







Successfully engaging paid care workers in organising: Challenges, opportunities, and what works

Dr Duncan U Fisher and Professor Liam Foster

In England, paid work in adult social care (ASC) remains among the most poorly rewarded in the labour market. Unsurprisingly, there is a persistent sector-level labour shortage and problems with high turnover and insecurity. The poor working conditions particularly impact on women, who account for around 80% of workers, and migrant workers, currently over-represented and at risk of exploitation relating to citizenship status. These issues are connected to wider delays and inaction over government reform of ASC. ASC workers face ongoing struggles to influence the quality of their work and bring about improvements. Union membership is low across this workforce, with estimates suggesting union membership among ASC workers is around 18%, falling to 15% for workers employed by private providersⁱ. This compares to 21% of workers in the wider labour market, and around 40% of NHS workers". ASC workers' representation is further hampered by the absence of a recognisable, sector-wide professional body. Stuttering moves to professionalise have failed to counter endemic problems with career progression and low statusⁱⁱⁱ. In this context, we investigated what paid ASC workers and those representing their interests do to drive positive change. Additionally, we examined barriers to organising and how they may be overcome. This briefing covers these three points and proposes recommendations for successfully engaging care workers in organising.

ABOUT THE STUDY

This study investigated examples of organising and union activity among ASC workers, and those representing their interests. 41 participants were interviewed across different organisations: trade unions, community organisations, and campaign groups (see Table 1). The interviews, with key actors and care workers, took place between December 2023 and March 2025. The key actor participants included organisers, administrators, or founders, of organisations. These interviews focused on organisational-level issues, such as organising priorities, resources, and access, as well as consideration of barriers and successes. In addition, care worker interviews provided frontline, micro-level detail on individuals' motivations and attitudes towards organising. This included examining both barriers and factors that have encouraged engagement in organising.

Organisation name	Type of organisation	Number of key actor participants	Number of paid care worker participants	Total number of participants
Care and Support Workers Organise (CaSWO)	Campaign group	4	4 (all CaSWO participants were or had been paid care workers)	4
CollectiveWorkers – pseudonym	Established trade union	3	1	4
Homecare Voices (HV)	Peer support and campaign group	1	9	10
PeoplePower - pseudonym	Community organising group	2	1	3
WorkTogether - pseudonym	Established trade union	4	8	12
RepresentStaff - pseudonym	Established trade union		1	1
United Voices of the World (UVW)	Independent trade union	2	5	7
Overall				41



RECOMMENDATIONS FOR ENGAGING PAID CARE WORKERS IN ORGANISING

1. LISTEN TO CARE WORKERS IN AN ENGAGED, SUSTAINED, AND MEANINGFUL WAY

Unions' listening and deep engagement inspired and empowered worker organising. In contrast, care workers expressed frustration at being ignored by employers and rendered invisible by society.

2. GIVE CARE WORKERS RESPONSIBILITY, PLATFORMS, AND ROLES IN DECISION-MAKING AND LEADERSHIP

Care workers are the experts, and their voice has been sidelined for too long. Have them front and centre of messaging and public engagement. Avoid repeating what others do in marginalising care workers and their views.

3. AVOID CREATING BARRIERS TO CARE WORKER INVOLVEMENT WHERE POSSIBLE, SUCH AS WITH COST, BUREAUCRACY, LANGUAGE, AND DIGITAL EXCLUSION

Using accessible language (in English and other languages), clear and straightforward processes, and providing digital support, when necessary, can help to prevent creating barriers to collective action.

4. CONSIDER WAYS TO BRING CARE WORKERS TOGETHER, INCLUDING IN PERSON

Bringing people together allowed workers to share experiences and offer solidarity, which they valued deeply. In-person meet-ups were especially meaningful, and these collective spaces were also where issues to act upon were identified. This could, where possible, involve offering subsidised travel to members for key meetings (as well as hybrid options).

5. PAY CLOSE ATTENTION TO HOW CARE WORKERS' INVOLVEMENT IS FRAMED, AND WHAT YOU WANT THEM TO DO

Promote the potential and successes of organising. Be aware of scepticism surrounding unions and organising among care workers. Educate and publicise organising successes.

6. BE AWARE OF COMPLEX PRE-EXISTING VIEWS ON ORGANISING AMONG CARE WORKERS, AND HOW THOSE VIEWS INTERACT WITH WORKER ORIENTATIONS TOWARDS THEIR WORK

Care workers had conflicting and multi-faceted views on organising. Be conscious of care work's relational nature and workers' attachment to people they support. Be aware of workers downplaying their role but harness their sometimes latent desire for change.

KEY BARRIERS TO PAID CARE WORKER INVOLVEMENT IN ORGANISING AND UNION ACTIVITY

1. A FRAGMENTED WORKFORCE

The combination of the structure and organisation of ASC work, which relies on outsourcing and consists of 18,500 care provider organisations (employers)^{iv}, and the varying modes of delivery, such as homecare and residential care, generates fragmentation, and disperses and isolates care workers. Although the work has common features, there is a lack of collective or unifying spaces, forums, or mechanisms, or opportunities for workers to meet each other. For instance, Lorrie (HV key actor) stated that Homecare Voices started in response to there not being a 'place that you can go and have a direct line of communication with care workers.'

This has clear implications for collective action, and for sharing and learning about other ASC workers' experiences. This fragmentation brings challenges for organisations, such as unions, seeking to engage with ASC workers:

'Half the battle was identifying ... care companies and then the other problem is actually finding the workers.' (Lesley, CollectiveWorkers key actor)

2. PAY AND CONDITIONS

Poor working conditions in ASC, such as high levels of zero-hours contracts, generate insecurity and instability, contributing to an ongoing challenge with high turnover. This flux impedes organising and has implications for its continuity and sustained worker involvement. For those who wish to bring about change to their work situation, leaving their job is a primary option:

'Because the terms and conditions are so bad, a lot of people are just there for a while thinking, 'Okay, I'm going to move soon anyway. This is not going to be the job I want to do for the rest of my life." (Livia, CaSWO key actor)

Membership costs were consistently noted as being a crucial barrier to engagement in union activity.

3. NATURE OF PAID ASC WORK

Paid care work is demanding and at times exhausting. Long shifts, its physicality, and the stress and emotionally demanding situations faced, can take their toll. This reduces the time and energy workers' have, which could be directed towards organising for change:

'The shift patterns that care workers have, the pressure, the stress, the little money that we receive, ... I feel it makes you less motivated ... it should be a good reason to join a union and be active. But at the same time, you are really exhausted sometimes, and you just want to disconnect.' (Sonia, WorkTogether care worker)

Furthermore, the women who dominate this employment carry out disproportionate amounts of unpaid care, which too squeezes their time:

'There's a lot who've got children and they've got to leave at a certain time to pick their kids up from school. And there's a lot who are caring for elderly relatives as well.' (Lesley, CollectiveWorkers key actor)

The practices of care work shape worker orientations towards what they do. For example, the strength of commitment to care's relational work meant that workers expressed reluctance to organise in ways that may impact negatively on the care people receive, such as going on strike.

4. UNDERVALUING PAID CARE WORKERS

Care work is often undervalued in terms of pay and conditions, and its wider lack of status and societal recognition can contribute to stigmatisation. This can lead to ASC workers downplaying their work:

'Probably one of the reasons why people don't join a union is they don't see themselves as professionals. They don't see themselves as important as a nurse, as, you know, somebody that has been to university and all the rest of it. They just go, 'Oh, I'm just a care worker." (Kathryn, CollectiveWorkers key actor)

5. LACK OF ACCESS TO WORKERS

Unions' often lack access to workers due to the scarcity of recognition agreements in ASC compared with the NHS, for example. David (WorkTogether key actor) states union organisers:

'Can't walk into a care home or supported tenancy and speak to members or non-members about organising. So, access to our membership and the wider workforce is just very limited.'

Employer hostility was also recognised as an important barrier:

'Most of these providers are anti-trade union and will do what they can to discourage their members from joining.' (David, WorkTogether key actor)

6. LACK OF AWARENESS OF UNIONS AND ORGANISING

Workers whose employer has a recognition agreement will be informed about the union, but many ASC workers will not be in spaces where information about unions is communicated:

'One of the biggest reasons why members don't join is because they actually haven't been asked to join the union. They didn't know what a union was. You know, 'What is a trade union? Why do you join a trade union?'' (Kathryn, CollectiveWorkers key actor)

When there is a lack of history of organising in general, or awareness with some workers, employers can control the narrative:

'It's very easy for that manipulation from the employer's side, to say, 'You don't want a union in here. If you get a union in here, they'll take away your terms and conditions. They'll make things longer for us to negotiate. I can't just give people pay rises because the union will stop me.' And the spinning that they do was sometimes really damaging because care staff would believe that sometimes.' (Kathryn, CollectiveWorkers key actor)

7. FEAR OF CONSEQUENCES OF INVOLVEMENT

Some participants were concerned about how their employer would react if they discovered organising activity:

'It's that fear that if they do anything ... if they say anything, if they're seen to be sort of organising within the union, then that is a real barrier to participation.' (Paul, WorkTogether key actor)

This fear was heightened for migrant workers, because their citizenship status is often linked to their employment:

'That is a whole other organising challenge because for all the fear that the wider workforce feels as, you know, times ten for migrant workers because they're sponsored by their employers who have got migrant workers or sponsorship visas that are incredibly fearful in getting involved with the union.' (David, WorkTogether key actor)

8. COMMUNICATION AND EXCLUSION

There were concerns union communications could exclude ASC workers, including through their bureaucracy, language, and digitalisation. For instance, a UVW member described trying to help a colleague access support from an established union:

'When I helped her with the form to get in touch with [Established union], you have to go online. You have to call somebody. You have to fill a form. They give you, like, 14 pages of paperwork to do. And then, you sit, and you wait ... You wait. They come to represent you. They're not engaged.' (Claude, UVW care worker)

Inclusive use of language is vital. An ASC worker reported language used in union meetings as being inaccessible, and too bureaucratic as they:

'Use a lot of words that I did not understand. And then when they were talking about the conversations they'd had with the local authority, they were quite patronising and condescending.' (Judith, WorkTogether care worker)

Despite digitisation offering new ways to communicate with care workers, it also presents a barrier to some through digital exclusion:

'A lot of care [staff] don't have email addresses ... it's just trying to galvanise, to make sure that people know what they're entitled to.' (Louise, WorkTogether key actor)

CONTRIBUTORS TO SUCCESS IN ENGAGEMENT AND SUSTAINING PAID CARE WORKERS' INVOLVEMENT IN ORGANISING AND UNION ACTIVITY

1. UNDERSTANDING ASC WORK AND LISTENING TO THE WORKERS

Workers expressed frustration at not being listened to by their employers. Unions and organisers listening to workers was key to relationship building and the maintenance of subsequent trusted involvement. They need to be:

'Willing to sit down in the workplaces or where the care workers are and listen to their concerns, understand their concerns and the challenges that they face and empathise with them.' (Kathryn, CollectiveWorkers key actor)

For UVW members, the union's listening to them and investing in relationships contrasted with their employer's approach:

'The only option we've got at that moment was to fight, because we go for meetings, and we go asking about what's going to be much better for us. But they're not listening, they don't care.' (Cynthia, UVW care worker)

2. MAINTAINING PAID CARE WORKERS' CENTRAL ROLE IN ORGANISING AND LEADERSHIP ACTIVITIES

Groups involved in organising found that care workers' undertaking leadership and decision-making responsibilities was crucial to maintaining wider worker involvement:

'Give them responsibility for determining campaign objectives, agreeance of campaign plans, taking on responsibility for campaign actions. Developing their own voice, their own testimony, to put that at the heart of meetings with politicians and decision makers.' (Paul, WorkTogether key actor)

UVW also respected the workers' knowledge and saw them as the experts:

'It's building relationships and trust and fighting together around an issue and finding a way that you can fight and win. And using that as a starting point ... So, they know their workplace, they know what's going to work, they know who is going to join, who is not going to join, all of that wealth of knowledge is in the membership.' (Sarah, UVW key actor)

As well as ensuring the continued prominent roles of care workers, the choice of issues was crucial, namely their relevance to these workers' everyday experiences:

'Doing issue-based campaigns that people care about is by far the most important thing.' (David, WorkTogether key actor)

Examples of this included accounts from migrant care workers who stated that they had joined established unions due to their action on issues relating to the Health and Social Care Visa.

3. VARYING COMMUNICATIONS AND WAYS OF REACHING WORKERS

Established unions have learned to vary their communications with care worker members, who, as noted, are time-poor and often peripatetic. These include using phones to make:

'A lot of mini clips of videos, like two minutes where they can go out to members and say, 'Right, just done this meeting, this is what's happening with the employer,' ... little communication snaps. So, you can send them via text. Most members will have two minutes to watch that, rather than sitting and reading an email.' (Kathryn, CollectiveWorkers key actor)

Media engagement has proven to be very important to the growth of organisers such as HV. Key actor Lorrie said a BBC News feature about the group in spring 2024 prompted a membership spike. UVW also used the media effectively to publicise their campaign, including continuously having the workers themselves at the centre of those activities.

Providing accessible information in various languages for ASC workers is also especially important given the disproportionate representation of migrant workers in the sector. For instance, a key part of UVW's initial worker engagement was being able to communicate in Spanish with Cynthia, the care worker instigator of that campaign.

4. ADAPTING TO ASC'S SPATIAL DIMENSIONS

Successfully adapting to the ASC workforce's fragmentation and dispersal is an important objective. This involves providing different mechanisms for worker involvement and adapting to worker preferences and societal circumstances. For instance, in its early days, CaSWO operated almost exclusively online due to pandemic restrictions and to its members' geographical spread. Those meetings had a supportive function, in addition to the more practical, instrumental function of planning the group's work:

'I know some people appreciated having that space where you could come together and share your experiences. You realise the issues that you're experiencing aren't just individual to you.' (Wendy, CaSWO key actor)

HV moved from a website-based chat function to WhatsApp, with the latter becoming a key feature of the group's work where members come together and share stories, and offer support, solidarity, and advice. Communicating online has become key to organising across these groups, but all acknowledged the importance of in-person activities:

'I would say the bread and butter of organising workers hasn't changed massively. You still need to be face-to-face to form meaningful relationships with people.' (David, WorkTogether key actor)

5. BUILDING NETWORKS AND ALLIANCES

Building networks and alliances has brought the work of these groups to new spaces and audiences. ASC is structurally complex and forging relationships with groups with varied interests, including policy and state actors, paves the way for different types of success. It also presents opportunities for ASC workers to represent groups or play a role in communicating messages to varied audiences, including decision-makers. For HV, member engagement has included meetings with politicians, media appearances, contributions to government calls for evidence, and research participation in order to influence perceptions of ASC work and support meaningful change.



ENDNOTES

- ¹Cominetti, N. (2023) Who cares? The experience of social care workers, and the enforcement of employment rights in the sector. London: Resolution Foundation.
- Department for Business and Trade (2023) Trade Union Membership, UK 1995-2022: Statistical Bulletin. London: Department for Business and Trade.
- Hemmings, N., Oung, C. and Schlepper, L. (2022) New horizons: What can England learn from the professionalisation of care workers in other countries? London: Nuffield Trust.
- ^{iv} Skills for Care (2024) The state of the adult social care sector and workforce in England. Leeds: Skills for Care.



ABOUT THE CENTRE FOR CARE AND PUBLICATION DETAILS

The Centre for Care is a collaboration between the universities of Sheffield, Birmingham, Kent and Oxford, the London School of Hygiene & Tropical Medicine, the Office for National Statistics, Carers UK, the National Children's Bureau and the Social Care Institute for Excellence. Working with care sector partners and leading international teams, it addresses the urgent need for new, accessible evidence on care. Led by Centre Director Kate Hamblin and Deputy Director Nathan Hughes, its research aims to make a positive difference in how care is experienced and provided in the UK and internationally.

This research briefing was written by Dr Duncan U Fisher and Professor Liam Foster as part of the Centre's work on Care Workforce Change. The paper was designed and typeset by Dan Williamson.

To cite: Fisher, D. U. and Foster, L. (2025). Successfully engaging paid care workers in organising: Challenges, opportunities, and what works. Centre for Care Briefing, CIRCLE, Sheffield: University of Sheffield

ISBN 978-1-8382688-7-9

©The authors and CIRCLE, The University of Sheffield, September 2025

The Centre for Care is funded by the Economic and Social Research Council (ESRC, award ES/W002302/1), with contributions from the Department of Health and Social Care's National Institute for Health and Care Research (NIHR) and partner universities. The views expressed are those of the author(s) and are not necessarily those of the ESRC, UKRI, NHS or NIHR.

CONTACT

Please get in touch if you would like to know more, or to work with us on related issues, by contacting our support team: centreforcare@sheffield.ac.uk

Website: <u>centreforcare.ac.uk</u> LinkedIn: <u>@Centre for care</u>