked for their support (interview 12). This initial approach marks the starting point of the first subcase of the fourth case study. The reason for starting the ensuing negotiations was that the employees pushed for a collective agreement (interview 11) and ver.di supported them because more than 50 per cent of Korian's employees become ver.di members. This is unusual in the field of elder care, although only a small number of them became active members, e.g. as part of the collective bargaining commission (interview 12). The negotiations started and the first agreement was concluded in 2021. Surprisingly, at the start of the negotiations, the employer Korian made a remuneration offer that was already higher than ver.di's demand (interview 11). Shortly after the conclusion of the first agreement, the political debates on the GVWG led to a renegotiation of the collective agreement to pay even higher wages. At the beginning of 2022, a new collective agreement came into force providing relatively high wage levels above the TVöD for registered geriatric nurses, and care assistants almost reach the TVöD level (interview 12).

II.5.3.2 Subcase Korian and ver.di: Initial positions of the social, public and other relevant actors on the issue

On the employees' side and from the perspective of the works council, which is elected by Korian's workforce, there was strong concern about wage levels and the desire to increase wages, in particular for care assistants (interview 12). In this subcase, ver.di's intention was to recruit new members, similar to the other subcases. However, in contrast to the other LTC subcases, the recruitment strategy was much more successful because many Korian employees joined ver.di (interview 12).

On the employer's side, Korian aimed to improve its competitiveness in the labour market by attracting personnel by means of high wages, which is a further similarity to the other subcases. As Korian was prepared to pay a high level of remuneration even before the collective bargaining process started, they had no objections to a collective agreement (interview 11). On the contrary, they wanted to use the collective agreement as an advertisement for good working conditions and a "seal of quality" (interview 11).

II.5.3.3 Subcase Korian and ver.di: The process

The employees' and ver.di's strategy towards tackling the issue of wages was to implement a collective agreement to improve wages, especially for care assistants (interview 12). Ver.di's aim was to recruit new members because their membership levels in private LTC organisations are very low. Verdi's recruitment strategy was strongly fostered by some committed members of Korian's works council and was therefore very successful (interview 12). The collective bargaining process began quickly since Korian was not concerned about introducing a collective agreement because they considered the wage level to already be high prior to the start of the collective bargaining process (interview 11). Korian used the collective agreement as an advertising strategy to tackle the issue of staff shortages and to achieve competitive advantage in the labour market. Due to the political awareness of generally low wages in the LTC sector in Germany, the political debates on the GVWG were a push factor for an even higher wage level than the first round of collective bargaining negotiations in this subcase agreed upon.

[40] Employment relations in Germany are shaped by a dual system governed by law: Firstly, the collective bargaining principle of autonomous negotiations between trade unions and employers' associations on the industry/sector level applies, and secondly the right to co-determination exists on the firm level (in Human Resource Management including working time regulation) via elected works councils.

II.5.3.4 Subcase Korian and ver.di: The solution

In contrast to the other subcases, a general characteristic of the Luneburg subcase is its short-term innovation process. The process started with the employees' wish to improve wages, which was supported by Korian's works council and ver.di (interview 12). Due to Korian's willingness to engage in collective wage setting, the negotiations started quickly and were not complicated. Since this process was a 'traditional form' of collective bargaining, the process is not very innovative. However, it is interesting to see how negotiations and private providers can be influenced by political regulations such as the GVWG. Although the collective bargaining process is not very innovative, the output, namely a collective agreement including a high wage level being paid by a private provider, is innovative as it is an exception compared to other private providers that rarely participate in collective bargaining and usually pay wages far below the TVöD.

II.5.4 Subcase ABVP and GÖD

II.5.4.1 Subcase ABVP and GÖD: *The issue*

The subcase of the private homecare providers' association ABVP and the Christian union GÖD is framed by the political debates in 2021 and 2022 on the rejection of a general national collective agreement and the reform legislation contained in the GVWG. The GVWG was the stimulus for the ABVP to become willing to engage in collective bargaining (interview 14) since it created political pressure on LTC providers to be open for collective agreements. Indeed, the ABVP has taken the former Federal Minister for Health, Jens Spahn, who called for an entry-level salary for registered geriatric nurses of 4,000 euros, at his word (interviews 14, 15). "We wanted to be a role model for good working conditions and point out that collective agreements are a good way to improve wage setting and staff retention. […] Registered geriatric nurses are unique workers. They deserve to be remunerated properly" (interview 14). The issue of labour market competitiveness was also addressed in this subcase: "There are providers that have had to close LTC facilities because they can no longer find LTC workers (interview 14)". Due to the political context of the GVWG and the issue of competition for personnel, the ABVP contacted the Christian trade union GÖD to conclude a collective agreement (interview 14). The interviewee from the ABVP mentioned that they did not want to enter into negotiations with ver.di because they feared that they would be dictated to by such a large union (interview 14). In contrast, the small Christian union GÖD was seen as a negotiation partner "at eye level" (interview 14). The negotiations started in 2021, the collective agreement was signed in February 2022 and came into force in September 2022 (GÖD 2022). The collective agreement includes not only a high wage level but also further employee benefits such as an additional financial bonus for homecare services, more holidays than provided for by law (30 days off based on a 5-day working week), and union members get an additional day off (interview 14; GÖD 2022). One disadvantage for employees is that they have to work 39 hours per week, in contrast to the 35 or 37 hour weeks of other LTC providers (interview 14). A general challenge in Germany is the refinancing of personnel costs by the LTC insurance funds (interview 15). However, based on the GVWG, the ABVP and GÖD assumed that the regional associations of the LTC insurance funds are no longer allowed to reject pay agreements as "uneconomical" (interview 15; GÖD 2022). Therefore, the ABVP and GÖD used the chance to implement a high wage level in their collective agreement.

II.5.4.2 Subcase ABVP and GÖD*: Initial positions of the social, public and other relevant actors on the issue*

Initially, the ABVP felt pressured by political debates on the GVWG to conclude a collective agreement. Nevertheless, the employers also wanted to increase their competitiveness in the labour market by offering high wages (interview 14). The forthcoming GVWG and potential competitive advantage shaped the ABVP's willingness to conclude a collective agreement. Since the ABVP emphasised strong differences between the organisation and requirements of homecare services and residential care, the employers' association deliberately represents only homecare providers and the collective agreement is specifically designed for homecare workers (interview 14).

The main motivation for the trade union GÖD to negotiate with the ABVP was to strengthen the care sector and the care profession (interview 15). GÖD aimed at recognition of and an incentive for joining the

care profession by means of appropriate remuneration (interview 15). Furthermore, the interviewee from GÖD mentioned that it is also important to consider employees' wishes, to provide reliable working hours (including time for human interaction and emotional care, and not only 'basic care'), a good mix of staff, and to support care workers in their private care provision (interview 15).

II.5.4.3 Subcase ABVP and GÖD*: The process*

Apart from the fact that GÖD wanted to improve wage setting and working conditions for LTC workers, it can at least be assumed that attracting new members was part of their strategy for solving the problem of low union membership figures.

The ABVP's strategy for tackling the issue of political pressure and improving working conditions in homecare was to draw up a collective agreement for homecare providers. Similar to the subcase of Korian, the political debates on the GVWG and a staff recruitment strategy were push factors for ABVP's willingness to engage in collective bargaining and for agreeing to a high wage level above the GVWG threshold.

II.5.4.4 Subcase ABVP and GÖD: *The solution*

One further similarity to the subcase of Korian and ver.di is that the negotiations between the private homecare providers' association ABVP and the trade union GÖD were a short-term, constructive (interview 15) and cooperative process (interview 14). However, in contrast to Korian and ver.di, the ABVP contacted the union and not vice versa.

Political influence is of great relevance for this case study as the ABVP felt under political pressure to conclude a collective agreement. On the other hand, the trade union GÖD exerted pressure on the LTC insurance funds to refinance the high wage level of the collective agreement (interview 15). If the refinancing of this collective agreement would have been refused, GÖD would have used political pressure to force the LTC insurance funds to refinance the remuneration (interview 15). The interesting and innovative output of this case study is a very high wage level and the general willingness of the ABVP to engage in collective bargaining processes – although it was only successful with political pressure.

II.5.5 The implementation of both subcases

Subcase Korian and ver.di: The general framework for the fourth case study is the profit orientation of private providers which implies keeping personnel costs low. However, at the same time, low wage levels function as a factor that reduces competitiveness in the labour market. Thus, the favourable regional case-specific outset was high competition for trained LTC workers in the subcase of the private residential care provider Korian in Luneburg. Social pressure in the field of LTC, staff shortages and a positive corporate image were push factors for Korian entering into collective bargaining (interview 12). In addition, the GVWG was a push factor for increasing the wage levels of the collective agreement. The main result of this case study is a higher wage level than the threshold contained in the GVWG because Korian wanted to offer attractive working conditions to achieve competitive advantage in attracting workers (interview 12). It was a well-thought-out process by the employer to increase employees' satisfaction and to use the collective agreement as a "seal of quality" for good working conditions (interview 11). Since Korian is a large LTC company with branches in other German regions (and also in other countries), the subcase in Luneburg provides some hope that this collective agreement will also be implemented in other Korian care facilities as long as regional peculiarities can be considered (interview 11).

Subcase ABVP and GÖD: In the subcase of ABVP and GÖD, the GVWG and the competition for trained LTC workers were the two key factors in the private homecare employers' association successfully concluding a collective agreement. The ABVP aimed to improve the profession's working conditions and make the future of the LTC profession more attractive (interview 14). The small and 'employer-friendly' Christian union (as compared to the large service sector union ver.di) was available for negotiations with the private homecare employers' association.

The central outcome of both subcases is that for-profit employers and trade unions concluded a collective agreement and secured better wages and working conditions.

II.6 Comparing the four cases. What we can learn from the case studies

II.6.1 Key factors for success, challenges, and obstacles in the four cases[41]

As detailed in the WP1/WP2 report, in Germany service provision in ECEC and LTC is challenged by severe staff shortages and critical working conditions including low wages, the latter more pronounced in LTC than in ECEC. Hence, the case studies 1 and 2 in ECEC focused on good practice examples in recruitment (staffing and training), while the case studies 3 and 4 in LTC addressed solutions for the problem of wage setting.

There are some commonalities across the cases. Obviously, in all cases local employment relations played a role, and local actors made use of their autonomy. At the same time, national government policies were influential, too. Furthermore, a common factor for success seems to be a consensus between different stakeholders about the problem *definition* and a high willingness to find a solution on the local level. Nevertheless, relevant actor constellations, including the role of decentralised government and service users and the relative impact of social partners (either unions or public or private employers), vary by sector and case.

Regarding ECEC and the focus on staffing and training, social partners played a role in a specific, that is *tripartite actor constellation*. In case studies 1 and 2 the Bremen State Ministry (Senatorial Authority) for Children and Education was a relevant actor willing to invest in better staffing and a reform of training and therefore sought consensus with the unions and the largest public service provider (applies to Case 1, subcase b). Support from the union representatives (and works council of the public provider Kita Bremen) as well as the employer was secured, because better staffing was seen as contributing to better working conditions and better service quality. The PiA reform of training (case study 2, subcase a) was also perceived as a win-win situation by both social partners, contributing to recruitment and retention of skilled workers and to upholding a sufficient staff-child ratio. Alongside the union, the Bremen Chamber of Employees acted as a strong partner; also parents as service users were in favour of any initiative contributing to better staffing and quality of services. Hence, there was a broad coalition for investment in better childcare including working conditions. However, it has to be noted that the willingness of the state government to make these investments has until now largely rested on the availability of national funding which can be used to partly finance the respective reforms. Finally, in the ECEC cases studied, the interplay of the local and national level of employment relations proved to be mutually beneficial. The union ver.di was successful in wage bargaining on the national level for ECEC employees in public (state and municipal) organisations twice in a row, based on high mobilisation on the local level with Bremen as an active site in strike activities. Hence, organising for the strikes during the bargaining rounds mobilised employees and alerted parents about working conditions in ECEC and fostered a public discourse on the need for making ECEC an attractive workplace by addressing both better staffing and higher wages.

In the LTC cases, exemplifying a successful process of wage bargaining between unions and religious non-profit employers (case 3) and a private for-profit employer (case 4), local social partners were also highly relevant. Specific for these cases is a strong role of employers and employer organisations for initiating the wage bargaining in contrast to the trend for abstention from collective bargaining in the sector. In case 3, local church employers used their autonomy to renounce the so-called 'third ecclesiastic way' of employment relations, in case 4 a for-profit employer was willing to negotiate an agreement with a small Christian union instead of unilateral wage setting, common among for-profit providers. In both cases, difficulties in attracting and keeping motivated and skilled workers and, more generally, the decreasing attractivity of the care sector contributed to the employers' willingness to engage in collective wage bargaining. In these cases, the

[41]For an overview see table A8

interplay with the national level of employment relations was neither relevant nor supportive; rather, local social partners acted contrary to the national level of employment relations as in case 3: While at the national level Caritas rejected a national collective agreement, the local level providers in subcase a) and b) joined collective agreements. Hence, these cases can be seen as pioneers for normalising employment relations in a sector so far characterised by a non-existent or poor capacity to self-organise among both employees as well as employers, which is a prerequisite for engaging in collective bargaining. It has to be noted though, that for these LTC good practice examples, political regulation plays a role, too. As a recently introduced law (GVWG) obliges all providers to pay wages in line with regional collective agreements or at least average wages from September 2022 onwards and stipulates mandatory staffing levels (BMG 2021), in the future private employers in particular, as in case 4, need to accept collective agreement regulations for their wage setting and to provide sufficient staff. Negotiating their own agreements with wage levels above the GVWG threshold thus might provide a competitive advantage in the tight labour market for care workers.

II.6.2 Sectoral similarities and differences: are sectoral differences important?

As in other European countries, care services in Germany show distinct structural similarities such as gender issues, under-recognition of care work, understaffing, and unmet labour demand. They are characterised by an overly female workforce, suffer from a negative image and a lack of recognition in terms of wages, career prospects, visibility and appreciation (FORSEE 2022). This assessment holds, even though LTC and ECEC are of great 'systemic relevance' for the whole of society, visible not least during the years of the Covid-19 pandemic. Both fields have been struggling with staff shortages which will even increase in the near future (The Social Employers 2022).

Despite the general structural similarities of both sectors in Germany, there are also some structural differences in financing, governance and provider structure: While ECEC is characterised by public financing, federal state responsibility and a structure of public and non-profit providers, LTC is characterised by insurance-based financing and a structure of non-profit and for-profit providers. Although implemented in the overall German conservative welfare state framework, reforms in the last decade indicate that both sectors follow different pathways. The expansion of ECEC after German reunification in 1990 and reforms focusing on quality of ECEC are linked to the goal of supporting working parents and thus rather follow a social-democratic than a conservative welfare state orientation. This is particularly pronounced in the city-states and partly based on the state socialist tradition of high employment of women/mothers in the Eastern states. In contrast, the insurance-based LTC system is in line with the subsidiarity principle which privileges unpaid and informal care in the family with a cash-for-care benefit for those in need of care. With the founding and licensing of private LTC providers, the increasing demand for LTC resulted in the privatisation of large segments of the increasing (but still insufficient) LTC infrastructure from 1995 onwards. Hence, profit orientation and competition have become more pronounced. A further distinction is the different economic interests in ECEC and LTC. ECEC policies are construed as 'social investment' as children are seen as 'a promise for the future' and high childcare coverage and good quality childcare enable an 'adult worker model', while elder care is rather perceived as 'a financial burden' for the state and society.

Not least due to the differences in the provider structure, employment relations in both sectors diverge, too. In general, in the past, the mostly female and part-time workers in ECEC and LTC showed little interest in engaging in works council or trade unions. In part this is due to the large presence of religious providers who apply a specific consensus-oriented labour law that excludes the right to strike and is based on a Christian work ethos. However, in ECEC, where public providers are strongly represented and organised on the local and national level, preconditions for collective bargaining are far better than in LTC characterised by a dominance of non-profit and private for-profit providers, with the latter neither willing to organise nor to engage in collective bargaining.

Irrespective of structural differences, both sectors in Germany are equally exposed to the pressures of increasing service demand, public budget/insurance-based financing constraints, a quest for decent working conditions and for high quality of services (quadrilemma). Over recent decades a more or less common

pattern of tackling the quadrilemma can be identified: Both sectors saw an expansion based on public (ECEC) and public and insurance-based (LTC) spending in order to address the rising demand for the respective services as well as some national regulation in order to secure minimum standard working conditions and quality of care. Referring to the continuum of possible solutions identified in the SOWELL project, the dominant pattern seems to be a muddling through strategy of 'soft' expansion with the LTC sector closer to 'soft privatisation' due to more precarious working conditions, lower wage levels and weaker employment relations than in ECEC; and the ECEC sector with the recent focus on job quality and quality of care slightly leaning towards the solution of 'care provision integration'.

II.6.3 Lessons from the local case studies

The case study selection for Germany reflects the commonalities and the structural differences in both sectors. The resulting specific challenges are addressed with a focus on staffing and training (quality aspects) in ECEC and a focus on collective bargaining (low wages and precarious working conditions) in LTC. We hold that the 'good practice' examples reflect the specific, though typical context conditions of each sector and that the problems/issues as well as solutions they present bear some lessons that can be generalised.

Obviously, local participation by social partners, decentralised government but also other public actors (such as the Chamber of Employees in the state of Bremen) and the service users are of great importance for defining the problem and engaging for a solution. As provision of care services always takes place within a local context, activation of local actors is crucial, even if governance of the services rests on a higher (state and national) level. Local engagement not only helps to find solutions for the specific local context, but also provides insights on the more general aspects of the perceived problem for the actors involved. As governance of care services usually is multi-level, local social partners can enter into an exchange with partners on the national level, and the knowledge and service infrastructure available to national level bodies can support local partners, as was the case with local ver.di representatives in ECEC case studies 1 and 2. In the same vein, federalism in Germany allows for mutual learning from best practice solutions for state level actors, as was the case with the training reform PiA (case study 2) and the better staffing program (case study 1). The LTC case studies 3 and 4 provide the lesson that adapting to the normal standard of collective bargaining (the so-called second way) is possible and provides advantages for employees as well as employers and thus might help to normalise collective self-regulation instead of resorting to institutional (third way for religious providers) or regulatory (minimum wage regulation, wage level threshold defined by national law) loopholes. Given the low level of organisation especially among LTC workers (Schröder 2018: 232; Schroeder et al. 2022), the case studies show that it makes sense for unions to recruit members in church and private LTC services. An important starting point for attracting new trade union members could be to cooperate more with works councils, as the first subcase of the fourth case study has shown.

A further lesson is that the state is a central actor who not only (voluntarily or involuntarily) provides loopholes for eschewing collective bargaining, but also can create incentives for self-regulated collective bargaining autonomy at the local level. This specifically applies to the LTC sector where state policies originally triggered the expansion of services via market creation to the detriment of working conditions and wages (and quality of services) and later on tried to regulate the market via mandatory wage thresholds and staffing levels. As 'hard' and 'soft privatisation' of care services are a widespread solution to the need to expand care provision and perceived budget constraints, the dynamic history of LTC regulation in Germany might be important for other European countries, too.

References Part II

ABVP [Arbeitgeber- und BerufsVerband Privater Pflege e.V.] 2022: Der ABVP im Überblick. https://abvp.de/ABVP/ (accessed 17 October 2022).

Arbeitnehmerkammer Bremen 2022ba: In your interest. https://www.arbeitnehmerkammer.de/sprache/englisch.html (accessed 20 October 2022).

Arbeitnehmerkammer Bremen (Hg.) 2022b: *KammerReport – Kindertagesbetreuung: Plätze, Elternbedarf und Betreuungslücken in Bremen und Bremerhaven*. Bremen: Arbeitnehmerkammer Bremen.

Arbeitswelt Hessen 2022: Gute Aussichten in interessanten Branchen. https://www.work-in-hessen.de/arbeiten-in-hessen/branchen/ (accessed 26 September 2022).

ASB 2021: Bundesvereinigung Arbeitgeber in der Pflegebranche (BVAP) gegründet. https://www.asb.de/news/arbeitgeberverband-der-pflege-gegruendet (accessed 20 November 2021).

Autorengruppe Fachkräftebarometer 2021: *Fachkräftebarometer Frühe Bildung 2021*. München: Weiterbildungsinitiative Frühpädagogische Fachkräfte.

Bertelsmann Stiftung (Hg.) 2022a: *Ländermonitoring – Frühkindliche Bildungssysteme 2022 – Profile der Bundesländer – Bremen*. Gütersloh: Bertelsmann Stiftung.

Bertelsmann 2022b: 2023 fehlen in Deutschland rund 384.000 Kita-Plätze. 2022/10/20. https://www.bertelsmann-stiftung.de/de/themen/aktuelle-meldungen/2022/oktober/2023-fehlen-in-deutschland-rund-384000-kita-plaetze (accessed 23 November 2022).

Bildungsmonitor 2022: Bewertung der Schulqualität in den Bundesländern nach dem Bildungsmonitor 2022. https://de.statista.com/statistik/daten/studie/201456/umfrage/schulqualitaet-in-den-bundeslaendern-nach-dem-bildungsmonitor/ (accessed 31 October 2022).

BMFSFJ [Bundesministerium für Bundesministerium für Familie, Senioren, Frauen und Jugend] 2021: *Gute-KiTa-Bericht 2021. Monitoringbericht 2021 des Bundesministeriums für Familie, Senioren, Frauen und Jugend nach § 6 Absatz 2 des Gesetzes zur Weiterentwicklung der Qualität und zur Verbesserung der Teilhabe in Tageseinrichtungen und in der Kindertagespflege (KiTa-Qualitäts- und -Teilhabeverbesserungsgesetz – KiQuTG) für das Berichtsjahr 2020*. Berlin: Bundesministerium für Bundesministerium für Familie, Senioren, Frauen und Jugend.

BMG 2021: Gesetz zur Weiterentwicklung der Gesundheitsversorgung. https://www.bundesgesundheitsministerium.de/gesundheitsversorgungsweiterentwicklungsgesetz.html (accessed 17 June 2021).

Böhme, Rene 2021: *Vereinbarkeit von Beruf und Familie bei atypischen Arbeitszeiten*. Reihe Wirtschaft und Arbeit in Bremen, 32. Bremen: Institut Arbeit und Wirtschaft (iaw)/ Arbeitnehmerkammer Bremen.

BPB 2018: Kirche nach Bundesländern. https://www.bpb.de/kurz-knapp/zahlen-und-fakten/soziale-situation-in-deutschland/61562/kirche-nach-bundeslaendern/ (accessed 20 September 2022).

BPB 2022: Ausländische Bevölkerung nach Bundesländern. https://www.bpb.de/kurz-knapp/zahlen-und-fakten/soziale-situation-in-deutschland/61625/auslaendische-bevoelkerung-nach-bundeslaendern/ (accessed 10 November 2022).

Bundesagentur für Arbeit 2022: Arbeitsmarkt im Überblick – Berichtsmonat Dezember 2021 – Luneburg. https://statistik.arbeitsagentur.de/Auswahl/raeumlicher-Geltungsbereich/Politische-Gebietsstruktur/Kreise/Niedersachsen/03355-Lueneburg.html (accessed 7 October 2022).

Destatis 2022: Population by national and federal states. https://www.destatis.de/EN/Themes/Society-Environment/Population/Current-Population/Tables/population-by-laender.html (accessed 22 August 2022).

Deutscher Verein 2020. Empfehlungen des Deutschen Vereins für die Weiterentwicklung der Aus- und Weiterbildung für (sozialpädagogische Fachkräfte und Lehrende für den Bereich der Kindertagesbetreuung. Berlin: Deutscher Verein für öffentliche und private Fürsorge e.V.

Die Senatorin für Kinder und Bildung 2019: Vorlage Nr. G195/19. Weiterentwicklung eines Kita-Sozialindex als Basis für eine differenzierte Ressourcenausstattung in Kitas. 22.04.2019 (internal document). Bremen: Die Senatorin für Kinder und Bildung.

Die Senatorin für Kinder und Bildung 2020: Vorlage 44/20 JHA Harmonisierung der Programme zum zusätzlichen Einsatz von Sozialpädagog*innen in Einrichtungen der Kindertagesbetreuung (SozPäd I und SozPäd II) (internal document). Bremen: Die Senatorin für Kinder und Bildung.

EURES 2022a: Bremen. Short overview of the labour market. https://ec.europa.eu/eures/printLMIText.jsp?lmiLang=en&regionId=DE8&catId=368 (accessed 31 October 2022).

EURES 2022b: Hessen. Short overview of the labour market. https://ec.europa.eu/eures/printLMIText.jsp?lmiLang=en&regionId=DE0&catId=366 (accessed 22 August 2022).

Eurofound 2020: Public services. Long-term care workforce: Employment and working conditions. https://www.eurofound.europa.eu/publications/customised-report/2020/long-term-care-workforce-employment-and-working-conditions (accessed 21 June 2021).

Evans, Michaela 2016: Arbeitsbeziehungen der Care-Arbeit im Wandel. *WISO-Diskurs* 23, 1–52.

Federal Constitutional Court 2015: 2 BvR 2292/13. https://www.bundesverfassungsgericht.de/SharedDocs/Entscheidungen/DE/2015/07/rs20150715_2bvr229213.html (accessed 19 November 2021).

FORSEE 2022: Improving the attractiveness of social services jobs in Europe: social partners initiatives. Bruxelles September 2022.

Freie Hansestadt Bremen/ver.di 2018: Bremer Erklärung „Gute Arbeit in Kitas". https://www.kita.bremen.de/aktuelles/neuigkeiten-von-kita-bremen/2018/bremer-erklaerung-fuer-gute-arbeit-in-kitas-12081 (accessed 12 November 2022).

Gambaro, Ludovica/Spieß. C. Katharina/Westermeier, Franz G. 2021: Erzieherinnen empfinden vielfache Belastungen und wenig Anerkennung. *DIW Wochenbericht* 19, 323–332.

Gesundheitsberichterstattung des Bundes 2021a: Pflegeheime (Anzahl). Gliederungsmerkmale: Jahre, Deutschland, Pflegeangebot, Träger, Kapazitätsgrößenklassen. https://www.gbe-bund.de/gbe/!pkg_olap_tables.prc_set_page?p_uid=gastd&p_aid=53969713&p_sprache=D&p_help=2&p_indnr=397&p_ansnr=98151376&p_version=17&D.983=23641&D.493=1000527 (accessed 4 November 2021).

Gesundheitsberichterstattung des Bundes 2021b: Ambulante Pflege- und Betreuungsdienste. https://www.gbe-bund.de/gbe/pkg_isgbe5.prc_menu_olap?p_uid=gastd&p_aid=67776538&p_sprache=D&p_help=0&p_indnr=571&p_indsp=5089&p_ityp=H&p_fid= (accessed 4 November 2021).

GÖD 2022: Zukunftsweisender Tarifabschluss zwischen Arbeitgeber- und BerufsVerband Privater Pflege e.V. (ABVP) und der Gewerkschaft GÖD. https://www.goed-online.de/index.php/aktuelles-aus-der-goed/223-zukunftsweisender-tarifabschluss-zwischen-arbeitgeber-und-berufsverband-privater-pflege-e-v-abvp-und-der-gewerkschaft-goed (accessed 13 October 2022).

Gottschall, Karin/Schröder, Tim 2013: „Familienlohn" – Zur Entwicklung einer wirkmächtigen Normierung geschlechtsspezifischer Arbeitsteilung. *WSI-Mitteilungen* 66 (3), 161–170.

Hagemann, Karen, Konrad H. Jarausch and Cristina Allemann-Ghionda, eds. 2011. *Children, Families and States: Time Policies of Child Care, Preschool and Primary Schooling in Europe*. New York: Berghahn Books.

Kroos, Daniela/Gottschall Karin 2012: Dualization and Gender in Social Services. The Role of the State in Germany and France. In: Emmenegger, Patrick/Häusermann, Silja/Palier, Bruno/Seeleib-Kaiser, Martin (eds.), *The Age of Dualization*. Oxford: Oxford University Press, 100–123.

Krüger, Helga 1999: Gender and Skills. Distributive Ramifications of the German Skill System. In: Culpepper, Pepper D./Finegold, David (eds.), *The German Skills Machine. Sustaining Comparative Advantage in a Global Economy*. New York: Berghan Books, 189–227.

Landkreis Luneburg 2022: Daten und Fakten zum Landkreis. https://www.landkreis-lueneburg.de/ueber-den-landkreis/wissenswertes-ueber-den-landkreis/daten-und-fakten.html (accessed 6 October 2022).

Mende, Sonja/Fuchs-Rechlin, Kirsten 2022: *Dauerbaustelle: Erzieher:innenausbildung. Strukturen, Ausbildungsformate und Entwicklungen an Fachschulen für Sozialpädagogik*. WIFF Studien, Band 35. München: Weiterbildungsinitiative Frühpädagogische Fachkräfte.

Niedersächsisches Ministerium für Soziales, Gesundheit und Gleichstellung 2021: Landespflegebericht Niedersachsen 2020. https://www.ms.niedersachsen.de/download/170841/Landespflegebericht_2020.pdf (accessed 6 October 2022).

Pressemitteilung Freie Hansestadt Bremen/ver.di 2018: Bremer Senat und ver.di unterzeichnen „Bremer Erklärung für Gute Arbeit in Kitas". https://www.senatspressestelle.bremen.de/pressemitteilungen/bremer-senat-und-ver-di-unterzeichnen-bremer-erklaerung-fuer-gute-arbeit-in-kitas-306281 (accessed 12 November 2022).

Rauschenbach, Thomas/Meiner-Teubner, Christiane/Böwing-Schmalenbrock, Melanie/Olszenka, Ninja 2020: *Plätze. Personal. Finanzen. Bedarfsorientierte Vorausberechnungen für die Kindertages- und Grundschulbetreuung bis 2030*. München: Deutsches Jugendinstitut.

Rothgang, Heinz/Müller, Rolf/Preuß, Benedikt 2020: *Barmer Pflegereport 2020: Belastungen der Pflegekräfte und ihre Folgen*. Berlin: Barmer.

Rothgang, Heinz/Sünderkamp, Susanne/Weiß, Christian 2015: *Die Rolle der privaten Anbieter in der Pflegeversorgung in Deutschland. Expertise für den bpa*. Berlin: Bundesverband privater Anbieter sozialer Dienstleistungen e.V.

Schroeder, Wolfgang 2018: *Interessenvertretung in der Altenpflege. Zwischen Staatszentrierung und Selbstorganisation*. Wiesbaden: Springer.

Schroeder, Wolfgang/Kiepe, Lukas 2020: Improvisierte Tarifautonomie in der Altenpflege. Zur Rolle von Gewerkschaften, Arbeitgeberverbänden und Staat. In: APuZ Aus Politik und Zeitgeschichte – Edition (eds.), *Pflege. Praxis – Geschichte – Politik*. Bonn: Bundeszentrale für politische Bildung, 214–226.

Schroeder, Wolfgang/Kiepe, Lukas/Inkinen, Saara 2022: Die Grenzen selbstorganisierten Handelns: attraktive Pflegeberufe durch Tarifautonomie? *WSI-Mitteilungen* 75 (5), 355–362.

Schwarzer, Thomas 2022: Erzieherinnen und Erzieher dringend gesucht – Der weite Weg zur vergüteten Ausbildung. In: Arbeitnehmerkammer Bremen (eds.), *Bericht zur Lage 2021*. Bremen: Arbeitnehmerkammer, 93–100.

Statista 2022: Schulden der Länder und Gemeinden/ Gemeindeverbände[1] je Einwohner in Deutschland nach Bundesländern am 30. Juni 2022. https://de.statista.com/statistik/daten/studie/629/umfrage/oeffentliche-pro-kopf-verschuldung-nach-bundeslaendern/(accessed 31.10.22).

Tarifgemeinschaft Pflege in Bremen 2022: Mitglieder der Tarifgemeinschaft Pflege in Bremen. https://www.tarifgemeinschaft-pflege-bremen.de/mitglieder/ (accessed 22 August 2022).

The Social Employers 2022: Staff Shortages in Social Services across Europe. Federation of Social Employers. January 2022

Ver.di 2020: Bundeseinheitliches Ausbildungsgesetz für den Beruf staatlich anerkannte*r Erzieher*in. Diskussionspapier. https://bildungspolitik.verdi.de/felder/fruehkindlich/++co++d37a5010-186a-11eb-ab22-001a4a160100.

Ver.di 2021: Beschäftigte der evangelischen Kitas in Erfurt organisieren sich. Gleiche Arbeit, gleiches Geld. *Kirchen.info 2021* (38), 8–10.

Ver.di 2022a: Ergebnis bei Tarifverhandlungen für Sozial- und Erziehungsdienste. Pressemitteilung 18.05.2022. https://www.verdi.de/presse/pressemitteilungen/++co++dbfd03e6-d6c7-11ec-a5ac-001a4a160129 (accessed 9 November 2022).

Ver.di 2022b: Erstmalig Tarifvertrag mit diakonischer Altenhilfe. https://hessen.verdi.de/presse/pressemitteilungen/++co++3ebb6ca0-79cd-11ec-af58-001a4a160100 (accessed 22 September 2022).

Ver.di Magazin 2022: Streikberichterstattung

WIFF (Weiterbildungsinitiative Frühpädagogische Fachkräfte) 2022: Die Erzieherinnenausbildung und der Fachkräftebedarf. Vortrag von Kirsten Fuchs-Rechlin, Deutscher Fürsorgetag, 16.06.2022.

Wolnik, Kevin/Holtrup, André/Warsewa, Günter 2019: *Der Bremer Erwerbstätigkeitsatlas. Zur Strukturierung des Erwerbssystems im Lande Bremen*. Reihe Arbeit und Wirtschaft in Bremen 30/2019. Bremen: Arbeitnehmerkammer Bremen/Institut Arbeit und Wirtschaft.

ZGF 2022: *Alleinerziehende*. Bremen: Bremische Zentralstelle für die Verwirklichung der Gleichberechtigung der Frau. https://www.frauen.bremen.de/familie/alleinerziehende-4907 (accessed 31 October 2022).

Appendix Part II

A1: List of interviewees (organisation, role, level)

Interview number	Case study	Organisation	Role level
ECEC case studies			
1 and 1a	**Case study 1:** Staffing levels and staff composition	Chamber of Employees in the city-state Bremen	Policy Advisor for Municipal Social Policy
2	**Case study 1:** Staffing levels and staff composition	University Research Institute	Researcher, Institute for Labour and Economy
3	**Case study 1 and 2:** Staffing levels and staff composition/ Reform of training: practice-oriented training including remuneration	German Association for Public and Private Welfare	Policy Advisor for Child Day Care and Training of Skilled Workers
4	**Case study 2:** Reform of training: practice-oriented training including remuneration	State Ministry (Senatorial Authority) for Children and Education	Head of Subdepartment "Qualification, Recruitment and Retention of Skilled Social Pedagogical Workers", Department "Early Childhood Education, Child Support and Skilled Worker Development"
LTC case studies Bremen			
5	**Case study 3, subcase 1 (Bremen):** The role of Christian and other non-profit providers in collective bargaining	Ver.di (local level)	Trade Union Secretary (local level)
6	**Case study 3, subcase 1 (Bremen):** The role of Christian and other non-profit providers in collective bargaining	Chamber of Employees	Health Policy Advisor
7	**Case study 3, subcase 1 (Bremen):** The role of Christian and other non-profit providers in collective bargaining	Caritas (local level)	Director of the Local Caritas Unit

8	**Case study 3, subcase 2 (Hessen):** The role of Christian and other non-profit providers in collective bargaining	Ver.di (local level)	Trade Union Secretary (local level)
9	**Case study 3, subcase 2 (Hessen):** The role of Christian and other non-profit providers in collective bargaining	Employers' Association for Protestant Care for the Elderly (DV.DAH)	Spokesperson of the Employers' Association for Protestant Care for the Elderly
10	**Case study 3, subcase 2 (Hessen):** The role of Christian and other non-profit providers in collective bargaining	Employer Association Group "Social Services and Education"	Lawyer for Labour Law and Lead Negotiator for the Employers' Association for Protestant Care for the Elderly
11	**Case study 4, subcase 1 ("Korian"):** The role of private providers	Private residential care provider Korian	Lawyer for Labour Law
12	**Case study 4, subcase 1 ("Korian"):** The role of private providers	Ver.di (local level)	Trade Union Secretary
13	**Case study 4, subcase 2 ("ABVP/GÖD"):** The role of private providers	Employers' and Private Professional Association for Care (ABVP)	Chair of the Employers' and Private Professional Association for Care
14	**Case study 4, subcase 2 ("ABVP/GÖD"):** The role of private providers	Employers' and Private Providers' Professional Association for Care (ABVP)	Federal Manager
15	**Case study 4, subcase 2 ("ABVP/GÖD"):** The role of private providers	Union of Public Services (GÖD)	Federal Manager

Note: The interview transcripts (in German) can be made available upon request (exception: interview 10 which may not be made available for data protection reasons).

Table A2: Number of homecare service providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider

Federal states	1999		2005		2011		2017	
	In total[1]	Share of private providers in %	In total	Share of private providers in %	In total	Share of private providers in %	In total	Share of private providers in %
Baden-Württemberg	845	20.7	974	41.6	1,110	51.5	1,122	52.2
Bavaria	1,591	40.7	1.710	50.3	1,829	55.9	1,996	60.5
Berlin	310	61.6	422	72.3	524	75.4	613	78.5
Brandenburg	516	58.7	509	61.9	598	63.2	722	63.3
Bremen	**126**	**63.5**	**116**	**59.5**	**109**	**65.1**	**117**	**65.0**
Hamburg	343	74.9	324	75.0	343	77.8	366	76.0
Hessen	**860**	**53.6**	**802**	**60.3**	**1,002**	**69.6**	**1,186**	**74.4**
Mecklenburg-West Pomerania	398	54.0	397	53.9	438	57.1	489	60.5
Lower Saxony	926	53.2	1,047	60.7	1,189	65.6	1,312	67.6
North Rhine-Westphalia	2,205	52.6	2,039	58.2	2,309	63.8	2,823	68.3
Rhineland-Palatinate	411	50.9	372	50.5	446	59.4	516	64.3
Saarland	153	59.5	121	65.3	116	68.1	122	70.5
Saxony	845	64.6	913	67.7	1,005	70.0	1,121	68.7
Saxony-Anhalt	481	62.4	467	66.2	521	68.7	613	68.5
Schleswig-Holstein	439	42.8	387	53.2	399	55.9	475	61.5
Thuringia	371	50.9	377	55.7	411	57.7	457	58.0
Germany	10,820	50.9	10,977	57.6	12,349	62.9	14,050	65.8

[1] The category "in total" includes private, non-profit and public providers.

Source: Rothgang et al. 2020: 91.

Table A3: Residential care home providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider

Federal states	1999		2005		2011		2017	
	In total	Share of private providers in %	In total	Share of private providers in %	In total	Share of private providers in %	In total	Share of private providers in %
Baden-Württemberg	956	32.2	1,228	34.8	1,543	31.8	1,777	30.7
Bavaria	1,262	26.9	1,544	30.2	1,704	33.9	1,885	36.3
Berlin	316	35.4	350	42.3	376	48.7	391	48.8
Brandenburg	261	20.7	320	28.4	400	30.5	523	35.4
Bremen	**71**	**28.2**	**86**	**0.0**	**99**	**0.0**	**146**	**37.7**
Hamburg	164	31.1	179	30.2	188	50.5	201	53.2
Hessen	**614**	**42.7**	**649**	**45.9**	**783**	**46.0**	**905**	**48.4**
Mecklenburg-West Pomerania	181	*	245	18.4	332	30.4	446	*
Lower Saxony	1,163	55.5	1,348	59.1	1,667	58.9	1,873	60.3
North Rhine-Westphalia	1,874	26.8	2,008	27.9	2,325	31.3	2,824	34.5
Rhineland-Palatinate	390	37.2	421	36.1	472	39.2	539	40.8
Saarland	110	*	130	*	147	*	180	*
Saxony	439	23.0	648	35.0	804	38.8	970	44.2
Saxony-Anhalt	260	30.8	365	36.4	471	42.9	633	48.8
Schleswig-Holstein	579	63.2	626	67.3	664	67.0	692	66.0
Thuringia	219	21.5	277	28.9	379	33.0	495	39.4
Germany	8,859	34.9	10,424	38.1	12,354	40.5	14,480	42.6

[1] The category "in total" includes private, non-profit and public providers.

* No data available

Source: Rothgang et al. 2020: 100.

Table A4: People in need of care served by homecare service providers in the German federal states in 1999, 2005, 2011 and 2017, differentiated by type of provider

Federal states	1999		2005		2011		2017	
	In total	Share of persons cared for by private pro-viders in %	In total	Share of persons cared for by private pro-viders in %	In total	Share of persons cared for by private pro-viders in %	In total	Share of persons cared for by private pro-viders in %
Baden-Württem-berg	42,408	11.9	46,390	22.8	57,617	29.2	75,303	31.2
Bavaria	56,658	23.2	63,907	31.2	73,459	37.5	97,591	41.9
Berlin	18,437	51.1	22,895	61.0	26,398	67.7	34,550	70.5
Brandenburg	15,443	44.0	20,639	49.1	27,892	52.8	38,422	55.7
Bremen	**4,545**	**43.2**	**5,892**	**43.6**	**6,222**	**50.8**	**8,210**	**48.4**
Hamburg	11,480	60.9	12,312	66.6	13,513	70.2	18,950	70.7
Hessen	**29,506**	**33.8**	**31,375**	**43.6**	**41,466**	**54.0**	**60,501**	**59.0**
Mecklenburg-West Pomerania	8,965	42.3	12,380	51.1	17,186	55.1	26,337	54.8
Lower Saxony	40,421	35.6	51,646	44.5	63,525	49.5	96,524	52.4
North Rhine-Westphalia	93,916	41.3	98,166	46.9	122,249	51.3	182,043	54.5
Rhineland-Pala-tinate	17,578	28.7	19,367	28.9	23,284	35.7	35,976	42.6
Saarland	5,249	40.4	5,592	47.1	6,883	50.4	9,871	51.1
Saxony	29,971	46.8	31,310	54.4	38,085	59.1	60,247	57.8
Saxony-Anhalt	14,198	46.9	18,348	52.0	22,525	57.4	30,439	60.7
Schleswig-Hol-stein	14,329	34.7	15,839	42.6	15,964	45.8	26,112	49.8
Thuringia	12,185	38.1	15,485	46.3	19,996	49.3	28,882	48.5
Germany	415,289	35.6	471,543	43.1	576,264	48.6	829,958	51.6

Source: Rothgang et al. 2020: 92.

Table A5: People in need of care in residential care homes in the German federal states in 1999, 2005, 2011 and 2017

Federal states	1999		2005		2011		2017	
	In total	Average number of residents per home	In total	Average number of residents per home	In total	Average number of residents per home	In total	Average number of residents per home
Baden-Württemberg	65,548	68.6	78,305	63.8	93,135	60.4	106,323	59.8
Bavaria	82,434	65.3	100,901	65.4	109,835	64.5	123,360	65.4
Berlin	23,629	74.8	26,814	76.6	28,902	76.9	31,906	81.6
Brandenburg	15,676	60.1	20,068	62.7	25,156	62.9	30,098	57.5
Bremen	**4,659**	**65.6**	**5,715**	**66.5**	**6,806**	**68.7**	**6,952**	**47.6**
Hamburg	13,540	82.6	13,717	76.6	15,699	83.5	17,492	87.0
Hessen	**37,425**	**61.0**	**42,422**	**65.4**	**50,851**	**64.9**	**60,428**	**66.8**
Mecklenburg-West Pomerania	12,792	70.7	15,389	62.8	20,130	60.6	23,850	53.5
Lower Saxony	61,258	52.7	75,814	56.2	91,556	54.9	110,976	59.3
North Rhine-Westphalia	133,352	71.2	147,779	73.6	167,542	72.1	190,669	67.5
Rhineland-Palatinate	25,328	64.9	28,998	68.9	32,758	69.4	39,853	73.9
Saarland	7,457	67.8	8,920	68.6	10,407	70.8	12,611	70.1
Saxony	30,752	70.1	39,921	61.6	48,712	60.6	57,427	59.2
Saxony-Anhalt	17,608	67.7	22,315	61.1	27,925	59.3	33,285	52.6
Schleswig-Holstein	27,506	47.5	30,978	49.5	33,678	50.7	38,220	55.2
Thuringia	14,247	65.1	18,526	66.9	23,828	62.9	29,136	58.9
Germany	573,211	64.7	676,582	64.9	786,920	63.7	912,586	63.0

Source: Rothgang et al. 2020: 102.

Table A6: Staff in homecare services in the German federal states in 2017

Federal states	In total	Full-time	Part-time in %			Others[1]	Number of full-time equivalents
			More than 50%	Up to 50%, not marginally employed	Marginally employed		
Baden-Württem-berg	34,687	19.2	29.8	24.7	22.9	3.3	20,891
Bavaria	52,458	25.2	31.4	17.9	23.8	1.7	33,379
Berlin	22,308	37.5	40.3	8.3	12.2	1.7	16,813
Branden-burg	17,574	34.8	50.8	5.1	7.5	1.9	13,702
Bremen	**4,678**	**18.0**	**43.4**	**11.5**	**24.5**	**2.7**	**2,960**
Hamburg	11,217	29.5	32.4	12.0	23.1	3.0	7,462
Hessen	**28,678**	**31.4**	**30.0**	**16.2**	**20.1**	**2.3**	**19,326**
Mecklen-burg-West Pomerania	11,199	35.6	51.2	5.5	5.9	1.8	8,840
Lower Sa-xony	40,713	20.9	40.3	16.7	19.2	2.9	26,452
North Rhine-Westphalia	83,864	28.7	30.6	14.8	20.0	5.9	55,617
Rhineland-Palatinate	15,342	29.4	28.1	18.3	19.3	5.0	10,134
Saarland	3,862	27.3	26.5	18.5	21.1	6.6	2,477
Saxony	26,774	30.7	53.1	6.1	6.5	3.6	20,548
Saxony-Anhalt	12,195	37.4	50.0	5.9	4.8	1.9	9,722
Schleswig-Holstein	12,831	22.6	38.6	17.6	19.1	2.1	8,381
Thuringia	11,942	36.5	47.3	6.4	6.3	3.5	9,336
Germany	390,322	28.1	36.6	14.4	17.6	3.4	266,041

[1] Others are trainees, pupils, apprentices, helpers doing a voluntary social year, assistants in the Federal Volunteer Service, and former civilian service workers.

Source: Rothgang et al. 2020: 95.

Table A7: Staff in care homes in the German federal states in 2017

Federal states	In total	Full-time	Part-time in %			Others[1]	Number of full-time equivalents
			More than 50%	Up to 50%, not marginally employed	Marginally employed		
Baden-Württem-berg	99,536	27.0	34.6	18.4	10.1	9.9	68,916
Bavaria	106,757	33.8	38.9	13.9	7.4	6.1	79,230
Berlin	22,511	40.7	42.0	6.1	5.3	6.0	17,864
Branden-burg	19,814	27.5	57.5	5.4	4.0	5.6	15,267
Bremen	**6,754**	**23.3**	**49.2**	**10.4**	**9.8**	**7.2**	**4,811**
Hamburg	14,176	39.0	36.0	7.4	9.7	7.9	10,770
Hessen	**51,442**	**32.7**	**35.0**	**15.0**	**9.5**	**7.8**	**37,152**
Mecklen-burg-West Pomerania	15,563	23.4	61.9	6.2	3.3	5.2	11,881
Lower Sa-xony	90,531	27.7	41.2	14.4	10.5	6.2	64,250
North Rhine-Westphalia	175,888	25.0	37.5	18.8	9.3	9.4	121,483
Rhineland-Palatinate	34,929	30.3	32.9	18.5	8.8	9.5	24,688
Saarland	10,689	42.5	24.5	14.1	6.7	12.2	8,103
Saxony	41,311	21.6	63.1	6.1	3.0	6.2	31,319
Saxony-Anhalt	22,630	28.8	58.4	5.6	2.6	4.6	17,698
Schleswig-Holstein	31,597	34.9	37.5	12.5	9.4	5.6	23,386
Thuringia	20,520	25.3	58.5	6.3	3.7	6.2	15,654
Germany	764,648	28.9	41.0	14.3	8.2	7.7	552,470

[1] Others are trainees, pupils, apprentices, helpers doing a voluntary social year, assistants in the Federal Volunteer Service, and former civilian service workers.

Source: Rothgang et al. 2020: 103.

Table A8: Overview 6.1: Comparing the four cases

	Key factors for success, challenges and obstacles	**The role of local employment relations and of their actors**				**The role of municipalities/ decentralised government and of other public actors**		**The role of other actors, organisations and that of local community and service users**	
		Relevant role in defining the solution?	*In what ways and why?*	*Use of autonomy? How?*	*Interplay national and local level*	*How were they important in defining the solution?*	*Cooperation, ignoring or conflict with social partners?*	*Relevant role? If yes, who?*	*Support for social partners from service users and local community?*
Case 1 ECEC: Staffing levels and staff composition									
Case study 1 subcase a) tripartite dialogue for decent work	Willingness of (tripartite) actors to engage for change, consensus on goals	Relevant role of union ver.di and public and non-profit employers	Union actions for better wages and both social partners in favour of better staffing		Interplay with regard to union activities/strike for better wages which were organised on national and regional/local level and generated a national wage agreement	- Chamber of Employees as a local organisation representing workers' interests with think tank capacity to identify solutions and address federal government - Social Democratic government/Senator with high engagement for better working conditions and quality in ECEC	Local government highly interested in cooperating with social partners	Care workers' and parents' (service users) voice relevant, because they are seen as voters by governing and non-governing parties	Relatively high support from parents und non-governing political parties (Christian Democrats)
Case study 1 subcase b) better staffing	Availability of national funds to support reforms enhancing childcare quality (*Gute-KiTa-Gesetz*) and state and local government highly interested in better childcare in disadvantaged neighbourhoods	Important role of large public provider (Kita Bremen) with strong union representation	Since reform for better staffing started with the public provider, support of the respective works council was crucial		Not relevant, because federal state/local government reform	- Federal state Senator as initiator of reform - Chamber of Employees and university researchers contributed expertise in evaluation of reform	Cooperation	See above	See above
Central outcome of both subcases		Broad political consensus on problem definition and solution important for taking action Decisive role of central state funding for federal reform (better staffing)							

	Key factors for success, challenges and obstacles	The role of local employment relations and of their actors				The role of municipalities/ decentralised government and of other public actors		The role of other actors, organisations and that of local community and service users	
		Relevant role in defining the solution?	*In what ways and why?*	*Use of autonomy? How?*	*Interplay national and local level*	*How were they important in defining the solution?*	*Cooperation, ignoring or conflict with social partners?*	*Relevant role? If yes, who?*	*Support for social partners from service users and local community?*
Case 2 ECEC: Reform of training: practice-oriented training including remuneration									
Case study 2 Subcase a) PiA *Subcase b) remuneration of school-based training*	For both subcases: Availability of central state funds crucial for engaging in reform measures Challenge to transfer the fix-term reforms into a long-term basic infrastructure financed by federal state budget	Union support for practice-oriented training and remuneration and on-the-job training helpful in implementation			National level played a role insofar as local social partners (involved in trainee contracts in the case of PiA) could learn from experiences from other federal states who had implemented similar measures	State government/Senator main actor	Cooperation in the case of PiA	- Formats and reform of training debated by scientific and other corporate actors - Local community and parents show general support for measures for bringing more skilled staff into ECEC centres	
Central outcome		Crucial role of central state funding for reforms undertaken and federal state funding for long-term establishment as a challenge especially in poorer city-states / Unions preferences for practice-oriented reform of training not supported by all stakeholders in ECEC, but broader consensus on need for remuneration in training							

	Key factors for success, challenges and obstacles	The role of local employment relations and of their actors				The role of municipalities/ decentralised government and of other public actors		The role of other actors, organisations and that of local community and service users	
		Relevant role in defining the solution?	*In what ways and why?*	*Use of autonomy? How?*	*Interplay national and local level*	*How were they important in defining the solution?*	*Cooperation, ignoring or conflict with social partners?*	*Relevant role? If yes, who?*	*Support for social partners from service users and local community?*
Case 3 LTC: The role of Christian and other non-profit providers in collective bargaining									
Case study 3 subcase a) Bremen	*Generally:* Church employers willing to renounce church-specific regulations and willing to accept ver.di as the employees' representative *In particular:* Successful collective agreement for trainees as a precursor	Highly relevant role of employers, highly relevant role of ver.di (despite a passive role at the beginning of the process)	Employers approached the trade union ver.di to conclude a collective agreement; ver.di interested in tackling the issue of low wages and implementation of the TV PfliB as a benchmark; collective bargaining as a chance to recruit new members	Autonomy of local church employers to renounce church-specific regulations and to conclude a regional collective agreement	National level: Rejection of a national collective agreement by Caritas Local level: Collective agreement at the local level in Bremen			Chamber of Employees	Chamber of Employees supported ver.di's demands
Case study 3 subcase b) Hessen	*Generally:* Church employers willing to renounce church-specific regulations and willing to accept ver.di as the employees' representative *In particular:* Agreement for reliable working times: every fortnight, employees have a whole weekend off	Highly relevant role of employers, highly relevant role of employees and ver.di (despite a passive role at the beginning of the process)	Employers approached ver.di to conclude a collective agreement with the aim of attracting and keeping staff ver.di's motivation: to recruit new members	Employees' boycott of the labour law commission (AKR); autonomy of local church employers to renounce church-specific regulations and to conclude a regional collective agreement	National level: Caritas rejected a national collective agreement Local level: Collective agreement at the local level in Hessen				
Central outcome of both subcases		Non-profit employers and ver.di concluded a collective agreement, secured better wages and working conditions for most employees, and counteracted low wages paid by private providers							

	Key factors for success, challenges and obstacles	The role of local employment relations and of their actors				The role of municipalities/ decentralised government and of other public actors		The role of other actors, organisations and that of local community and service users	
		Relevant role in defining the solution?	*In what ways and why?*	*Use of autonomy? How?*	*Interplay national and local level*	*How were they important in defining the solution?*	*Cooperation, ignoring or conflict with social partners?*	*Relevant role? If yes, who?*	*Support for social partners from service users and local community?*
Case 4 LTC: The role of private providers									
Case study 4 subcase a) Korian and ver.di	*Generally:* Profit orientation implies keeping personnel costs low, but low wage levels are a disadvantage in the labour market *In particular:* Social pressure in the field of LTC, staff shortages, the provider's desire for a positive corporate image, and the GVWG were success factors for achieving a high wage level in this subcase	Highly relevant role of the works council, relevant role of employees and ver.di, highly relevant role of the employer	Korian's works council approached ver.di with the aim of increasing wages for care assistants ver.di's motivation: to recruit new members		GVWG as a national law generalises wage setting at the local level	The political debates on the draft legislation from the Federal Ministry for Health resulted in an even higher wage level than the first collective bargaining agreement discussed in this subcase provided for	Cooperation with social partners: The recently passed national law GVWG obliges all providers to pay wages in line with regional collective agreements or at least average wages from September 2022 onwards		
Case study 4 subcase b): ABVP and GÖD	*Generally:* Profit orientation implies keeping personnel costs low, but low wage levels are a factor in decreasing competitiveness in the labour market *In particular:* GVWG and the competition for trained LTC workers as success factors for the general willingness of the ABVP to conclude a collective agreement	Highly relevant role of the employer, highly relevant role of the trade union	Employers' initiative towards the Christian trade union GÖD to conclude a collective agreement GÖD's motivation: strengthen the care sector and profession through appropriate remuneration and to recruit new members		GVWG as a national law generalises wage setting at the local level	The political debates on the draft legislation from the Federal Ministry for Health resulted in the general willingness of the ABVP to conclude a collective agreement	Cooperation with social partners: The recently passed national law GVWG obliges all providers to pay wages in line with regional collective agree-ments or at least average wages from September 2022 onwards		
Central outcome of both subcases		For-profit employers and trade unions concluded a collective agreement and secured better wages and working conditions							