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PROTESTING PRECARITY, REIMAGINING CARE

THE WAVES OF THE PORTUGUESE CARE MOVEMENT AND THE FIGHT FOR A NATIONAL CARE SERVICE

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N° 249/2026

CIES e-Working Papers
Av. das Forças Armadas, Edifício CVTT, 1649-026 LISBOA,
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E-Working Paper | Número 249/2026

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cies _ iscte
Centro de Investigação
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Lisboa | junho 2026

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Primeira publicação: junho de 2026

ISSN: 1647-0893

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Composição em carateres Futura, 12

Propriedade do título: CIES-Iscte

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THE WAVES OF THE PORTUGUESE CARE MOVEMENT AND THE FIGHT FOR A NATIONAL CARE SERVICE

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Abstract Care has become a site of contestation under demographic and economic pressures, sparking mobilisations that challenge existing welfare arrangements. This paper explores how framing strategies, alliances, and institutional relationships have shaped the trajectories and perceived success of two waves of the Portuguese care movement. While social movement scholarship has highlighted how political opportunities, elite allies, framing, and coalition building shape outcomes, and research on the political economy of care has stressed the structural and cultural constraints on mobilisation, we know less about why the same movement in the same national context can at times succeed and at other times fail. This paper addresses this puzzle by comparing two waves of the Portuguese care movement: the successful campaign for the Informal Caregiver Statute (2016-2019) and the unsuccessful Citizens' Legislative Initiative for a National Care Service (2022-2024). Drawing on semi-structured interviews and mobilisation timelines, this comparison illustrates how different framing strategies and institutional engagements shaped outcomes in two waves of the Portuguese care movement. These findings contribute to debates on care and social movements by highlighting how framing strategies, coalitions and institutional engagement shape outcomes, and by showing the trade-offs between incremental gains and transformative ambitions in familialist welfare settings.

Keywords: care, social movements, institutional change, Southern Europe.

Resumo Os cuidados têm-se tornado num espaço de contestação perante pressões demográficas e económicas, suscitando mobilizações que desafiam os atuais modelos de Estado social. Este artigo examina de que modo estratégias de enquadramento, alianças e relações institucionais moldaram as trajectórias e a percepção de sucesso de duas vagas do movimento português pelo cuidado. Embora a literatura sobre movimentos sociais tenha salientado como as oportunidades políticas, os aliados entre as elites, o enquadramento e a construção de coligações influenciam os resultados, e embora a investigação sobre a economia política do cuidado tenha destacado os constrangimentos estruturais e culturais à mobilização, sabemos menos sobre as razões pelas quais o mesmo movimento, no mesmo contexto nacional, pode por vezes ser bem-sucedido e noutras não atingir os seus objetivos. Esta questão é abordada comparando duas vagas do movimento português pelo cuidado: a campanha bem-sucedida pelo Estatuto do Cuidador Informal (2016-2019) e a Iniciativa Legislativa de Cidadãos para um Serviço Nacional de Cuidados (2022-2024) que não conseguiu o mesmo nível de adesão. Com base em entrevistas semiestruturadas e em cronologias de mobilização, a comparação demonstra como diferentes estratégias de enquadramento e envolvimentos institucionais moldaram os resultados em duas vagas do movimento português pelo cuidado. As conclusões contribuem para os debates sobre cuidado e movimentos sociais, evidenciando de que modo as estratégias de enquadramento, as coligações e o envolvimento institucional influenciam os resultados, e mostrando os compromissos e *trade-offs* entre ganhos incrementais e ambições transformadoras em contextos de bem-estar familiaristas.

Palavras-chave: cuidado, movimentos sociais, mudanças institucionais, Europa do Sul.

Introduction

Across Europe, care provision has become an increasingly prominent and contested social and political issue due to demographic shifts, economic pressures, and evolving gender dynamics (Razavi, and Staab, 2010). In the context of a "care crisis", Fraser (2016) highlights how financialised capitalism has profoundly reshaped the landscape of social reproduction[1]. By offshoring manufacturing to low-wage regions, drawing women into the formal labour market, and systematically withdrawing public investment from welfare services, this regime has shifted the burden of care onto families and communities, while simultaneously eroding their ability to meet these demands. These issues become prominent in countries such as those in Southern Europe, where welfare states traditionally rely on familialist models, placing caregiving responsibilities primarily upon families, and particularly women, with limited state intervention or support (Leitner, 2003; Naldini *et al.*, 2016; Saraceno, 2016). However, this model has increasingly proven unsustainable, exacerbating existing inequalities, and deepening the marginalisation of caregivers who often face economic insecurity, social isolation, and inadequate recognition within public policy frameworks (Quashie *et al.*, 2021).

1 The term is understood here as the processes and activities involved in maintaining and perpetuating the social, economic, and cultural conditions necessary for the reproduction of the workforce and society as a whole (Bhattacharya, 2017). In this sense, both domestic and care work are part of reproductive labour, sharing similar characteristics (predominantly informal, unpaid and feminine) and common demands of social recognition, policy support and labour rights.

In response to these challenges, mobilisations advocating for improved recognition, labour rights, and policy support for care and domestic work have emerged not only across Europe, but on a global scale, with caregivers' increasing collective organisation pressing for both immediate policy changes and broader institutional transformations (Acciari, 2023; Geymonat *et al.*, 2021; Hanson, and Champeix, 2023). These mobilisations have seen various responses from governments, ranging from policy support to institutional resistance. While in some contexts movements have achieved substantial legal and institutional gains — including the extension of social security rights and the recognition of caregiving in pension systems — elsewhere they have primarily succeeded in raising visibility and political attention without immediate structural reforms (Acciari, 2023). This raises the question guiding this paper: why are some care movements successful in achieving their goals while others fail, and what lessons can be learned from them?

To address this, by focusing on the Portuguese care movement, the paper examines the conditions that create opportunities for the movement to succeed in advancing its agenda as well as the constrains that serve as obstacles. Rather than offering a comprehensive explanation of movement outcomes, the goal is to provide an exploratory, qualitative interpretation of two empirically distinct mobilisation phases within Portugal's care field. The Portuguese case is particularly relevant because it reveals two waves of mobilisation — from 2016-2019 and from 2022-2024 — with very distinct outcomes. In Portugal, the historical invisibility and familiar dependency in caregiving practices were prominently challenged from 2016 onwards. The mobilisation of informal caregivers successfully advocated for the Informal Caregiver Statute, marking a significant step toward policy recognition and support. Nevertheless, subsequent efforts advocating for comprehensive structural reforms, centred on the 2022 Citizen's Legislative Initiative pushing for a National Care Service, encountered substantial institutional resistance. By examining these two waves together, this paper highlights both the opportunities and obstacles faced by caregivers' mobilisations, shedding

light on the broader dynamics that determine whether care movements succeed in reshaping policy and institutions. With this comparison, the paper makes three contributions. First, it advances debates on the outcomes of care mobilisations by showing how movements alternate between incremental gains and transformative struggles. Second, it highlights how framing, coalition-building and engagement with institutional actors are not static but evolve over time, shaping movement trajectories and outcomes. Finally, it contributes empirically to the still-scarce scholarship on care movements not only in Southern Europe but elsewhere, bringing new evidence from Portugal that enriches comparative debates on the politics of care and welfare transformation.

The paper proceeds as follows. The next section situates the study within the literature on social movements, institutional change and the political economy of care, outlining the theoretical framework. It then follows the empirical section, explaining the qualitative approach and data collection. The following two sections analyse the Portuguese care movement: first the mobilisation around the Informal Caregiver Statute (2016-2019) and then the campaign for a National Care Service (2022-2024). These two waves are then compared in relation to their outcomes. The conclusion revisits the research question, situates the Portuguese case within broader international debates and reflects on the broader implications for understanding when care movements succeed in reshaping policy and institutions.

Care, Social Movements, and Institutional Change: The Marginalisation of Caregivers and Strategies for Mobilisation

Social Movements, Institutional Dynamics and Policy Outcomes

Among the multiple outcomes of social movements (Giugni, 2008), this paper focuses on the political dimension — how mobilisation affects agendas, decisions and policy change. Early research emphasised *political opportunity*

structures (Tarrow, 1994), showing how elite receptivity, repression, and the presence of allies condition movement effectiveness. Building on these insights, the *political mediation model* stresses that organisational strength is necessary but insufficient: movements typically succeed when they secure support from sympathetic elites and institutional actors (Amenta *et al.*, 1994; Cress, and Snow, 2000). Coalitions with state agencies, political parties, or international organisations therefore provide critical entry points into policymaking and can advance demands from agenda-setting to substantive implementation (Stearns, and Almeida, 2004).

More recent scholarship has built on this literature and deepened this perspective by emphasising the relational character of state-movement interactions. Rather than treating the "political context" as an external constraint, Abers *et al.* (2018) propose an analytical model that understands movements as embedded in relational structures composed of interdependencies between state and societal actors. As Abers & Bülow (2011) argue, it is essential not only to examine how movements build collaborative ties with the state, but also to recognise that activists sometimes pursue change *from within* state institutions. Government officials may thus act as adversaries, coalition partners, or "institutional activists" who adopt movement-like repertoires to promote change (Verhoeven, and Bröer, 2018; Pettinicchio, 2012).

A complementary strand of research centres on *framing* — the ways in which activists diagnose problems, propose solutions and mobilize support (Benford & Snow, 2000). Framing matters because it legitimises mobilisation, assigns responsibility, and articulates alternatives, often shaping whether alliances form or fracture. Frames also structure *strategic action fields* where movements, opponents, and authorities interact (Fligstein, and McAdam, 2012). Lasting success depends on frames that attract support across diverse actors creating a new filed consensus in which movement goals become embedded. Conversely, polarizing frames may yield short-term concessions but rarely secure durable change (Useem, and Goldstone, 2022).

Explaining policy outcomes therefore requires attention not only to opportunities, coalitions, and frames, but also to institutional dynamics. Policy systems are characterized by inertia and *path dependency* (Pierson, 1994; 2000), making transformation difficult. Nevertheless, research shows that institutions do change incrementally, which over time can yield significant transformation (Streeck, and Thelen, 2005; Hacker, 2004). Generations of work affirm that movements succeed not only in direct interaction with authorities, but also by forging coalitions, engaging publics, and exploiting moments of disruption and crisis (Snow *et al.*, 1998; Goldstone, 1980; Skrentny, 2004; Van Dyke, and Amos, 2017). To fully understand movement outcomes, scholars argue for integrative perspectives that situate mobilisation within broader institutional structures, strategies, and social conditions (Soule, and Olzak, 2004).

Care as a Site of Contestation and Collective Action

The insights from social movement theory provide a useful framework for examining how collective action translates into policy influence. Mechanisms such as framing, coalition-building, and engagement with institutional allies highlight the conditions under which marginalised groups can overcome political inertia. Yet, these dynamics take on distinctive contours in the field of care. Care is simultaneously private and public: it unfolds within families and communities while also being shaped by state policies, labour markets, and cultural norms. This complicates efforts at mobilisation, often rendering care struggles fragmented, invisible, or subordinated to other agendas. To understand how movements in this domain can reshape institutions, it is therefore necessary to situate social movement insights within the political economy of care.

Following Daly and Lewis (2000), this paper approaches care as 'social care': a multi-dimensional concept that shifts attention from isolated services to the wider set of activities, relations and institutions through which societies meet care needs. This perspective highlights the political

economy of provision — how responsibilities and costs are divided between family, market, state and voluntary sectors. Building on this, the concept of care regimes provides a framework for analysing how societies institutionalise and distribute these responsibilities. Care regimes encompass the institutional arrangements, political choices and cultural norms that shape care provision, captured by the so-called 'care diamond' (Razavi, 2007) of state, market, family and voluntary sector (Lewis, 1992). All care regimes combine formal and informal care: the former delivered by paid professionals in institutional or home settings, the latter[2] provided by unpaid family, friends or neighbours to those with physical, cognitive or health needs (IACO, 2018). Within this context, care regimes are central to understanding cross-national differences. Leitner (2003) distinguishes between implicit familialist, in which responsibility for care is assigned to the family, and optional familialist regimes, in which the state assumes this responsibility. Naldini *et al.* (2016) further classify care regimes as: (1) familialism by default, when the family provides care in the absence of public alternatives; (2) supported familialism, when the state offers services and support to families; and (3) defamilialisation, when quality public services socialise care provision. The Southern European model is typically 'familialist by default', with the family — primarily women — playing a central role in meeting care needs (Saraceno, 1994). This model exacerbates caregiver's marginalisation by relying heavily on unpaid or minimally compensated familial care provision (Saraceno, 2016).

Over the last two decades, the state's role in care provision has expanded, particularly in childcare and in recognising informal caregivers (Williams, 2010). Even so, much remains to be done. At the European level, recent initiatives have attempted to address long-standing challenges. Daly (2023) shows how long-term care (LTC) has gained prominence within international organisations such as UN Women, WHO and the ILO, which increasingly call for redistributing responsibilities, improving service access

2 The definition of informal care is contested, for these debates see Cruz et al. (2021)

and securing better conditions for paid care workers. The EU's European Care Strategy is a notable step in this direction (Zacharenko, and Elomäki, 2022), strengthening attention to infrastructure and working conditions. However, it largely retains an economistic lens, prioritising cost efficiency and service capacity, while continuing to rely heavily on informal care. Comparative scholarship confirms these limits. Ranci and Pavolini (2015) find that reforms in six European welfare states have expanded access to LTC but under 'restricted universalism', where benefits are formally universal but constrained by financial ceilings, service shortages and uneven quality. They further document how labour market shifts and migration have produced a low-paid, underqualified workforce, reinforcing precarity for both caregivers and recipients. Even where caregivers' roles are recognised, they continue to face economic insecurity, inadequate support and social invisibility (Charalambous, 2023).

These institutional arrangements not only structure the distribution of care responsibilities but also condition the possibilities for collective action. Familialist regimes place heavy burdens on households and especially women, often with limited recognition or support. This reliance on informal and often migrant labour (Van Hooren, 2012; Williams, 2012) entrenches precarious conditions that make organising difficult. At the same time, these structural pressures create openings for mobilisation, as care workers, families and allied organisations seek to reframe care from a private duty into a public responsibility, with recent years seeing the emergence of organised caregiver mobilisations in various contexts (Hanson, and Champeix, 2023).

Mobilisations around care issues have emerged globally as responses to structural inequalities, labour precarity, and inadequate policy provisions. These movements often intersect with broader struggles for social justice, labour rights and gender equality. Contemporary care demands come from diverse groups: people with disabilities seeking independent living; trade unions advocating parental leave, flexible working hours and better conditions for professional caregivers; and women's

organisations pushing for recognition of unpaid care work and collective responsibility for children and the elderly as part of gender equality struggles (Williams, 2010). Care movements overlap with contemporary feminist mobilisations that revive anti-capitalist analyses centring reproductive labour (Basu, 2016; Evans, 2015). Scholars such as Federici (2016) and England (2017) highlight how domestic workers' movements reveal systemic contradictions in care and the global commodification of reproductive labour.

Building on the traditional analyses of social movements, recent scholarship has explored the mechanisms through which women and care movements secure policy change. When studying the conditions under which feminist mobilisations for gender equality are successful, Goetz and Jenkins (2018) identify *strategic capacity* as a key determinant, encompassing the ability to frame demands in politically resonant ways, forge and sustain diverse alliances, and engage effectively with state institutions. Kabeer (2018) extends this lens by showing how framing shapes the mobilising potential of claims, especially for groups historically excluded from organised processes of claims-making. Rao's (2018) work on the politics of unpaid care underscores this centrality of framing: care work often remains subsumed within other agendas, which limits its visibility and political traction. Empirical cases illustrate these mechanisms in practice. Fish (2017) identifies how domestic workers' rights movements have grounded their communication strategies in frames of gender equity, human rights and economic justice. Migrant domestic workers in London reframed themselves from "labourers of love" to rights-bearing workers (Jiang, and Korczynski, 2016). Similarly, Acciari (2023) documents how domestic workers' mobilisations in Latin America advanced campaigns such as "Care for those who care for you", pushing for legal recognition. Such cases also underscore the convergence between feminist mobilisations and domestic workers' activism. Geymonat *et al.* (2021) show that domestic workers' rights movements often build on feminist arguments about reproductive labour while also expanding them intersectionally to address not only gender, but also class, race and migration.

Taken together, the literatures on social movements and care highlight both the opportunities and constraints that shape mobilisation outcomes. Social movement scholarship emphasises the importance of strategic framing, coalition-building, and political opportunity structures, while research on care regimes underscores the deep-seated undervaluation of care and the institutional reliance on familial and migrant labour. Bringing these strands together reveals that care mobilisations face distinctive challenges: they must not only confront entrenched gendered and cultural norms but also contest institutional arrangements that privatise responsibility. In the Portuguese context, these insights help illuminate the contrasting trajectories of the two waves of the care movement: the first focused on the approval of the Informal Caregiver Statute, and the second seeking the creation of a National Care Service. The following sections analyse these mobilisations, showing how strategies of framing, alliance-building, and institutional engagement shaped their divergent outcomes.

Empirical Strategy

Case Study

The mobilisations around care in Portugal offer a rich empirical context for exploring the theoretical insights presented in the literature review section. Initially, the informal caregivers' movement successfully leveraged strategic alliances, political opportunities, and effective framing to achieve policy recognition through the Informal Caregiver Statute (Soeiro, and Araújo, 2020). However, subsequent mobilisations for deeper institutional reform — centred on the 2022 Citizens' Legislative Initiative — encountered significant resistance due to entrenched familialist norms and diminished political support. This context provides an interesting opportunity to analyse the unique dynamics of Portugal's care mobilisations, evaluating factors that facilitated initial success but impeded later structural transformations.

While existing literature on the Portuguese care movement (Soeiro, and Araújo, 2020; Araújo, and Soeiro, 2021) has primarily focused on the emergence of the movement and its success in achieving its first primary goal — the adoption of the Informal Caregiver Statute — further developments in the movement have not been studied, nor the differences in alliances and outcomes of the second wave of mobilisation. Thus, this paper establishes a comparative study on these two moments in order to identify the conditions that enabled the movement's success in the first wave as well as the obstacles faced in the latter.

Furthermore, the interactions between civil society and political parties within these mobilisations also remain insufficiently studied. The Portuguese context presents a distinctive configuration of state-society relations that has long shaped patterns of contention. As several scholars have noted, the country's process of democratisation through a revolutionary transition in 1974 produced unusually porous boundaries between institutions, political parties, and social movements (Fishman, 1990; Fernandes, 2015; Accornero, and Ramos Pinto, 2020). Rather than a clear separation between institutional and contentious arenas, Portuguese politics has been characterised by recurring exchanges, overlaps, and collaborations between parties, unions, and civic organisations. This hybrid political field has facilitated the circulation of activists between formal and informal spaces of action (Accornero, and Kousis, 2024). Given the frequent 'backstage partyisation' that occurs in Portugal, regarding the proximity between political parties and social movements (Carvalho, 2025), and the movement's proximity to political elites in the first wave, it seems relevant to further explore the links between the Portuguese care movement and political parties. Engaging with this literature helps situate the Portuguese care movement within a broader mobilization culture marked by close party-movement entanglements. Many of the actors involved in the Citizens' Legislative Initiative, for instance, had previously participated in anti-austerity campaigns or feminist networks that emerged during the 2010s protest wave (Accornero, and Ramos Pinto, 2015). The alliances, repertoires, and framings observed

in the care movement thus partly draw on those earlier experiences, revealing path continuities between post-crisis mobilizations and newer struggles around social reproduction. This contextualization highlights that the porous institutional environment is not simply background but an active determinant of movement strategies and outcomes.

Building on the theoretical perspectives outlined above, this study adopts a case-oriented approach (della Porta, 2008) to examine the Portuguese care movement's two waves. The literature on social movements and care mobilisations provides the frameworks that will be guiding the analysis of how movements framed their claims, forged and sustained alliances, and engaged with state actors, and how these strategies shaped the outcomes. The Portuguese case offers a particularly rich context, given its shift from an initial recognition campaign to a broader, transformative agenda challenging entrenched familialist norms.

Data and Methods

Given the small scale of the empirical material, this study adopts an exploratory comparative design. It does not seek to measure the magnitude or frequency of protest events, but rather to reconstruct and interpret the evolving framing, coalition-building, and institutional engagement strategies across two waves of mobilisation. The paper employs a qualitative approach combining semi-structured interviews, as well as a mobilisation timeline reconstruction and analysis. First, all the research that had already been done on the first wave of the movement was collected in order to understand the emergence of the movement and the groups that supported it, the framing of their demands, as well as the main events, actors, and strategies employed. For the second wave of the movement, an initial mapping exercise was carried out to survey all the groups and organisations that participated in the 2022 Citizens' Legislative Initiative. This mapping exercise revealed a list of 12 diverse groups, ranging from feminist collectives to informal caregivers, pensioners' and immigrants' rights groups.

Table 1 Interviews conducted

Date	Interviewees	Type of Association/Political Party
23/06/2025	ANCI	National Association of Informal Caregivers
11/07/2025	APRe!	Association of Retirees and Pensioners
16/07/2025	A Coletiva	Feminist group
17/07/2025	APRA	Association of Professional Nannies
22/07/2025	Left Bloc	Radical left political party
30/07/2025	dinamicaMENTE	Association that supports informal caregivers

From these 12 groups, 5 semi-structured interviews have already been conducted with representatives (Table 1) in order to understand how these associations conceptualise care and mobilise around it, as well as to trace their strategies, alliances, and tensions with institutions. Another interview has also been conducted with a member of the political party Left Bloc. The interviews with political parties are meant to map how political actors perceive, prioritise, and legislate care issues, how they interact with social movements, and what role they attribute to themselves in shaping the care policy agenda. Thus, further interviews with other political parties will be conducted to gain a more comprehensive understanding of the political landscape surrounding care policies, comparing differing ideological approaches and identifying points of convergence or conflict with social movement demands.

Additionally, a reconstruction of the mobilisation's timeline was conducted, identifying key moments and strategies of contention. This reconstruction was primarily informed by the social media presence of the movement as well as its website page, which made it possible to identify key moments, repertoires of action, and evolving strategies of contention. This mixed-methods approach allows for a fine-grained reconstruction of the different waves of the mobilisation process and the strategies and alliances built between civil society organisations and political parties, and, as such, to describe a "unified and rigorous storyline" (Everson, and Fishman, 2024, p. 336).

The Portuguese care movement — waves of mobilisation

Origins of the movement and first steps — the Informal Caregiver Statute mobilisation

Soeiro and Araújo (2020) mapped the origins of the Portuguese care movement and its first wave in detail in their work. This first wave was focused on the recognition of informal caregivers, beginning around 2016, when a few informal caregivers met via Facebook groups while caring for relatives with dementia. They shared frustrations over the lack of training, support, and legal recognition, and their online conversations became a base for building a collective identity. This echoed Kabeer's (2018) insight that claims-making for undervalued caregivers entails self- and social recognition: caregivers must assert the value of their labour and their status as rights-bearing workers and citizens.

These virtual spaces facilitated mutual support, the exchange of information, and the articulation of shared grievances, which soon translated into offline mobilisation. One of these caregivers raised the issue during a radio forum attended by the presidential candidate and Left Bloc's MEP Marisa Matias, who had authored the European Strategy to Combat Alzheimer's and Dementias. Another caregiver later contacted Matias directly, leading to a conversation where the idea of organising a national meeting was born. The first National Meeting of Informal Caregivers of Alzheimer's and Similar Dementias in Lisbon in 2016 marked the transition from mutual aid to political advocacy, resulting in a petition for the creation of the Informal Caregiver Statute. The petition's central demand was the creation of an Informal Caregiver Statute in order to ensure social and legal recognition of caregivers, while also calling for measures such as subsidies after the dependent's death, tax deductions, training and counselling services, and work-related rights like reduced hours and pension recognition.

Over the following years, the movement expanded beyond dementia care, incorporating organisations related to ageing and the rights of

Table 2 Timeline of some of the main events in the first wave of the Portuguese care movement (2016-2019)

18/06/2016	1st National Meeting of Informal Caregivers for Alzheimer's and Similar Dementias, in Lisbon
03/08/2016	Launch of the petition for the creation of the Informal Caregiver Statute
12/10/2016	Human chain in front of Parliament
17/06/2017	2nd National Meeting, in Porto. With the participation of Left Bloc's MEP Marisa Matias and the Portuguese President, Marcelo Rebelo de Sousa.
20/09/2017	Rally outside Parliament. 20 people
23/02/2018	Public debate session in Parliament
16/03/2018	Caregivers' rally outside Parliament
19/05/2018	Demonstration for the Informal Caregiver Statute. 150 people
27-28/09/2018	Vigil outside Parliament
05/02/2019	The Portuguese President welcomes around 50 carers to his official residence to gather personal testimonies
05/07/2019	Unanimous approval by Parliament of the Informal Caregiver Statute

Source: Soeiro & Araújo (2020).

elderly people; neurodegenerative diseases, dementia and premature ageing; people with disabilities and organisations of families of children with disabilities or chronic illnesses — the latter becoming one of the main groups, with high media visibility. The movement also expanded its strategies, ranging from media engagement to symbolic street actions such as rallies, a human chain, and a vigil in front of Parliament, as well as a demonstration for the approval of the Statute (Table 2). Support grew not only because of this coalition-building but also through direct engagement with political figures — including Marisa Matias and, crucially, the country's President. Marcelo Rebelo de Sousa endorsed the cause after attending the second National Meeting in Porto, becoming a key interlocutor.

In July 2019, the Informal Caregiver Statute was unanimously approved. The legislative process that led to this outcome, however, revealed significant tensions and different conceptions of care (Araújo, and Soeiro, 2021). Central debates concerned whether caregiving should be

recognised as coerced, unpaid labour requiring compensation or as a voluntary familiar duty; the appropriate balance between state responsibility and the entrenched familialist model; and the scope of eligibility, from narrowly defined full-time primary caregivers to broader categories. Further points of contention included the integration of informal caregivers into formal health and social care networks, the role of third-sector organisations in service provision, the retroactivity of rights, and the pace of implementation.

The final document, which was initially implemented in 30 pilot projects municipalities and expanded nationwide in 2020, regulated the rights and duties of informal caregivers and care recipients, along with available support measures (DRE, 2019). It stated that, in order to be formally recognised, caregivers must be assisting someone eligible for a third-person care allowance or a second-degree dependency supplement. Furthermore, it distinguished between two categories of caregivers: (a) primary caregivers — close relatives living with and permanently caring for the dependent without pay; and (b) secondary caregivers — relatives who provide care regularly but not permanently, with or without pay. The former were granted access to the Informal Caregiver Support Allowance (albeit a means-tested subsidy, allocated according to the household's means), access to the Voluntary Insurance Scheme[3], and measures supporting labour market reintegration. As for secondary caregivers, they were entitled to measures facilitating the balance between paid work and caregiving. Additionally, and regardless of type, all recognised caregivers were granted rights including training opportunities, access to health and social security information, psychosocial support, student-worker caregiver status, a designated health professional, participation in self-help groups and policy discussion, and entitlement to rest days.

3 The Voluntary Social Security is a voluntary contributory scheme that provides access to benefits granted by Social Security.

While the Statute represented a landmark in the legal recognition of informal caregiving, its phased implementation and limited scope left many caregivers viewing the achievement as an incomplete victory, arguing that key measures were omitted or poorly executed. As one representative of the National Association of Informal Caregivers stressed:

> The law was passed in 2019, but the regulations were only issued in 2020. Then there were only 30 municipalities with pilot projects, and with the pandemic, those pilot projects did not work… Even with the final regulations in 2022, there were gaps, such as the lack of ordinances on caregiver rest and home support.

Similarly, a member from *dinamicaMENTE*, an association that provides support to informal caregivers, described the Statute as:

> Is it a document that meets the needs of caregivers? Not at all. It is far from it. Is it something we have today that we did not have almost 10 years ago? Yes, we are better off than we were 10 years ago.

These voices capture the sense of partial progress and persistent frustration among caregivers. The first wave thus marked a historic breakthrough in the legal recognition of caregiving, while simultaneously exposing the limits of incremental reform — an ambivalence that would shape the movement's subsequent efforts.

Second wave — the 2022 Citizen's Legislative Initiative "The Right to Care and Caring with Rights"

Following the success of the first wave, the 2022 Citizen's Legislative Initiative (CLI), "The Right to Care and Caring with Rights', launched in 2022, reframed the agenda from recognising informal caregiving to the socialisation of care. Going beyond the previous claims, this initiative proposed structural changes, based on three goals: (1) ensure full labour rights for care workers, who continue to be subject to precarious working conditions

under the law; (2) extend parental leave and create a care leave scheme and (3) create a National Care Service, in order to establish care as a universal social right and a collective responsibility (*Direito ao Cuidado, Cuidado com Direitos*, n.d.).

Normatively, the CLI resonated with Tronto's (2013) view of 'care democracy' and the three rights to care: the right to receive care, the right to care, and the right to participate in public decisions about care. By relocating care from the private sphere to a matter of public concern, the proposal challenged entrenched divisions between family and state and invited a structural reorganisation in social and political institutions. In this respect, it also echoed Hanson and Champeix's (2013) call for caregiver-friendly policies that enable family members and friends to decide whether and how to assume caring roles, and for the recognition of informal care to be paired with sustained investment in formal services. The CLI's universalistic framing reflected these priorities by placing both informal and formal care at the centre of its demands. This universalistic framing resonated with broader debates about the potential of care to serve as a unifying framework for labour and social movements (Duffy, 2010).

The initiative arose from reflection and debate among various organisations on how care is provided in Portugal. Two organisations came up with the idea — *A Coletiva* (a feminist group) and *Precários Inflexíveis* (an association for combating precariousness). The initiative quickly gained the support of another four groups: APRA (the Association of Professional Nannies), ANCI (the National Association of Informal Caregivers), *Solidariedade Imigrante* (the Association for the Defence of Immigrants' Rights) and STSSSS (the Union of Health, Solidarity and Social Security Workers). Later, they were joined forces with APRe! (the Association of Retirees and Pensioners), *dinamicaMENTE* (an association that offers support for informal caregivers), Climáximo (a climate activist group), the Portuguese Association for Women's Rights in Pregnancy and Childbirth, the Observatory of Obstetric Violence in Portugal and *Saber Compreender* (a human rights association) (*Público,* 2022).

As one activist from *A Coletiva* recalled:

> This stem largely from shared ideas and conversations between *A Coletiva* and *Precários Inflexíveis*. We quickly reached out to the informal caregivers' association and the health and social security workers' union, and from there we began to gather various perspectives. (…) We had a social challenge ahead of us, which was to transform social and power relations… it challenges the traditional roles of women, the traditional concept of work, it challenges a whole series of things and causes a lot of destabilizations.

In this second wave, the movement combined mass mobilisation, coalition-building and policy-oriented engagement (Table 3). It was present in symbolic and commemorative demonstrations (the repeated participation on the 25th of April Revolution Day and International Workers' Day marches, as well as feminist and social justice protests), using these occasions to gain visibility and gather support. Alongside street demonstrations, the movements pursued grassroots outreach through systematic collection of signatures for the CLI at universities, metro stations and public festivals. The second wave also emphasised dialogue and debate within academic, civic and activist space, including discussions hosted by universities and research institutes.

For pensioners' groups such as *Apre!*, the proposal's appeal was linked to the quality of care and the need for a publicly funded service:

> Many [caregivers] have enormous goodwill, but they have no training… the pay is very low. Many of these people are in precarious situations… Therefore, we need care, and we need to ensure the quality of care. It is part of our list of demands: a National Care Service, similar to the National Health Service.

However, the organisation also acknowledged the political economy challenges:

> There is one issue: it costs money… if we want a National Care Service, this requires a choice, a political choice.

Table 2 Timeline of the main events in the second wave of the Portuguese care movement (2022-2024)

19/04/2022	Launch of the campaign at the headquarters of Solidariedade Imigrante, Lisbon
24/04/2022	Presence at the "Arraial dos Cravos" festival to promote the campaign and collect signatures, Lisbon
25/04/2022	1st participation on the 25th of April demonstration (Portuguese Revolution Day)
01/05/2022	1st participation in the International Workers' Day demonstration
14-24/05/2022	Collection of signatures for the CLI in various locations, from universities to metro stations
19/06/2022	Presence at the "Festa da Diversidade", organised by SOS Racismo, to promote the campaign and collect signatures, Lisbon
29/10/2022	Participation in the debate "How are we going to build a new care policy?" at the Institute of Public Health of the University of Porto
05/11/2022	Participation in the conversation "Why do we need a National Care Service?" at Cooperativa Rizoma, Lisbon
25/02/2023	Participation in the 'Demonstration for a Fair Life', organised by Vida Justa
06/03/2023	Participation in the session "Super Women - At what Price?" promoted by the Guimarães Red Cross, to promote the campaign. Guimarães
08/03/2023	1st participation in the International Feminist Strike on the International Women's Day; participation in a radio station forum to promote the CLI
10/03/2023	Participation in the series of seminars organised by CRIA (Centre for Research in Anthropology) at Iscte - University Institute of Lisbon
25/04/2023	2nd participation on the 25th of April demonstration (Portuguese Revolution Day)
01/05/2023	2nd participation in the International Worker's Day demonstration
08/03/2024	2nd participation in the International Feminist Strike on the International Women's Day

Source: own elaboration from the Citizens' Legislative Initiative's Instagram account.

Political parties can play a crucial role in mobilisation campaigns. Recent scholarship argues that 'backstage partyisation' is frequent in Portugal (Carvalho, 2025), where political parties leverage infrastructures and resources to shape the contentious arenas, providing access points. This was the case in this second wave of the Portuguese care movement, which is characterized by a strong influence of the Left Block. A member of the party explained:

> I think it was a fruitful dialogue that we had with the movement's activists so that, on the one hand, we could embrace the [informal caregivers] Association's agenda

> but also influence the Association's agenda so that they could incorporate a discourse more capable of including the dimension of public policies on the role of the state and formal care. At a certain point, we sought to promote a meeting between feminist associations and caregivers' associations, insofar as the international feminist movement was already raising the issue of care. (…) I think that the role of Bloc's activists in promoting these meetings is obviously quite central because there are people who are in Bloc and who are also in the associations that have been making these points.

Yet, the radicalism of the CLI also created barriers. One activist from *A Coletiva* compared the two moments, arguing that the Citizens' Initiative was a "much more radical proposal", that went against the recent declining trajectory in the Portuguese economy of public investment:

> The Statute has so many obstacles that it does not reach people, so people themselves are already wondering whether it is worthwhile or not [to mobilise], and the CLI proposal is quite radical. When we have been trying for years in Portugal to dismantle the most important public services we have — education and health — we have gone against the grain.

Likewise, a representative of *dinamicaMENTE* reflected that the initiative "Seems a bit political… That may be why it didn't get as much support." These insights point to the difficulties of mobilising consensus around transformative demands. Ultimately, this wave broadened the movement's horizon by articulating care as a universal right. Yet the CLI's transformative agenda proved too radical to gain traction, highlighting the difficulties of advancing structural change in familialist welfare settings.

Comparing the two waves

Each wave of the Portuguese care movement has different degrees of protest intensity, as well as different goals and players involved. Drawing on the six semi-structured interviews as well as the timeline analysis, it is possible to identity key themes and to trace the evolution of collective

Table 4 The two waves of the Portuguese care movement

WAVE	MAIN FOCUS	MAIN CLAIM	GROUPS MOBILISED	MAIN STRATEGIES	ALLIED INSTITUTIONAL ACTORS	OUTCOME
2016-2019	Informal caregivers' recognition	Informal Caregiver Statute	Individual caregivers; ageing, dementia and disability organisations	Petitions, mobilisations	Portuguese President; Left Bloc's MEP	Informal Caregiver Statute (but slow/insufficient implementation)
2022-2024	Structural reorganisation of the care regime	National Care Service	Caregivers' associations, feminist, pensioners and migrants' groups	CLI, online campaign, participation in demonstrations	Left Bloc	Policy resistance

Source: own elaboration based on Soeiro & Araújo (2020) and my own research.

action around care in Portugal. The analysis highlights two major waves of mobilisation: an initial phase (2016-2019) focused on recognition and the implementation of the Informal Caregiver Statute, and a subsequent phase (2022-2024) oriented toward structural transformation, broader alliances, and the claim for a National Care Service. The findings also underscore persistent barriers, internal tensions and evolving strategies and alliances among players.

The first wave of mobilisation was characterized by grassroots organising among caregivers and their families demanding legal recognition and state support for informal care. To advance these demands, the movement relied on media engagement and symbolic street actions as well as a demonstration calling for the approval of the Statute. These efforts were reinforced by the support of elite allies, most notably Left Bloc's MEP Marisa Matias and President Marcelo Rebelo de Sousa. The President's endorsement proved particularly significant, lending visibility and political legitimacy to the cause. The central achievement in this wave was the approval of the Informal Caregiver Statute in 2019, with the establishment of the National Association of Informal Caregivers also representing an

important step. Despite this formal recognition, the practical implementation of the Statute proved slow and insufficient, raising concerns and criticism within caregivers' associations. As one APRA (association of professional nannies) representative stated: "The Statute was published, but in practice very little has changed."

Recognising this insufficiency, a second wave of mobilisation emerged, in 2022, oriented towards comprehensive structural transformation and the universalisation of care as a right. This phase is marked by broader coalitions involving caregiver associations, feminist groups, pensioners' organisations, and migrant advocates. New strategies and frames are also employed, emphasising de-familisation and the right both to give and receive care, with the primary focus on pushing for a National Care Service. To advance these goals, the movement combined mass participation in symbolic demonstrations with grassroots outreach through the collection of signatures. It also invested in public debate and coalition building, participating in conferences, roundtables and discussions hosted by universities, civil society organisations and research institutes. In contrast with the first wave, political parties played a more direct role in this phase. The Left Bloc, in particular, acted as a key ally, providing resources while also shaping the movement's agenda by encouraging the integration of feminist perspectives into the politics of care.

Contrary to expectations given the issue's salience and media attention, the CLI failed to gather the required signatures and did not benefit from the same presidential sponsorship. The contrast is instructive: whereas the Statute was path dependent — operating within Portugal's familialist regime — the CLI aimed at institutional reorganisation and greater public investment. This transformative horizon reduced consensus among civil society allies and political actors, limiting support and traction. Overall, the research demonstrates that the Portuguese care movement has evolved from seeking recognition within existing frameworks to pushing for transformative change. Yet, this shift has amplified both opportunities for broad alliances and challenges of political feasibility.

Discussion and conclusion

This paper has examined the Portuguese care movement, showing how mobilisations operate within tight political and cultural constraints, where framing, alliances, and engagement with state actors decisively shape outcomes. The first wave (2016-2019) mobilised caregivers and families for legal recognition, combining symbolic street actions, media advocacy and elite support, culminating in the approval of the Informal Caregiver Statute in 2019. This demonstrated how incremental gains aligned with prevailing institutional logics can secure recognition, albeit with limited implementation. By contrast, the second wave (2022-2024), sought structural transformation, demanding the universalisation of care as a right through the creation of a National Care Service. Despite broader coalitions and diversified tactics, the CLI failed to secure the necessary support, facing stronger institutional resistance and weaker elite sponsorship.

The comparison between the two waves of mobilisations in Portugal shed light on why some care movements achieve their goals while other fall short. The analysis shows that outcomes hinge not only on mobilisation intensity but also on the interplay between framing strategies, coalition-building and institutional engagement. This echoes the broader literature on social movements, which highlights that success depends less on organisational strength alone and more on the capacity to forge alliances and secure support from sympathetic elites (Amenta *et al.*, 1994; Cress, and Snow, 2000; Stearns, and Almeida, 2004). In the Portuguese case, the first wave demonstrates how grassroots mobilisation gained traction by combining symbolic actions with elite endorsement, enabling the passage of the Statute. The second one, by contrast, illustrates the limits of partisan sponsorship. While the Left Bloc provided resources and framing support, its influence did not compensate for the absence of broad consensus.

Strategic capacity emerges as a decisive factor. As Goetz and Jenkins (2018) argue, successful mobilisations depend on the ability to

articulate demands in politically resonant ways, forge durable alliances and sustain engagement with state actors. Inspired by Fraser (2005), Kabeer's (2018) triad of recognition, redistribution and representation also helps illuminate the Portuguese trajectory. The first wave succeeded by centring recognition of caregivers' identities and pursuing targeted redistribution within existing structures. The CLI, however, sought more ambitious redistribution and institutional transformation but failed to secure sufficiently wide alliances to sustain that claim. These findings also speak to scholarship on care movements globally. Geymonat et al. (2021) show how domestic worker movements converge with feminist struggles by reframing reproductive labour as both a site of exploitation and of resistance, while adding dimensions of class, race and migration. Similarly, the CLI sought to link unpaid informal care with the rights of professional and migrant care workers. This expanded frame created opportunities for cross-movement alliances but also heightened contestation and reduced political feasibility. Finally, institutional dynamics shaped the divergent outcomes. In line with Pierson's (1994; 2000) insights on path dependency, incremental reforms that align with prevailing familialist logics — such as the Statute — are more achievable in the short term. Transformative projects like the National Care Service require shifts in entrenched institutional arrangements and cultural norms and thus face steeper barriers.

These findings thus contribute to debates on care movements in three ways. First, they highlight the trade-offs between incremental and transformative strategies, showing how movements weigh short-term gains against long-term ambitions. Second, they underline the dynamic role of framing, alliances and institutional engagement across waves of mobilisation, rather than as fixed determinants of success or failure. Third, they bring new empirical evidence from Southern Europe, where familialist care regimes pose distinctive challenges. For care movements more broadly, the Portuguese experience highlights three lessons. First, incremental reforms are often more achievable when movements secure

visible elite allies and frame their claims in ways that resonate with existing institutional logics. Second, transformative projects require broader and more durable coalitions that cut across diverse groups as well as sustained engagement with sympathetic political actors. Third, movements must balance the urgency of recognition with the long-term struggle for redistribution and structural change.

This study also opens avenues for future research. While this paper has highlighted the importance of framing, alliances and institutional engagement, the contrasting outcomes of the two waves suggest that broader political opportunity structures also warrant closer attention. Further work could explore how access to institutions and gatekeepers, the configuration of policy arenas and the presence of institutional activists shape the prospects for care-related mobilisations, especially in light of evidence that the successful care policy change often depends on the empowerment of feminist actors operating both within social movements and inside state institutions (Engeli, and Mazur, 2018; Krizsan, and Lombardo, 2013). Comparative analysis with other countries where care movements have secured transformative gains could shed light on the conditions under which path-breaking social policies emerge. The Spanish case, for example, illustrates how a strong feminist movement with broad alliances and greater influence on government, enabled the adoption of a broader reform that seeks to reorganise the traditional model of care (Alonso *et al.*, 2023; Poch, 2017). In particular, examining the role of trade unions and their alliances with care movements could help explain how struggles around undervalued reproductive labour are incorporated into broader labour agendas. This work would not only deepen the understanding of the Portuguese case but also contribute to a more general theorisation of when and how care becomes a site of effective collective action and durable institutional change.

Finally, this paper's scope is constrained by the limited number of interviews and the focus on a single political party. Future research could broaden the sample to include additional institutional actors and use

protest-event data to assess whether these mobilisations constitute a full cycle of protest.

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