

INFORMAL CARE AS SOCIAL POLICY IN ROMANIA: CASE STUDIES ON THE EXPERIENCES OF CAREGIVERS AND OLDER ADULTS

PhD NICOLETA MERE (COJOCARU), PhD ARMANDO EDUARD LINCAN
University of Bucharest, Romania

ABSTRACT: *The accelerated aging of the population and the increasing number of dependent older adults represent major challenges for Romania's social protection system. In this context, informal care provided by family members, relatives, or community members plays a crucial role in maintaining the well-being and dignity of older people. This study analyzes informal care from the perspective of social policy, using three urban case studies that explore the experiences of both caregivers and the older adults receiving care. The cases highlight the impact of order no. 955/2023, which officially recognizes the status of informal caregivers, on the rights, social protection, and quality of life of care recipients. The findings show that legal recognition brings significant benefits, such as access to financial support and social protection, but also reveals substantial challenges, including caregiver overload, lack of resources, and the need for psychological and training support. The analysis provides a useful framework for policymakers, researchers, and practitioners, contributing to the development of more effective social policies that better address the needs of older adults and their caregivers.*

Keywords: *informal care; caregivers, social policy; care recipients, social protection; case studies.*

Introduction

In Romania, the phenomenon of demographic aging is an undeniable reality. According to data provided by the National Institute of Statistics (INS, 2025), the growth of the population aged 65 and over is generating an increased demand for care while simultaneously reducing society's capacity to provide it.

This context makes informal care a structural element of social protection, yet a vulnerable one, requiring institutional recognition, adequate financial support, and integration into a coherent long-term care strategy.

Informal care as a social policy in Romania

Informal care is recognized in Romanian legislation, but in a fragmented manner. The informal caregiver is defined as an unqualified person, a family member, relative, or any other individual who provides personal care, including assistance with performing basic and instrumental activities of daily living for a person who has lost functional autonomy (Law no. 292/2011, republished and updated, art. 6, letter).

Law no. 355/2022, amending and supplementing Law no. 17/2000 on the social assistance of elderly persons, represents an

important step in the evolution of social policies in Romania regarding the protection of dependent older adults.

By legally recognizing informal caregivers and allowing their remuneration, the law combines social protection with family and community responsibility.

Thus, "the informal caregiver defined in art. 6, letter) of Law no. 292/2011 on social assistance, with subsequent amendments and completions, who assumes responsibility for the care of one or more elderly persons in a state of socio-medical dependency, established according to the national assessment grid of the needs of elderly persons, may benefit from a reduced monthly work schedule, of half-time, with payment guaranteed from the local budget, based on a contract concluded with the public social assistance service, receiving an allowance equivalent to half of the gross basic salary of the home caregiver established according to the Framework Law no. 153/2017 on the remuneration of staff paid from public funds, with subsequent amendments and completions, for grade 0, the provisions of art. 35 of this law applying accordingly" (Law 355/2022, art. 13, para. 1–4).

The success of these provisions largely depends on their implementation at the local level: the capacity of local authorities to plan, contract, monitor, and finance social services.

Moreover, through the Long-Term Strategy on Active Ageing for the period 2023–2030, which aims to create a sustainable long-term care (LTC) system for dependent elderly persons, ensure equal access to care services, respect for dignity, autonomy, and as independent a life as possible for older adults, concrete steps have been taken through legislative adaptations, infrastructure planning, and prioritization of home and community care services.

However, implementation remains partial, with significant variability depending on locality, and public documents assessing progress are still limited.

In this context, the implementation of Order no. 955/2023, approving the model of the contract concluded between the informal caregiver of the dependent elderly person and the public social assistance service, represents a necessity in terms of the objectives set within the Strategy on long-term care and active ageing for the period 2023–2030.

Theories

Informal care for elderly persons can be understood through an integrative theoretical framework that combines attachment theory, role theory, and social support network theory:

- **Attachment Theory (Bowlby / Ainsworth)** highlights the importance of trust and security in the relationship between caregiver and care recipient, explaining how emotional bonds influence the willingness to give and receive support. Bowlby (1969) demonstrates that early emotional bonds shape caregiving relationships later in life.
- **Role Theory (Parsons, Biddle)** posits that individuals fulfill social expectations associated with their social positions (Biddle, 1986). The theory provides insight into the responsibilities and expectations associated with the role of an informal caregiver, highlighting potential conflicts between multiple roles an individual holds, such as professional and familial roles.
- **Social Support Network Theory (Wellman, Berkman, House)** - Berkman and Glass (2000) emphasize that social networks influence health through structural and functional mechanisms. It underscores the essential role of support from extended family, friends, community, and formal services in

sustaining informal care, reducing stress, and preventing caregiver burnout.

By combining these theories, it is possible to analyze both the relational dynamics and the social and structural context that influence the quality and effectiveness of informal care.

Research Methodology

According to Babbie, quantitative data “simplify the aggregation, comparison, and summarization of data,” transforming observations into numerical form, while qualitative data are “richer in meaning” and provide “panoramic descriptions” that capture the depth of social phenomena (Babbie, 2010).

This research employed a mixed-methods approach, combining qualitative and quantitative methods.

The qualitative component consisted of semi-structured interviews with informal caregivers of elderly persons who had contracts with DGASPC Sector 3.

The quantitative component included the analysis of data reported by the six DGASPC offices in Bucharest, regarding the number of requests and contracts concluded between May 2023 and November 2025, providing a comparative context for interpreting the qualitative results.

Research Objectives

- To analyze the perceptions and experiences of informal caregivers regarding their caregiving role, as well as their experiences in accessing and executing informal care contracts under Order 955/2023.
- To explore how formal services (state, local authorities, social services) respond to the needs of dependent persons and informal caregivers.

Hypotheses

- Hypothesis 1: Informal caregivers perceive the caregiving role as difficult due to limited institutional and legislative support.
- Hypothesis 2: The implementation of Order 955/2023 has a positive and effective impact on the activities of informal caregivers, facilitating a balance between caregiving responsibilities and their personal well-being.

Research Questions

1. How do informal caregivers perceive the difficulties associated with caregiving?
2. What are the main challenges faced by informal caregivers in relation to existing legislative and institutional support?
3. To what extent does the lack of resources and information affect the activities and well-being of informal caregivers?

Population and Sample

- Target Population: Informal caregivers providing care to dependent elderly persons.
- Sample: Three purposively selected informal caregivers who have contracts with DGASPC Sector 3 according to the provisions of Order 955/2023.

Quantitative Data Analysis and Interpretation

Under the Law no. 544/2001 on free access to public information, the six DGASPC offices of Bucharest were requested to provide data on the number of requests and the number of contracts

concluded based on Order no. 955/2023 regarding the approval of the model contract concluded between the informal caregiver of the dependent elderly person and the public social assistance service, for the period May 2023 - November 2025 (Fig. 1).

Quantitative Data Analysis and Interpretation

Thus, the distribution of requests/applications and concluded contracts for informal care between May 2023 and November 2025 at the DGASPC offices in the six sectors of Bucharest can be observed. The results reveal significant differences between sectors, both in terms of interest in formalizing informal care and in administrative capacity to finalize contracts.

The field situation shows a heterogeneous picture, marked by variable administrative capacities, different prioritizations, and distinct levels of institutional functionality, as follows:

Sector 1: Implementation shows partial efficiency. All six submitted requests were fully converted into six contracts, making this sector the only one achieving a maximum

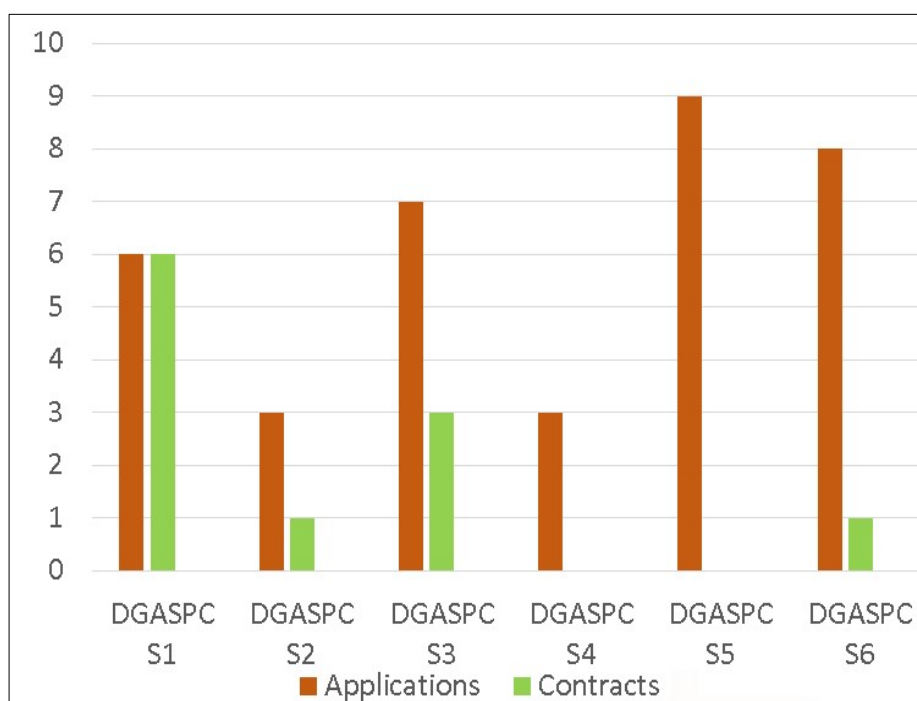


Fig. 1. Analysis of Applications and Contracts Related to Informal Care in the Period May 2023 - November 2025 - According to Order 955/2023, at the Level of DGASPCs from the 6 Districts of Bucharest Municipality

implementation rate relative to the number of requests.

Sector 2: Exhibits low activity and minimal formalization: three requests were submitted, but only one contract was concluded. This significant gap between requests and results indicates potential difficulties in eligibility assessment, document processing, or allocation of administrative resources for implementing Order 955/2023.

Sector 3: Seven requests were submitted, but only three were finalized into contracts, indicating only partial conversion.

Sector 4: Although three requests were submitted, none resulted in a contract. The total absence of implementation points to systemic issues: lack of clear operational procedures, insufficient staff, or restrictive interpretation of legal provisions.

Sector 5: An even more acute situation, with nine requests (the highest among all sectors) and no contracts concluded. The large discrepancy between requests and implementation highlights a significant administrative bottleneck. Despite strong interest from families, DGASPC Sector 5 was unable to operationalize Order 955/2023, raising serious concerns regarding local institutional capacity.

Sector 6: Eight requests were submitted, but only one contract was concluded. While the number of requests suggests high interest in formalizing informal care, the low conversion rate indicates significant difficulties in assessment, case management, or allocation of resources necessary to finalize procedures.

From the collected data, 36 requests and 11 finalized contracts were recorded over 2.5 years. This demonstrates that although the legislative framework exists, is clear, and functional, it remains without real social impact because it is not supported by efficient institutional mechanisms, adequate staff training, or accountability of DGASPCs/SPASs/DASs/Local Authorities.

In conclusion, the major gap between legislation and implementation underlines the urgent need to revise and increase caregiver allowances to transform financial support into a real incentive, as well as actively promote the rights and benefits provided by law. The results also highlight the clear necessity for a national

strategy dedicated to informal care, providing coherence, visibility, sustainability, and formal recognition of this type of care, turning it into a real—not merely declarative—component of Romania's social protection system.

Qualitative Data Analysis and Interpretation

The research also included a qualitative component: interviews with three informal caregivers of dependent elderly persons.

Within DGASPC Sector 3, between May 2023 and November 2025 (2.5 years), seven requests were processed. All elderly persons were assessed and classified according to dependency levels under H.G. no. 1311/2024, which amends H.G. 886/2000. However, only three caregivers were eligible to conclude contracts as informal caregivers.

The interviews with the three informal caregivers revealed the main challenges they faced:

- **Insufficient allowance**

All interviewees reported that the allowance (1,184 RON net/month) was insufficient considering the responsibility level and workload.

- **Mandatory part-time employment (½ norm)**

Interviews highlighted that the requirement to work half-time, as stipulated by Order 955/2023, created financial instability and limited professional opportunities.

- **Risk of job loss**

Caregivers expressed fear of being dismissed because employers prefer full-time contracts.

- **Bureaucracy**

All three caregivers reported difficulties in obtaining employer approval to work half-time in compliance with Order 955/2023, considering this requirement restrictive and hard to fulfill.

- **Emotional pressure and constant responsibility**

Interviewees unanimously emphasized the lack of additional support from authorities, leaving full responsibility to them, which generated psychological strain and required permanent availability to assist and care for dependent elderly persons.

Conclusions and Recommendations

Although Order 955/2023 creates a necessary framework for formalizing home care, its attractiveness in its current form is very low. Identified issues, such as insufficient allowance and risk of job loss, are the main factors

negatively affecting contract uptake, particularly at DGASPC Sector 3, Bucharest.

Therefore, interview results indicate the need for legislative and procedural adjustments to increase accessibility and sustainability of the measure, ensuring that informal care becomes a real and functional social policy.

References

1. Babbie, E. (2010). *Practica cercetării sociale*. Iași, Romania: Polirom.
2. Berkman, L. F., & Glass, T. (2000). *Social integration, social networks, social support, and health*. In *Social Epidemiology* (pp. 137-173).
3. Biddle, B. J. (1986). *Recent developments in role theory*. *Annual Review of Sociology*, 12, 67-92.
4. Bowlby, J. (1969). *Attachment and loss: Vol. 1. Attachment*. New York, NY: Basic Books.
5. Ministerul Muncii și Protecției Sociale. (2011). *Legea asistenței sociale* nr. 292/2011. DGASMB. https://www.dgas.ro/wp-content/uploads/2023/11/Legea_asistentei_sociale_18012018.pdf
6. Ministerul Muncii și Solidarității Sociale. (2023). *Ordin nr. 955/2023* pentru aprobarea modelului cadru de contract între îngrijitorul informal al persoanei vârstnice dependente și serviciul public de asistență socială. *Monitorul Oficial al României, Partea I*, nr. 544. <https://legislatie.just.ro/Public/DetaliiDocument/271372>
7. Parlamentul României. (2000). *Legea nr. 17/2000 privind asistența socială a persoanelor vârstnice*. <https://legislatie.just.ro/Public/FormaPrintabila/00000G2GROQG69VPA2C0H2BHMNVC2JWN>
8. *Legea nr. 355/2022 pentru modificarea și completarea Legii nr. 17/2000 privind asistența socială a persoanelor vârstnice*. *Monitorul Oficial* nr. 1202 din 14 decembrie 2022.