



Challenges for Organising and Collective Bargaining
in Care, Administration and Waste collection sectors
in Central Eastern European Countries

CHALLENGES FOR ORGANISING AND COLLECTIVE BARGAINING IN CARE SECTOR IN LITHUANIA

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1. METHODOLOGICAL PREFACE

For the preparation of the report, six interviews were carried out for a total duration of 387 minutes. Representatives of three trade unions (TU) active in the sector were interviewed (three interviews), and representatives of other professional organisations whose activities are of particular importance in the social services sector (three interviews).

The choice of the participants in the survey was based on the fact that as many as five (87.2, 87.3, 88.1, 88.99, 88.91) of the seven NACE codes identified in the methodology fall within the social services sector in Lithuania, and only one within the personal health and education sectors each (87.1 and 85.1 respectively).

Representatives of TUs that have signed two sectoral collective agreements (CAs) (social services and education) were selected. The views of representatives of nursing professionals regarding application of CAs in the health sector have been heard during the preparation of the HEROS report in mid-2022.¹ Representatives of other organisations were interviewed to find out the views of alternative TU professions on the importance of CAs in the sector, and on the potential for development of collective bargaining in the private sector.

These interviews have been analysed and summarised. It also included an assessment of sector-specific statistics available on the official statistics portal (State Data Agency [SDA], Valstybės duomenų agentūra), the register of collective agreements (MSSL, 2024) and the content of the three most important collective agreements for the sector. The National CA is also important to the sector and will be addressed in the Central Public Administration report. The report is accompanied by brief information on the sector's most relevant legislation, key theses in academic publications and public policy documents (MESS, 2021; NAOL, 2023). This report also draws on the information gathered in the HEROS study and relevant findings.

¹ This sectoral CA has never been amended after interviews conducted for the HEROS report.

2. GENERAL CHARACTERISTICS OF THE SECTOR

According to the SDA, there were 184 social care service providers (mainly care institutions for elderly and disabled) in the sector, employing 23,411 people in 2022. Those social care service providers were founded by municipalities (60 employing 12,290 people), public organisations, parishes and private individuals (92 employing 6,883 people), and the State (32 employing 4,238 people). The actual number of employees in the entire social services sector is therefore likely to be higher as there were around 1,000 different social service providers in 2022. The total number of places and beneficiaries in social services institutions was 128,027. The SDA does not have information on the number of places per 1,000 inhabitants in social care homes.

At the beginning of the school year 2022–2023, there were 715 pre-school (pre-primary) education institutions in Lithuania (621 in urban areas and 94 in rural areas), employing 16,032 teaching staff members (SDA, 2024b). There were 125,200 children in pre-school education institutions.

In 2022, there were 27,000 nursing professionals in Lithuania, including 5,800 nursing assistants (SDA, 2024a). There were 7.7 nurses per 1,000 inhabitants in 2019, which is lower than the EU average (8.4 nurses) (NAOL, 2023). According to various data, there were between 90 and 98 hospitals for palliative care and nursing in Lithuania, but the number of nurses and nursing assistants is not yet available.

According to various estimates, female workforce represents more than 85% of workers in the care sector. The sector is characterised by a significant number of older workers (55+), some of them of retirement age. The majority of workers have a social work, nursing or pre-school education background, are predominantly permanent residents of Lithuania; immigrant labour is not common, and contract work, known as full-time employment, predominates. Most statistics focus on the number of service recipients and service places, while labour and human resources statistics receive relatively little attention.² Therefore, no other statistics are presented.

There are several legal acts, specifically regulating issues in the care sector:

- Labour Code of the Republic of Lithuania No XII-2603 (14 09 2016);
- Law on Remuneration of Employees of Budgetary Institutions and Remuneration of Members of Commissions of the Republic of Lithuania No XIII-198 (17 01 2017);
- Law on Social Services of the Republic of Lithuania No X-493 (19 01 2006) (LSS);
- Law on Local Self-Government of the Republic of Lithuania No I-533 (07 07 1994);
- Law on Targeted Compensations of the Republic of Lithuania No XII-2507 (29 06 2016);
- Law on Health Care Institutions of the Republic of Lithuania No I-1367 (06 06 1996);
- Law on Education of the Republic of Lithuania No I-1489 (25 06 1991).

² The Ministry of the Economy and Innovation has a Human Resources Development Unit within the Department of Economic Development, which, like individual line ministries or their institutions (the State Patients' Fund under the Ministry of Health, the Department of Social Services under the Ministry of Social Security and Labour (MSSL), the National Agency for Education), may have more detailed information on the workforce in the care sector.



3. MAJOR PROBLEMS AND CHALLENGES IN THE SECTOR

The care sector (in terms of social services, pre-school education and nursing) might be characterised by low efficiency in human resource management. This is confirmed by the preliminary report of the National Audit Office of Lithuania (NAOL), which states that there is a 36-fold difference between the Ministry's and the municipalities' data on the shortage of nursing assistants, and a 5-fold difference on the shortage of nurses (NAOL, 2023).

The main problems in the sector relate to the attractiveness of work, especially for young people, due to the following:

- The rights of workers in the sector are trampled on to meet society demands. Expanding staff responsibilities, adding new roles, often leading to even more unbalanced workloads, combined with high expectations from service users and managers increase professional fatigue and insecurity of the staff in the sector (Interviews; MESS, 2021);
- Devaluing employees in relation to society's needs (both in the eyes of the public and of employers and founders);
- Prevalence of the management approach: "the customer is always right." This underestimation is experienced by social workers, nurses and pre-school teachers alike, which increases emotional tensions at work and the sense of injustice experienced by staff. As a result, mobbing in the sector is related to the lack of confidence in the work performed by employees, alongside with constant ingratitude and disrespect experienced from managers rather than from customers;
- High workload related to the lack of personnel (where the number of customers/patients/children per employee is an issue), which leads to burnout and other health problems of employees;
- non-competitive - wages below the national average (including the gender pay gap);
- The culture of trust together with poor psycho-emotional relations with colleagues and administration, mobbing and risk of burnout is also an issue which results in high psycho-emotional risk levels in the sector.

Despite labour shortages in the sector, employees' fear of losing their jobs keeps employees "quiet". Moreover, there is no trust in confidentiality of the professional risks evaluation process; if it is carried out, employees' answers do not reflect reality.

In retirement, people are seeking part-time employment as personal care workers and home care for the elderly.³ The sector is also characterised by a grey area, where Lithuanians and newcomers (identified during the interviews as coming from Ukraine) work informally in the provision of nursing and care services in elderly people's homes. It could be argued that the State tolerates this shadow. Lithuania is still a donor of nurses to other EU Member States.

³ One of the reasons for this trend is low pensions which are insufficient to ensure subsistence of their recipients.

Even with a rather strict and detailed legal framework, compliance with the working conditions requirements is best ensured in practice only where there are active TUs or a “good” manager. However, it is often the case that even clear legal norms are not respected in practice.

In the healthcare sector, “unfair treatment” of nurses is typical as doctors are treated with more respect. Additional tension in the healthcare sector is caused by the ongoing long-lasting reform of the sector.

Human health and social work is the sector with one of the highest gender pay gaps in the country, at 25.6%, with only Financial and insurance activities (31.8%) and Information and communication activities (28.4%) having a higher gap. In the education sector, including pre-primary education, the gap is among the lowest in the country (1.7%).



4. CHARACTERISTICS OF SOCIAL DIALOGUE ORGANISATIONS IN THE SECTOR

Social dialogue is ongoing and collective bargaining is essentially limited to the public care sector only, excluding the private, non-governmental and parochial sectors. Organisations in the sector could be described as three line ministries (on the employer side) and 19 TU organisations, which have signed three sectoral CAs, as well as the Lithuanian Council of Social Work (LCSW) and the Lithuanian Association of Social Workers (LASW), uniting about 2,000 members.

The CA of the Lithuanian National Health System covers 255 institutions⁴ and is signed by nine organisations, one of which is the Lithuanian Nursing Specialists' Organisation,⁵ which unites about 6,000 nurses working in primary healthcare, hospitals, hospices and a small number in care homes.

The CA of the social services sector is signed by five TU organisations and applies to 84 institutions, of which 42 have a trade union of Lithuanian social services workers with around 2,000 members,⁶ four have a trade union federation of Lithuanian public services unions (both interviewed during the course of this study), and the rest have other TUs.⁷

The amended CA of the Lithuanian education and science sector of 6 October 2023⁸ was signed by four trade union organisations⁹, one of which, the Education and Science Trade Union Solidarumas, was interviewed during the course of this research. We do not have information on how many members of these organisations work in pre-school education.

4.1. Challenges for organising employees

The main challenges for organising employees are:

- Unfavourable attitudes towards TU members and leaders which are common both among employers and employees. Harassment, dismissals, discrimination, not providing information and other kind of mal-treatment is tolerated in general and even encouraged.
- Fear of employees to form and join TUs because of the belief that it will result in job loss, career failure and harassment.

⁴ Including hospitals, nursing hospitals, and some social care institutions for the elderly.

⁵ Others are the Lithuanian Doctors' Union, the Lithuanian Healthcare Workers' Trade Union, the Lithuanian Ambulance Workers' Trade Union Solidarumas, the Medical Institutions Workers' Trade Union Solidarumas, the Lithuanian Trade Union Federation Sandrauga, the Lithuanian Federation of Healthcare Trade Unions, and the Trade Union Organisation Lithuanian Medical Forum.

⁶ Information on the number of members of other TU organisations that have signed this collective agreement is not available (yet).

⁷ The Lithuanian Trade Union of Employees of Social Institutions, the Lithuanian Trade Union of Social Workers Solidarumas, the Lithuanian Trade Union of Civil Servants, Budgetary and Public Institutions.

⁸ Signed on 22 November 2017.

⁹ The Lithuanian Trade Union Sandrauga, the Lithuanian Trade Union Solidarumas, the Lithuanian Trade Union Solidarumas, the Lithuanian Trade Union of Education and Science, the Lithuanian Association of Trade Unions of Higher Education.

- At the same time, there is also a belief that nothing will change, even if you become a member of a trade union or establish one.
- Burnout discourages unionisation.
- Employers’ practice to apply provisions negotiated for TU members to all workers.
- Trade union organisations in the sector do not have a clear strategy to expand into the private sector.
- Although legal instruments are in place to address the problems, the knowledge and resources of TUs are very scarce. TUs themselves agree that members and even TU leaders need to “start reading CAs” so that they know how to defend employees better.
- Sometimes social dialogue is rather “synthetic” or artificial, not fulfilling the role of real dialogue.¹⁰

4.2. Good practices for organising employees

During the interviews, respondents did not identify any specific practices or strategies for attracting new members. They stated that the real-life additional guarantees provided for in CAs played a role of the main attractor (shorter working hours, longer rest periods), as these apply only to members. Employees see for themselves the success of CAs, get to know about them from each other, get advice from TU leaders and join. Respondents also indicated that dissemination of information about them on the internet, in articles is important. Thus, no information was provided on whether and how, specifically, membership expansion is planned, for example, in the private care sector.

4.3. Characteristics of employer representation

All sectoral CAs in this sector and the National CA are signed by the ministers (for Social Security and Labour (MSSL); for Health (MH) and for Education, Science and Sports (MESS)), acting as authorised representatives of the Government. Those ministries play a special role in the care sector in Lithuania by assuming the function of employers and by shaping all policies (including healthcare, social services reform related to deinstitutionalisation, pre-school education and sector’s management).

Therefore, public sector employers, regardless of whether the founder is a ministry or municipality, are generally represented in collective bargaining by the above-mentioned ministries. There are employers’ organisations in the sector, such as the Social Care Sector Employers – Association Rūpestinga Globa,¹¹ which brings together public sector employers, and the National Association of Advanced Care Homes, which brings together private sector employers. However, none of these organisations are involved in collective bargaining or are parties to CAs.

Moreover, in the public sector, managers position themselves in collective bargaining as employees rather than employers. This is partly understandable, as they are not empowered to take independent decisions on the finances of the institution, wage funds, and they are dependent on the decisions of public authorities, even politicians, and their will. The Association of Managers of Social Service Institutions has sought to have them covered by a sectoral CA in order to benefit from the guarantees negotiated therein for trade union members. The Lithuanian Trade Union of Heads of Educational Institutions concluded a collective agreement with the MESS on 18 January 2023, in which they negotiated increase in their salaries. At the same time, public sector employers are influencing the content

¹⁰ Identified as such by interviewees in the HEROS project (2021-2023).

¹¹ Member of the Federation of European Social Employers.



of laws through politicians. For example, the 2023 draft Law on Social Services seeks to exclude employees' representatives from participation in the evaluation of managers. Salaries for these managers increased by €500-600 per month following amendments in the law.

Private sector employers' associations in Lithuania operate more as lobbying organisations that do not seek to conclude CAs or even participate in collective bargaining, and the care sector is no exception. The prevailing attitude is that everything can be regulated without CAs, that the market regulates the price of labour. They think it is necessary to assess where there is a threshold where the State should still intervene with regulation (including CAs) and where it should no longer intervene.

Private employers do not yet see any interest in participating in collective bargaining, and even claim that the Government does not show leadership, or explain why CAs are needed at all. At the same time, they point out other challenges, such as the ever-changing or unhelpful and obsolete legal framework, for example, the structure of the service price which, according to them, does not create conditions for the development of services. Thus, the degree of interest in entering into collective bargaining in the private care sector is very low or even zero.

In the public sector, the interest of the Government and ministries in participating in collective bargaining is quite high, because of the importance of social peace and, at the same time, politicians' ratings (as employees are also voters), and because of the obligations under Lithuanian law to take part in such bargaining when trade unions present themselves.

5. COLLECTIVE BARGAINING AND OTHER FORMS OF SOCIAL DIALOGUE IN THE SECTOR - CHARACTERISTICS

5.1. Content analysis of collective agreements

The care sector in Lithuania is one of the rare sectors with sectoral CAs in place. The social services and health sectors have one sectoral collective agreement each, while the education and science sector has several, but only one will be analysed in this report. In addition, the National Collective Agreement is also of relevance. Although care employees in Lithuania are covered by national, sectoral and – rather often – company-level CAs, those CAs actually cover the public sector only:

- Healthcare sector’s sectoral CA (signed 15 11 2021) - came into force on 1 January 2022 and is valid for three years.
- Social care sector’s sectoral CA (signed 12 12 2022¹²) - came into force on 1 January 2023 and is valid for four years.
- Education and science sector’s CA (signed 22 11 2017, amended 6 10 2023) – valid until 31 December 2026.

All the above-mentioned CAs apply to TU members and provide for more favourable conditions not foreseen in the national legislation for the remuneration for work, additional rest time and length of breaks, longer minimum annual leaves, other guarantees for TU members and leaders. Those CAs also provide for some TUs’ rights and obligations of the Government.

Healthcare sector’s sectoral CA contains inter alia a commitment echoing the Government’s action plan to “develop a methodology for determining the workload of health professionals based on the real time costs of performing their job functions.” This partly demonstrates the will of parties to continue to address major problems in the healthcare sector in the future through centralised regulation rather than TU/SP solutions.

Social care sector’s sectoral CA provides for the right of TUs to submit their own conclusions on the performance of the head of a social services institution, which must be examined, also for setting a bipartite council at the workplace level, which is important for settling employment conditions issues in cooperation with a TU.

The most detailed CA in terms of commitments of the Government is **the sectoral CA of the Lithuanian education and science sector**, which covers the following issues (not foreseen in the national legislation), including those relating to pre-school education:

- Ensure that the average teacher salary is at least 130% of the national average salary by the end of 2024.

¹² Previous sectoral-level CA signed in the social care sector was valid during 2018-2022.



- Create financial incentives to optimise the number of teachers working in pre-primary programmes, allowing for teacher turnover and staff renewal, gradually reaching the EU average teacher/child/pupil ratio.
- By 1 September 2024, set up a working group of representatives of the competent authorities (including the MSSL and the Ministry of Finance) to come up with a proposal on occupational pension provision.
- Increase the number of hours of indirect work with children from three to six hours per week, without increasing the total of 36 hours per week.
- Increase education funding in line with real GDP growth, so that national spending on education is at least 6% of GDP by 2030.
- When drawing up the budget for the year in question, the additional state budget funds earmarked for increasing the financing of educational aid and pre-school education should be allocated to municipalities as a special earmarked grant from the State budget.
- Provide for the TUs' right to information and consultation as the works council; if the works council waives this right, the TU may exercise it alone.

5.2. Other forms of social dialogue

As for other forms of social dialogue¹³ in the sector, a mention should be given to the LCSW and the role of the LASW.

The LCSW is an advisory body to the MSSL acting as an expert and advising on strategic social work issues. The Council deals with issues related to service provision, service development and accessibility.

The LASW is not a trade union, but at least some of its members are also members of trade unions. The main objective of the Association is to strengthen the social work profession through the development of professional skills, knowledge, analysis of the social work field, etc. Its objectives also include the safety and well-being of social workers, on which the Association expresses its views but does not participate in collective bargaining.

5.3. Impact of European sectoral social dialogue

As there actually are no employer organisations in the care sector and TUs' capacities (including human resources) are rather limited, engagement of national sectoral actors in EU-level activities is modest. The main actor implementing EU-level regulations at the national level is the Government (represented by ministries). Therefore, despite rather weak capacities of the national-level social partners, all mandatory EU provisions are transposed in the national legislation by the Government and the Parliament.

Article 198 of the LC foresees a possibility of extending the scope of application of a national and/or sectoral CA, which formally might be used as a legal instrument for the transposition of EU directives. However, it has been never happened in practice.

The national-level social partners are not members of the European sectoral federations. Instead, the Lithuanian social service workers trade union is a member of the General Trade Union of the Republic of Lithuania, which is affiliated to the European Confederation of Independent Trade Unions

¹³ Works councils, bodies for occupational health and safety, etc.

(CESI). The Lithuanian Trade Union Sandrauga operating in education sector is also affiliated to the CESI. The Lithuanian Trade Union Solidarumas operating in the education and care sector is affiliated to the European Trade Union Confederation (ETUC), to which the Lithuanian Education and Science Trade Union also indirectly belongs (through its affiliation to the Lithuanian Confederation of Trade Unions). As regards employers' organisations, the Association of Managers of Lithuanian Care Institutions Rūpestinga Globa is affiliated to the European Ageing Network. This Association in theory should represent employers in the sector, but in practice employers are represented only by the ministries in sectoral collective bargaining.

Although, in general, TU organisations are represented in social dialogue committees, we cannot assess their overall capacities to participate effectively in EU-level developments. During the interviews, respondents emphasised the importance of knowledge exchange as the most outstanding benefit of EU social dialogue they gain.



6. CONCLUSIONS AND RECOMMENDATIONS

It is important to harness the potential of private organisations by encouraging their involvement in collective bargaining and the potential of trade unions by encouraging the development of strategies for membership growth in the private sector.

Training is important not only on how to establish a TU, but also on how to make use of the powers available under the law and CAs (e.g. by actively participating in occupational risk assessments, by insisting that they be carried out, by participating in the assessment of the heads of establishments, etc.). At the same time, cooperation between sectoral and workplace-level TUs should be strengthened to ensure the application of CAs and to prepare for collective bargaining. It is necessary to establish and apply the principle of zero tolerance to managers who discriminate against trade union members and leaders, i.e. to ensure that, at least in the public sector, such managers should not be allowed to compete for the position of management of other institutions.

Ministries should avoid creating additional obstacles: at present, laws are changed too often, sometimes without clear added value for practitioners (unnecessary); there are too many controlling authorities, and funding for services is not always smooth, especially for the private and non-governmental sectors. All this creates a situation where institutions are on the verge of survival and do not operate in a stable environment where collective bargaining can also take place.

Moreover, the State itself, in its ministerial role, should play an active role in promoting collective bargaining in the private sector. Employers could be educated on the practical benefits that CAs could bring them.

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„ *Workload requirements are not met. Institutions tend to exacerbate human resource shortages by increasing staff workload and thus intensity. <...> in pre-school education, especially in urban areas, too large groups of children, with the municipalities using the excuse that children are sick. Well, they do get sick in the winter, but in the summer, they don't, and then there are big groups, some with more than 20 children under three years old, it's really too many. <...> municipalities pay fines and continue to violate.*

„ *Just recently we've received a project from the municipality <...> that workers will work from 8 a.m. to 8 p.m. without a lunch break, even on weekends, but there is a serious problem, the workers are very scared. The situation has been discussed, but in a very narrow circle, <...> we see in a meeting with the administration of one of the institutions that there was a formal dialogue carried out, a presentation was made to workers who are not even from that department, indeed to workers' representatives, but who do not have any experience of the specifics of this kind of work, and, from the point of view of the administration, all these details were supposedly discussed in this meeting. <...> Many of the workers have small children, families, and imagine that you work from 8 in the morning until 8 at night. And then the question is, what about the children, what about attending meetings at school, a lot of people who have to travel 20-30 km after work to go home, need to take a break. And when is family time?*

„ *[answering why private organisations do not participate in collective bargaining] This could be the subject of a deeper investigation into whether it is really good for certain market conditions. This is an open question, as it could be in Lithuania, and I would not be able to answer it unequivocally. The private sector does what it thinks is best, it 'catches' workers, it works in the market. But why to do what is not compulsory, what is not communicated by the state? Has the state encouraged this? Has the state communicated the need for it? Has there been any campaign? So why does the private sector have to do what it is not supposed to do? There used to be such local action groups in villages and communities funded by the Funds. They were very active. I can see now how this area has developed. But what happened is that the initiative did not come from the people themselves, so they took 30 000 EUR and created community, activities in districts. If the aim of the state is to have communities - give money!*