Constructing the division between declared paid and unpaid caregivers
A street level analysis of public agents implementing the French “Personalized Allowance for Autonomy” (APA)

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Context and research questions

- How is this “care mix” (division between different types of paid and unpaid services) determined?
- With what effects on the working and employment conditions of the different categories of care providers?

In France, paid services for the elderly are mainly financed by the “APA”

• The « APA » (Personnalized Allowance for Autonomy) in France:
  • A nationally defined allowance:
    • Granted to dépendant people over 60 living at home or in a nursing home
    • Eligibility defined by the classification in levels Gir1 (the most dependent) to Gir 4 (the least dependent) of a national grid (AGGIR)
    • The amount is subject to a ceiling which decreases from Gir1 to Gir 4, and is reduced by a user fee depending on the household income level.
  • An Allowance implemented at the départemental level
    • Départemental agents apply the AGGIR grid to define eligibility
    • they draw up an "help plan" which sets the effective level of the allowance according to the various services deemed necessary
  • De facto, this « help plan » defines the framework for care work, whether paid or unpaid
Méthodology

• A field survey as part of the 'Profam' research program funded by the French National Research Agency (ANR)

• Research on public policy implementation (Lipsky, 1980):
  • the professionals who implement public policies have discretionary power (Lipsky, 1980; Dubois, 2010)
  • 'street level bureaucrats’ often find acceptable compromises between the stated goals of policy and the constraints of their position

• A qualitative survey between 2017 and 2019 in a French département:
  • 35 in-depth interviews with the different categories of agents in charge of the different tasks of the APA applications and, in particular, the elaboration of help plans
  • analysis of the administrative production framing the work of these agents
  • 7 observations of service meetings
  • A thematic analysis to identify the principles of action used by the agents
The paradoxical constraints of agents: ensuring home care while containing public expenditure (1/2)

- a tutelary posture of agents mapping out the 'real' needs for services:

  - Some services are deemed necessary and therefore proposals for services sometimes go beyond the demand expressed

    "So we start off very gently. Often we say: "May be we can put in an hour a week? to help you a little with the cleaning? "(...) And then, little by little, when there is a relationship of trust, they accept to be helped a little more (...) It's violent to put someone in place to do the washing straight away"

  - ...but with the objective of limiting public spending, i.e. only responding to needs that are strictly linked to the incapacity of the old person

    "it's 2 hours for cleaning, 3 hours for shopping, etc. (...) Afterwards, when I go to a very large house and people say to me "well yes, but I have more cleaning hours than that" ... I say "wait, the département isn't here..."(...) I really try to be as accurate as possible about people's social and economic situation. "

  - A legal, but also political (Fraser, 2012), framework for needs

    "For example, Madam demands that every morning her breakfast is made by a home-based caregiver, but even though she is 90 years old, she is able to do it herself... You know, there are people who have always lived in a (...) in a kind of domestic relationship, and who, as they age, it's logical for them to have society pay for it. Well, no! I don't agree! If she wants the home carer to come every morning and make her breakfast for half an hour, fine! But if she's not sufficiently dependent, I say to her in these cases (...) : "there's nothing to stop you taking it, but we won't pay for you". It's too easy! "

...
The paradoxical constraints of agents: ensuring home care while containing public expenditure (2/2)

• Focus on the home and subsidiarity applied to 'family solidarity'
  - The place of relatives: indispensable... and unchallenged
  
  "If they didn't have a family, they wouldn't be able to stay, because you have to see what the families do... We couldn't take care of all the things that are needed to stay at home in some cases. The family takes on a large part of it"

  - A tendency to reduce benefits in the case of the presence of family caregivers

  "it could be because the children have chosen to take over at the weekend (...) So there, I put in only two hours because the daughter wants to continue to do the laundry. So there were already two hours in place, we kept two hours, she said that it's a small house, well..."

  - ... in spite of the agreed slogan: "avoiding family caregivers burnout"

  "Spouses who have to be told, 'But you have the right to take a break. You have the right to take time for yourself’, we have people who are 90 years old, who have been married for 60-70 years, and it's not possible to delegate. You have to go all the way"

=> 3 principles: - sustainable home-based caring  
- legitimacy of the public spending 
- priority to family solidarity
The prescription of care work... and its paradoxical absence in help plans (1/2)

• Ambiguous attention to relatives: the trend towards the status quo

"It's when the daughter is away, for example. So for a given period, for example the daughter goes away for a week, often the children are relieved about that, to know that Association A... So they are the ones who will take care of it on the other hand, eh...(...) They call Association A and they ask if they could come and do the shopping for example"

to replace relatives in case of unavailability, but not to replace them on a daily basis

• The implicit prescription of types of services… but lack of attention to the working and employment conditions of employees

  • Reticence about direct employment in the name of service quality
    - The position of employer appears to be too complex for elderly people, sometimes suffering from cognitive disorder
    - Suspicion on the possibility of employing a child on a voluntary basis, opened up by the law establishing the APA
    - No guarantee on continuity of service (in case of illness or unavailability of the employee) deffectué

  … but nothing about the quality of these jobs
The prescription of care work... and its paradoxical absence in help plans (2/2)

- The paradoxical invisibility of salaried work and the conditions in which it is performed
  - The conditions for performing paid care work are determined by the help plan
    - Hourly packages that are rarely questioned => intervention times too short for care work
    - Minimum durations of intervention and rhythms imposed by the "needs" of the beneficiaries => fragmented interventions that lead to part-time work
      “There were three visits per day and it was important to pace the day. So we put it... [in the help plan] When it's well defined: we put it in. ”
    - The invisibilisation of the content of the work and the skills needed => task shifting leading to non-recognition of qualifications
      “... where washing would be the responsibility of a nurse for example because there are wounds or whatever, but we realise that there is no nurse, it is the home based caregiver who does it”
  - … but these poor conditions of work are not considered by the agents, as if their work in assessing levels of dependency and negotiating help plans did not affect these mechanisms, which were more a matter of fate.
... In total, limited changes and a paradox: the construction of a framework for care work that maintains the invisibility of this work

- Emphasis on 'the family' and the 'home'
- The tutelary posture of the agents favours the development of paid services (modifying the division of labour)
- But little attention to working and employment conditions and gender inequalities within the family group:
  - For family carers: most often the *status quo*, with possibly some time for "respite"
  - For salaried workers: a prescription for services that perpetuates poor employment (part-time) and working conditions (splitting up, eviction of tasks with a social dimension, etc.)
Thank you for your attention!