



Bridging the gender divide in  
informal long-term care

# National Report Cyprus

CSI & CCCI

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# 1. INTRODUCTION:

Cyprus has a population of approximately 1,366,956, which represents just 0.02% of the total global population of 8.062 billion (Worldometers, 2025). According to Eurostat projections, the population is expected to grow by 20% by 2070, reaching around 1.0 million. This growth is significantly higher than the EU average increase of just 2%. As of December 2024, 17.7% of the population was aged 65 or older, and this share is forecasted to rise sharply to 31.7% by 2060 (Trading Economics, 2024).

Cyprus displays the characteristics of an aging Western society, facing increasing care demands and concerning demographic trends; particularly regarding the old-age dependency ratio. Between 2019 and 2070, this ratio is projected to increase from 24.8% to 65.5%, indicating growing pressure on long-term care (LTC) systems. Life expectancy at age 65 is forecasted to reach 23.8 years for men and 26.3 years for women by 2070, compared to 16.3 and 19.9 years respectively in 2016. In terms of healthy life years at birth, Cyprus is close to the EU average, with 62.4 years for women and 62 years for men (compared to the EU averages of 64.2 and 62.6 in 2018) (EUROCARERS, 2023).

These figures paint a clear picture of the demographic realities that Cyprus must challenge. The sharp rise in the proportion of older adults, set to reach nearly one-third of the population by 2060, alongside a growing old-age dependency ratio, signals a rapidly increasing demand for long-term care services (EUROCARERS, 2023). This reality highlights the need for sustainable policy interventions, increased investment in care infrastructure and support mechanisms for both formal and informal caregivers.

As will be explored in the following sections, both from data extracted from secondary and primary research, given the traditionally informal and gendered nature of care in Cyprus, this demand is likely to continue falling disproportionately on women. The rising life expectancy, combined with a cultural reliance on family-based caregiving, reinforces systemic gender inequalities by limiting women's full participation in the labour market. The above data highlight that for Cyprus, addressing the gender divide in informal care is not only a matter of equality and fairness but more about pressing demographic and economic necessity.

## 2. METHODOLOGY:

### Desk based research:

The desk-based research involved collecting existing data, policies and practices from national and EU reports, official government websites, academic literature and policy documents relevant to the topic. This method allowed for a comprehensive understanding of the current national context, challenges and best practices by reviewing up-to-date secondary sources. It provided a foundation for identifying and understanding key themes while mapping the national landscape in relation to informal care.

### Primary research:

The field research was conducted via the organisation of co-creation workshops with employers, managers, human resources, personnel, HR specialists and men and women who (may) provide

informal care, reaching a total of 22 participants contributing to primary data collection. The co-creation workshop with employers, managers, human resources, personnel and HR specialists has been organised and conducted by CCCI, reaching 10 participants, and the workshop with men and women who (may) provide informal care has been organised and conducted by CSI. Due to the limited show of interest from men and women who (may) provide informal care, CSI had to organise two co-creation workshops. Specifically, CSI conducted one workshop with three participants who have provided informal care to their relatives and one workshop with eight participants who have either provided such care themselves or are aware of relatives who have. All data collection activities were done face to face and were audio recorded.

## 3. DESK RESEARCH RESULTS

### 3A. Work-life balance Directive & Employment Rights:

#### Work-Life Balance Legislation

Cyprus has taken notable steps toward aligning its national legislation with the **EU Work-Life Balance Directive (Directive (EU) 2019/1158)** (European Union, 2019), aiming to promote gender equality and support employees in balancing their professional and caregiving responsibilities. On 16 December 2022, the Cypriot House of Representatives passed the ***Leave (Paternity, Parental, Caregiver, Force Majeure) and Flexible Work Arrangements for Work-Life Balance Law of 2022 (Law 216(I)/2022)*** (CYLAW, 2022), repealing previous laws and incorporating key provisions of the Directive into national law (Neo Law, 2023).

#### Rights of employees

Under the law, and in accordance with the **EU Work-Life Balance Directive (2019/1158)**, Cyprus enacted **Law No. 216(I)/2022**, which came into effect in December 2022. This legislation introduced several key provisions, that employees are entitled to the following rights:

- **Parental Leave:** Each working parent is entitled to 18 weeks of parental leave per child, with a maximum of five weeks per calendar year. Single parents receive an extended duration of 23 weeks. Parental leave can be taken flexibly, including part-time arrangements, and requires a three-week notice period to the employer (Department of Labour Relations, 2023).
- **Carers' Leave:** Employees are granted five working days of carers' leave per year to provide personal care or support to a relative or person living in the same household who requires significant care due to serious medical reasons (Neo Law, 2023).
- **Flexible Working Arrangements:** Working parents and carers have the right to request flexible working arrangements to better balance their professional and personal responsibilities (Neo Law, 2023).

#### Implementation of the Work-Life Balance Directive & Challenges:

Despite these legislative improvements, **Cyprus faced difficulties in fully transposing the Directive by the deadline of EU of 2 August 2022** (European Commission, 2023). In April 2023, the European

Commission issued a reasoned opinion to Cyprus for failing to complete the transposition, initiating potential infringement procedures (Financial Mirror, 2023).

While failure in transposition being recorded, the data up to 2022 could clearly reveal that work-life balance measures remained limited in practice. For example, data revealed that 81.2% of Cypriot employers did not include adjusted working conditions to accommodate dependent care responsibilities (En.philenews, 2018).

Such data clearly highlights the urgency for the effective transposition of the Directive, which could hold the potential to positively transform everyday workplace realities. The limited implementation points to deeper structural and societal barriers that continue to hinder progress toward achieving genuine work-life balance in Cyprus.

A significant shift in working arrangements, largely influenced by the Covid-19 pandemic, has led to the growing adoption of remote work in the private sector of the Republic of Cyprus and thus the implementation of the Directive. Whether full-time, hybrid, or implemented for reasons of convenience or emergencies, remote working is increasingly in demand. This shift marks a notable change in Cyprus' employment landscape, with remote work offering flexibility that appeals to workers, particularly parents and caregivers, encouraging them to remain in the workforce (CyprusMail, 2025). As a result, the enactment of the **Remote Working Law of 2023 (Law 120(I)/2023)** was introduced to regulate remote work in Cyprus and safeguard the rights of the employees (CYLAW, 2023). In the latest results recorded by Eurostat, data reveals that the percentage of employed persons working from home in Cyprus remained high in 2023 (3.9%), compared to pre-Covid years (1.2% in 2018 and 1.4% in 2019) (Eurostat, 2023). This shift in workplace dynamics reflects both the adoption of remote work practices and the impact of the pandemic, with the continued evolution of this trend likely influenced by the implementation of the relevant legislation.

Although progress has been made, such as the adoption of remote working practices and the establishment of relevant laws, the urgency remains. Significant steps are still needed to fully implement the Directive, ensuring both employers and employees are well-informed and actively engaged in achieving a genuine work-life balance.

## Regulatory and Monitoring Mechanisms

Several bodies oversee the implementation and enforcement of work-life balance policies:

- **Department of Labour Relations (DLR):** Implements government policies on industrial relations and provides mediation services for labour disputes.
- **Labour Inspectorate:** Enforces various labour-related legislations, excluding health and safety, ensuring compliance with employment laws.
- **Department of Labour Inspection:** Focuses on enforcing health and safety regulations in the workplace (Eurofound, 2024).

In the public sector, the Council of Ministers approved a policy framework in September 2023 to regulate flexible employment, including teleworking and reduced working hours, aiming to modernise civil service operations and enhance work-life balance for employees (European Commission, 2023).

Despite notable legislative advancements aligning national law with the EU Work-Life Balance Directive, Cyprus continues to face significant challenges in translating these frameworks into tangible, everyday practices. The introduction of new entitlements; such as extended parental leave, carers' leave, and flexible working arrangement; marks important progress, however, the limited uptake and delays in full transposition signal a disconnect between policy and practice. Structural gaps, cultural norms and insufficient enforcement mechanisms continue to hinder real change. Without targeted efforts to strengthen implementation, raise awareness and shift societal attitudes, the potential of these reforms to transform work-life balance and promote gender equality may remain largely unfulfilled.

### 3B. Formal and informal long-term care, especially in caring for older adults:

#### Long-Term Care (LTC) in Cyprus:

##### *National Legal Framework, Policies & Guidelines:*

As noted in the introduction, Cyprus is facing rising care needs, with the old-age dependency ratio expected to grow from 24.8% in 2019 to 65.5% by 2070. Life expectancy at age 65 is projected to reach 23.8 years for men and 26.3 for women, further increasing pressure on long-term care systems (EUROCARERS, 2023).

Cyprus has established several key legislative instruments to regulate **formal** long-term care (LTC) services throughout the years, particularly for elderly and disabled individuals. One of the foundational pieces of legislation is the **Homes for the Elderly and Disabled Persons Law 1991 (222/1991)**, along with its associated regulations. This law requires that any facility hosting more than five individuals requiring care due to age or disability must secure a registration certificate from the Deputy Ministry of Social Welfare. It also outlines specific standards regarding staff qualifications, facility conditions, and the overall quality of care (CYLAW, 1991).

Complementing this, is the **Adult Day Care Centre Law (1997) (38(I)/1997)** and its accompanying regulations, which govern the operation of adult day-care centers. These laws detail the necessary qualifications for staff, the standards facilities must meet, and requirements for proper maintenance. Similar to residential care homes, adult day-care centers are routinely inspected to ensure they meet legal and regulatory expectations (CYLAW, 1997).

Although there is currently no dedicated legislation for home care services, specific **Terms and Conditions for Home Care Services** have been issued. These function as de facto regulations, setting registration procedures, care standards and qualifications for staff offering home-based care. These provisions aim to ensure a consistent level of quality and professionalism in informal or semi-formal care settings (Social Welfare Services, 2024).

In addition, a draft law introduced in January 2024 aimed to regulate community and home nursing services by establishing licensing requirements for companies and organisations providing these services. This proposed legislation seeks to ensure quality and oversight in home-based care, which is

particularly relevant for informal caregivers. However, as of early 2025, this bill has faced delays due to stakeholder disagreements and has not yet been enacted (En. Philenews, 2024).

Cyprus also implements a number of social policy measures to support **formal long-term care**, with the ***Guaranteed Minimum Income (GMI) Scheme*** being the most notable. Introduced in 2014 and revised in the following years (2015, 2016), this scheme offers: financial support to eligible individuals and households, including subsidies for a range of long-term social care services such as home care, day care, residential care including personal care, shopping assistance and transportation to medical appointments. While eligibility is primarily income-based, exceptions are made for individuals with severe disabilities, allowing broader access to support (EUROCARERS, 2023).

In addition, the **State Aid Scheme under the Recovery and Resilience Plan (2021–2026)** plays a strategic role in expanding and improving the care infrastructure of the country. This initiative provides state aid to support eligible projects led by local authorities and NGOs aimed at establishing or upgrading care centers. Specifically, the aim of the Scheme is to support the creation of new social care facilities or the enhancement and expansion of existing ones by increasing capacity and staff. This effort seeks to strengthen the welfare system and promote social inclusion and well-being. Specifically, it focuses on establishing or upgrading 24-hour care centres for individuals requiring long-term care, including small, community-based housing units. The predominant goal is to bridge existing gaps in the availability and accessibility of long-term care services, whilst responding to the growing demand driven by demographic changes, strengthen the provision of LTC services, in light of increasing old-age dependency ratios (Information Portal for Funding Programmes, 2023; UN Women, 2024).

#### *Existing policies in accordance with Work-Life Balance for parents and carers:*

The **National Strategy on Gender Equality 2024–2026**, developed by the Office of the Commissioner for Gender Equality in collaboration with Ministries and key stakeholders, is the result of wide public consultation and aligns with national, EU and international commitments. It builds on lessons from the previous National Action Plan and adopts a holistic, cross-sectoral approach to gender mainstreaming. A key priority is achieving gender balance in leadership and political participation, supported by actions such as empowering women in politics, creating a digital databank of women in leadership, integrating gender in state budgets, tackling the gender pay gap and **expanding care services to support work-life balance**; thus supporting a better balance between work and family life. The Strategy also strengthens efforts to prevent and address gender-based violence, through targeted training, better data collection, and support for women facing multiple forms of discrimination (UN Women, 2024).

Focusing specifically on Work-Life Balance, the most recent enacted legislation in Cyprus addressing **informal care** is the **Leave (Paternity, Parental, Carer, Force Majeure) and Flexible Work Arrangements for Work-Life Balance Law of 2022 (Law 216(I)/2022)**. This law transposes the EU Work-Life Balance Directive (Directive (EU) 2019/1158) into national legislation, introducing provisions for carers' leave and flexible working arrangements for caregivers, as already explained. It was also introduced to enhance work-life balance for working parents and caregivers (Neo Law, 2023).



The legislation came into effect in Cyprus in 2022; It includes parental leave allowances, the right to carers' leave, the right to take time off for reasons of force majeure and the ability for working parents and caregivers to request flexible working arrangements.

Specific reference is included in the following:

- **Carers' Leave:** Employees who provide personal care or support to either (a) a relative or (b) a person living in the same household who requires significant care due to a serious medical condition are entitled to five (5) unpaid working days of carers' leave per year. To request this leave, employees need to submit an appropriate medical certificate to their employer [For the purposes of the law, a "relative" includes a child, parent, spouse or civil partner. Carers' leave may be taken either in full or in separate intervals].
- **Flexible Working Arrangements for Working Parents and Carers:** (All working parents with a child up to 15 years old) and all carers have the right to request flexible working arrangements for caregiving purposes. To be eligible, an employee must have completed at least six (6) months of continuous employment with the same employer [Employers have the discretion to postpone or deny such requests based on operational needs] (Department of Labour Relations, 2023).

Therefore, while Law 216(I)/2022 currently stands as the most recent formal **legislation** concerning **informal care (with partial but certain inclusion of reference to working arrangements)**, the rest of the aforementioned legislations, legal frameworks, policies and guidelines, cover only formal care. The Law 216(I)/2022, may also reveal (future) efforts to first-identify and recognise informal care and to further structure and support informal caregiving in Cyprus.

## Availability and limitations of existing formal long-term care services:

### *Long Term Care System*

The current LTC system in Cyprus is divided between **health care** and **social care** sectors. The Ministry of Health (MoH) oversees long-term health care, which is primarily delivered through community nursing and focuses on home-based services for individuals with chronic illnesses or disabilities (eg. offering home visits to care-dependent individuals, providing services such as information on state and community benefits and available services). The Ministry of Labour, Welfare, and Social Insurance is responsible for long-term social care, operating mainly through the Guaranteed Minimum Income (GMI) scheme and various programmes supporting individuals with disabilities (EUROCARERS, 2023).

As aforementioned, the Guaranteed Minimum Income (GMI) scheme offers some financial assistance for social care needs, including home and personal care. However, eligibility is generally restricted to GMI recipients, with few provisions specifically targeting informal caregivers. Notably, there are no dedicated carer's allowances or tax incentives to compensate for lost wages or expenses incurred due to caregiving responsibilities (EUROCARERS, 2023).

A significant reform, the General Healthcare System of Cyprus (GeSY = Geniko Systima Ygeias) launched in 2020, aimed to enhance access to health services, lower out-of-pocket costs and provide comprehensive care, including home-based, rehabilitation and palliative care for vulnerable groups. While the NHS was expected to benefit LTC recipients, further progress seems still to be needed in areas such as rehabilitation, palliative care and residential services (EUROCARERS, 2023).



### *Limitations of the formal Long-Term Care System*

The Long-Term Care system seems to be fragmented due to the split between the Ministry of Health and the Ministry of Labour, Welfare, and Social Insurance, that further complicates the development of cohesive policies. In addition, Cyprus lacks a formal quality framework for LTC services, with existing regulations primarily addressing aspects of residential care, such as room size and sanitation requirements. Care services are delivered by a mix of public agencies, local authorities, NGOs and private providers. Available services include home care, day care, respite care and residential care.

This division results the LTC relying heavily on informal care due to limited state-funded services, despite efforts such as the 2020 National Health System reform to improve access to rehabilitation, palliative care and home-based support (EUROCARERS, 2023). Informal care covers all aspects that should have been provided by formal care and serves as the main alternative care mechanism in the country.

### *Alternative existing care mechanisms:*

#### *Informal care services*

Regarding the Informal carers, it is evident that, there are no specific standards or guidelines focusing on the quality of informal care or the well-being of informal caregivers. The long-term care system of the country seems in failing to recognise informal caregivers, leading to a lack of integrated care pathways and a cohesive strategy for supporting them (EUROCARERS, 2023).

Therefore, informal caregivers play a definite role as the primary support system for long-term care (LTC) of older adults, helping many to continue living at home. They provide care for individuals with whom they have a personal connection, such as a family member, friend or neighbour. Their support mainly involves assisting with personal tasks, including activities of daily living (ADLs) like bathing, dressing, mobility, eating, toileting and continence. Additionally, they help with instrumental ADLs, such as housekeeping, laundry, meal preparation, medication management, shopping, handling finances, transportation and using communication devices (World Health Organization, 2024).

As a result, informal care; mostly provided by family members, neighbours, and migrant domestic workers; remains the dominant form of LTC. This is due to cultural expectations and the limited availability of comprehensive, state-funded care services, as already stated. While financial benefits are available to informal caregivers or to offset the cost of hiring domestic help, the state's reliance on informal arrangements highlights the insufficient development of formal LTC infrastructure (EUROCARERS, 2023).

### *Main challenges of informal care*

In Cyprus, while informal carers play a crucial and definite role in the Long-Term care landscape of Cyprus, the current legal and policy frameworks offer limited support and recognition due the overall support and focus on formal care.

Despite their importance, the main challenges identified include the:

- **Lack of Formal Recognition:** Cyprus currently does not have specific policies that formally recognise or support informal caregivers.
- **Coordination of Care:** There is a need for improved coordination within the LTC sector to ensure continuity and quality of care, including specific guidelines on the quality of care provided for informal carers. (EUROCARERS, 2023).

In December 2022, the Council of the European Union issued a recommendation on ensuring affordable, high-quality long-term care, calling on member states to improve access to quality LTC services and caregiver support. This includes strengthening social protection and addressing the challenges faced by **both formal and informal caregivers** (AGE Platform Europe, 2024).

As of early 2025, Cyprus has submitted its **National Long-Term Care report**, showing measures taken to implement the **European Care Strategy** (European Commission, 2022), where elements included reflect both formal and informal caregiving. However, the report indicates that Cyprus still lacks a strategic approach to fully address the challenges faced by informal caregivers (EUROCARERS, 2023).

In the EU, in 2016, more than half (52%) of households reported unmet needs for professional home-based services, primarily due to financial constraints. In Cyprus, where most long-term care services are not publicly funded and must be paid for by users, a significant number of households reported being unable to access these services due to cost. The lack of formal recognition of informal carers further exacerbates their economic burden (EIGE, 2020).

Therefore, it is evident that, while informal care, primarily provided by family members or migrant domestic workers, constitutes the backbone of the LTC system, comprehensive policies to support these caregivers are lacking.

## Data on the gender care gap

### *Informal Caregiving and Employment Impact*

On an EU level, it is observed that, on average, women dedicate more hours to unpaid tasks such as childcare and housework, which reduces their availability for paid employment. Data from 2022 shows that nearly 28% of women work part-time, compared to just 8% of men. When combining both paid and unpaid work, women end up working more hours per week than men overall women (European Parliament, 2020).

Despite higher education attainment being more common among women in the EU, their participation in the labour market remains lower than that of men. Women are significantly more likely to take career breaks; in 2018, one in three employed women paused their work due to childcare responsibilities, while this was true for only 1.3% of men. As a result, care duties and family obligations often influence the professional decisions and career trajectories of women (European Parliament, 2020).

While official statistics on informal carers are limited for Cyprus, research indicates that women are the primary providers of informal long-term care. The presence of household with dependent members or members with disabilities or chronic illnesses has a statistically significant negative effect on female employment. Conversely, the availability of live-in domestic workers positively influences women's participation in the labour market (EUROCARERS, 2023).

Although women made up 60.9% of the labour force in 2022, they still earned 10.2% less per hour than men. This wage gap persists despite 54.8% of women aged 25-64 holding tertiary education degrees and 42.7% being employed in highly skilled occupations. Furthermore, 15.1% of women were at risk of poverty in the same year (CBN, 2024).

In Cyprus, informal caregiving responsibilities are predominantly shouldered by women, leading to significant disparities in employment opportunities, career development and overall social participation, as caregiving duties often limit their availability for full-time work and public life.

### *Employment and Caregiving Challenges:*

According to the **European Quality of Life Survey (EQLS) 2016** (Eurofound, 2018), over half of respondents in the EU reported difficulties in reconciling work and family life, with younger and mid-age women being particularly affected. In Cyprus, the trend aligns with broader EU findings, indicating that informal carers face increasing pressure in balancing employment and caregiving responsibilities (AGE Platform Europe, 2018).

Overall, based on EIGE, 2023 report on Work-Life Balance, it is stated that in the EU, nearly 80% of long-term care (LTC) is provided informally, with most caregivers being of working age, leading to work-life conflicts, reduced employment rates and financial strain, especially for women. Women disproportionately shoulder the most demanding caregiving tasks, with 41% providing primary personal and emotional care compared to 16% of men, highlighting persistent gender imbalances in caregiving responsibilities (EIGE, 2023).

Cyprus continues to report one of the highest shares of women involved in unpaid care and educational activities across the EU; In 2022, 41% of women and 28% of men in Cyprus provided daily care or education to children, grandchildren, older adults, or individuals with disabilities (EIGE, 2024a). This placed Cypriot women fifth among their EU counterparts. Despite this, the gender gap in care and education, at 13 percentage points, remains 4 points above the EU average; though it has decreased by half compared to 2007 (EIGE, 2024a).

These findings underscore the enduring gender disparities in caregiving and employment, highlighting the urgent need for comprehensive and stricter policy interventions in Cyprus to promote work-life balance, in alignment with the Work-Life Balance Directive, to address the unequal distribution of unpaid care, and support women's full participation in the labour market. It is worth noting that progress may not still be visible as the *Leave (Paternity, Parental, Carer, Force Majeure)* and Flexible Work Arrangements for Work-Life Balance Law of 2022 (Law 216(I)/2022) started to be implemented in 2022.

### 3C. Facts & figures on gender stereotypes and the gender care:

#### EU level:

Theoretical insights into gender differences in caregiving, are often grounded in frameworks such as gender-role socialisation, gender-role expectations, labour market segregation, and household labour dynamics. Based on these theories, women are expected to take on more caregiving responsibilities than men, spend more time providing care and are less likely to institutionalise ailing relatives. Findings indicate that women are more susceptible to caregiver burden and depression, largely due to their greater exposure to time-intensive, hands-on caregiving and household responsibilities

In the EU, approximately 52 million people provide informal long-term care (LTC), with informal caregivers making up nearly 80% of all long-term carers. According to the survey of EIGE, about one in five women (22%) and men (21%) provide informal LTC. A significant proportion of these caregivers, 42% of women and 38% of men, offer care on a daily basis (EIGE, 2023).

A significant number of informal LTC providers in the EU are below retirement age, highlighting potential work-life conflicts and the challenge of balancing caregiving with childcare responsibilities. Employment rates among LTC caregivers are lower, with many, particularly women, working part-time. Caregiving responsibilities have a significant impact on work-life balance, often leading to reduced working hours, limited career advancement and financial challenges (EIGE, 2023).

Most informal caregivers are of working age, with 73% of women and 75% of men being under 54 years old. This can create challenges in maintaining a healthy work-life balance, particularly for those managing multiple caregiving responsibilities. Some caregivers not only provide LTC but also care for their own children under 12. In the EU, 27% of women and 31% of men who provide LTC also have childcare duties, further complicating their ability to balance caregiving with other aspects of life. When examining how LTC responsibilities are shared within partnerships, women disproportionately take on the majority of caregiving tasks. Around 41% of women bear primary responsibility for the most demanding personal and emotional care, compared to 16% of men. These findings may highlight the persistent gender imbalance in caregiving duties within households (EIGE, 2023).

Care responsibilities often demand substantial time and energy, making it challenging for carers to remain in employment or progress professionally. This imbalance also affects access to leisure and social activities, with women disproportionately impacted, as they are more frequently responsible for family and caregiving duties.

Caregiving also significantly affects the physical and mental wellbeing of carers, who frequently experience chronic stress and tend to neglect their own health (Young et al., 2020). The European Commission highlights those inequalities, whether in family dynamics, work life balance, or exposure to violence and hate, contribute to poor mental health. As such, promoting equality is essential to improving mental wellbeing. The Commission further advocates for a holistic approach that addresses health determinants and embeds mental health considerations across key policy areas, including employment, social protection, and work-life balance (EIGE, 2024b).



National level:

At the national level, references to women as caregivers, consistently point to the same conclusion: caregiving remains culturally perceived as a predominantly female responsibility in Cypriot society. Despite progress in employment, income, and access to education, the prevailing social understanding of gender and care has remained largely unchanged (EIGE, 2024a).

In the context of Cyprus, the family caregiver role is predominantly assigned to women, influenced by socio-cultural norms that frame caregiving as a moral and filial duty, especially for wives and daughters, rather than a voluntary act. Moreover, institutionalising a relative continues to carry a significant stigma in Cypriot society. This stigma is often tied to perceptions of failure in fulfilling traditional nurturing roles or feelings of guilt, particularly among women, associated with relinquishing care to formal institutions (Papastavrou et al., 2009).

In Cyprus, the majority of informal carers for older persons and/or individuals with disabilities are women, accounting for 71% of caregivers. Among those providing care several days a week or daily, 15% are women and 7% are men. While women’s involvement in such caregiving aligns with the EU average, men’s participation is 3 percentage points lower. Within the 50-64 age group, 17% of women and 11% of men provide informal care, whereas in the 20-49 age group, the figures are 17% for women and only 4% for men (EIGE, 2019).

Employment among women informal carers is significantly lower than that of men. Only 34% of women combining caregiving with work are employed, compared to 60% of men. This gender gap is more pronounced in Cyprus than in the EU overall, 26 percentage points versus the EU average of 14 points. In the 50–64 age group, just 21% of women informal carers are employed, compared to 62% of men. Additionally, nearly half of the population in Cyprus, 47% of women and 46% of men, report unmet needs for professional home care services (EIGE, 2019).

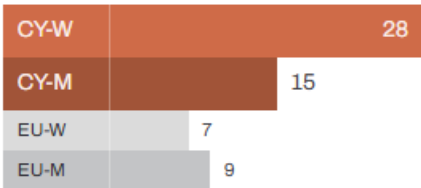
Focusing on the 2024 Gender Equality Index and examining specific domains (eg. time domain), the data reveal a significant gap between men and women that may be strongly influenced by the normalised informal care responsibilities disproportionately assumed by women due to rooted gender roles. All data recorded, show the percentage difference in all categories being over 20%, with women having a higher percentage of caring responsibilities (EIGE, 2024a).



Care activities

People caring for and educating their children or grandchildren, elderly or people with disabilities, every day (% , 18-74 population) ⓘ

Single



Lone parent



Couple without children



Couple with children



These are also reflected in the data of employment and flexible working arrangements, settled to an achievable work-life balance and the effect on part time employment; Approximately 76% of women and 74% of men in Cyprus report being unable to modify their working-time arrangements. Compared to the EU average (where 57% of women and 54% of men lack control over their working schedules). Cyprus demonstrates significantly more limited access to flexible work options. This issue is especially pronounced in the public sector, where 98% of women and 93% of men have no say in their working hours. The situation is similarly restrictive in the private sector, with 72% of women and 70% of men lacking access to flexible working arrangements (EIGE, 2019).

Additionally, part-time employment is more common among women in Cyprus. In 2017, 22% of women and 20% of men working part-time moved into full-time positions. This gender gap in transition rates is narrower than the EU average, where 14% of women and 28% of men made the shift from part-time to full-time employment (EIGE, 2019).

These findings highlight how the unequal distribution of informal care responsibilities, combined with limited flexibility in work arrangements, contributes to persistent gender gaps in employment outcomes and work-life balance in Cyprus.

There is a clear indication and understanding that, in accordance with the data presented, the greater availability of formal care services reduces the reliance on families to support relatives with disabilities. However, due to persistent gender stereotypes, caregiving responsibilities within families are still predominantly assumed by women, and in some cases, even by young girls. This dependence on informal care restricts women's opportunities in other areas of life, including education, employment and personal development with a greater exposure to psychological and emotional impact EIGE. (2020).

The data extracted from both the National and EU level, further support and align with the aforementioned information presented on an EU level; The data reveal that gender stereotypes continue to shape the distribution of informal long-term care, reinforcing the traditional expectation that women are the primary caregivers within families. The intensity and emotional burden of care remain heavily skewed towards women, who are more likely to assume daily and primary caregiving roles. This imbalance extends into the labour market, as women are more likely to work part-time and face limited flexibility in adjusting their working hours. This uneven distribution reflects entrenched gender norms that associate caregiving with femininity and domestic responsibility, which in turn impact the workforce participation of women. In accordance with the aforementioned information, it could be understood that many female caregivers reduce their working hours, accept lower-paying or part-time jobs, or interrupt their careers altogether to manage care responsibilities. These patterns may underscore how persistent gender stereotypes affect individual choices and also sustain structural inequalities in both the labour market and the provision of care.

### 3D. Good practices, tools and resources

#### Promoting work-life balance, flexible work arrangements and family-friendly practices

Cyprus, on a governmental level, has taken targeted actions to reduce the **gender pay gap**, ranging from strengthening the enforcement of the principle of equal pay for equal work or work of equal value, to addressing deeply embedded gender stereotypes around traditional roles.

Recognising both the importance of robust enforcement mechanisms and the barriers victims face in reporting pay discrimination, the Republic of Cyprus has continued to enhance **ex officio inspections**. These inspections request data to detect direct pay discrimination and serve to inform both employers and employees about the relevant legal provisions, complaint procedures, and provide practical guidance for compliance. Since 2022, inspections have been carried out under the equal pay legislation, focusing on economic sectors with the highest gender pay gaps, identified through risk-based assessments. Following each inspection, adapted recommendations are issued to employers. These may include corrective actions related to recruitment processes, pay structures and promotion policies, such as improving the gender balance within roles and ensuring equal representation at senior management levels.

Also, ensuring adequate wage replacement during parental or caregiving leave is vital to maintaining women's employability and encouraging greater involvement of men in caregiving roles; both essential to promoting gender equality.

To support a more balanced sharing of care responsibilities and protect women's participation in the workforce, a **new legislative framework was adopted in 2022** (as identified in section 3A). Additionally, **carer's leave** was introduced for the **first time**, alongside **flexible working arrangements** for working parents and caregivers (UN Women, 2024).

#### Addressing the gender divide in long-term care and/or support long-term carers' needs and employment

To promote a fairer division of care duties and support women's employment, Cyprus introduced a new legal framework aligned with **Directive 2019/1158**, as already presented. Since December 2022, each working parent is entitled to 18 weeks of parental leave per child, with 8 weeks covered by a parental leave allowance.

Employees also receive insurance credits for **carers' leave** (5 days) and force majeure leave (7 days). These periods are considered working time under annual leave legislation.

Protections against dismissal now extend to periods of paternity and carers' leave and these absences are included in employment duration calculations. In May 2024, the law was further amended to extend parental leave benefits to self-employed parents, ensuring income support during care periods.





Maternity benefit coverage was also expanded:

- From 18 to 22 weeks for a first or second birth, adoption, or surrogacy
- To 26 weeks for a third or subsequent child
- Plus up to 8 extra weeks if the newborn is hospitalised beyond 63 days (UN Women, 2024).

As mentioned above, **flexible working hours and remote working** are also being implemented; allowing (potential) caregivers to work remotely and have flexible hours helps them manage both their professional and caregiving responsibilities. While some public and private sector companies in Cyprus have started to offer telecommuting options and flexible work schedules, these practices are not yet widespread-especially in the public sector (Eurofound, 2022).

## Addressing existing issues in formal long-term care services, especially in caring for older adults

**Community Nursing Services**, deliver long term care in Cyprus and are overseen by the Ministry of Health (MoH). These services focus on providing home-based care to individuals with chronic health conditions, disabilities and the elderly; particularly those who are disabled.

Families with dependent members can access a range of services through the network of General Community Nurses and Mental Health Community Nurses. These professionals conduct home visits to patients with mental illness, individuals with disabilities, those on artificial ventilation and elderly persons living alone with serious health issues. Key services, which also support the mental and physical well-being of informal carers, include:

- Direct care for individuals who are ill or disabled
- Specialised support for vulnerable populations
- Preventive measures to mitigate illness progression
- Psychological support for families experiencing acute stress (EUROCARERS, 2023).

The **Home Care Nursing Service** of the State Health Services Organisation (SHSO) offers care services to individuals and their families within their home environment, helping with recovery or alleviating symptoms of illness or disability. The service aims to support individuals with illness or disabilities by enhancing their activity levels, promoting independence, and encouraging self-care, with the goal of enabling individuals to remain at home through comprehensive, patient-centered, and accessible nursing care (SHSO, 2025).

The **Cyprus Third Age Observatory** advocates for the rights of older adults, monitors ageing policies, and promotes research on long-term care (LTC). This initiative plays a crucial role in supporting evidence-based policy development and ensuring that older adults have a voice in shaping services that directly affect their lives. By focusing on these areas, the Observatory helps to enhance the quality of care and promote the well-being of the ageing population in Cyprus (CTAO, 2025).

**Help at home**, offered by Kato Polemidia Community Volunteer Council, a non-profit organisation which carries out social welfare initiatives within the jurisdiction of the Kato Polemidia Municipality. This programme targets older adults and individuals or families with disabilities who face temporary or permanent mental or physical health challenges and need help with daily tasks and responsibilities. Its main goal is to help them remain in familiar surroundings, maintain family cohesion, avoid

institutionalisation or social exclusion, ensure a dignified and healthy living environment, and improve their overall quality of life (elemesos.com, 2025).

The **Strovolos Centre for the Elderly**, operating since 1993, offers a daily programme of activities for retired residents of Strovolos, providing an opportunity for the elderly to engage in enjoyable and creative pursuits. The centre allows individuals to use their skills, socialise, and actively participate in society. Currently, 150 elderly individuals are registered as members of the Centre (Strovolos Municipality, 2025).

**Support for Informal Caregivers**, through Training Workshops for Caregivers of People with Alzheimer's and Other Types of Dementia, offered by the Department of Nursing at the Cyprus University of Technology (CUT), provides essential training workshops, psychological support, and respite services to family caregivers. This initiative acknowledges the vital role of informal caregivers and aims to reduce caregiver burnout while enhancing the overall quality of care provided. By providing these resources, the programme supports caregivers in managing the challenges they face and improves the care environment for individuals with dementia (EOC, 2024).

## Combating stereotypes and social norms that perpetuate the gender divide in caring responsibilities

One of the main challenges to promoting gender equality in Cyprus remains the persistence of gender stereotypes, attitudes, behaviours and social prejudices. This is a continuous effort with ongoing practices. To address these issues, the Government is committed to continuing efforts such as:

- Monitoring and recognising best practices that promote gender equality;
- Raising public awareness on women's rights;
- Conducting research on the portrayal of women in mass media and advertising and drafting recommendations to combat sexism;
- Educating and training media professionals, including establishing an annual award for journalists who promote a culture of equality;
- Promoting gender equality through creative initiatives targeting children (UN Women, 2024).

Trainings and awareness raising campaigns are also executed within the framework of violence and harassment in the workplace; To address sexual harassment in the workplace, the Gender Equality Committee in Employment and Vocational Training (GEC) launched a public awareness campaign that includes informational posters and the publication of a guide outlining clear protocols for preventing and handling such incidents. The Cyprus Academy of Public Administration (CAPA), under PAPD, leads public service training and, in collaboration with key institutions and NGOs, has delivered targeted programmes over the past years to promote gender equality, including legal training on workplace harassment and the implementation of the public service Code of Practice (UN Women, 2024). No specific examples or targeted actions have been identified in relation to addressing the gender divide in caring responsibilities (EIGE, 2022; EUROCARERS, 2023).

In conclusion, while Cyprus has taken important steps towards gender equality, progress remains insufficient in addressing the gender divide in caregiving responsibilities. Despite the introduction of relevant legal frameworks and ongoing public awareness campaigns, no specific actions or best

practices have been identified to directly tackle the gendered nature of caregiving roles. This highlights the need for more focused and targeted efforts to achieve a fairer distribution of caregiving responsibilities and further advance gender equality in Cyprus.

## 4. SUMMARY ANALYSIS OF THE CO-CREATION WORKSHOPS

### Key findings from workshops

#### Overview of workshops:

All workshops were conducted between **late March 2025 and mid-April 2025** and they lasted for two hours each approximately. All three workshops were conducted in Nicosia; The workshop with employers, managers, human resources, personnel and HR specialists, organised by CCCI, was conducted in CCCI's offices in Nicosia on the 20<sup>th</sup> of March 2024. The two workshops with men and women who (may) provide informal care, organised by CSI, were conducted in CSI's offices in Nicosia; the first workshop was organised on the 21<sup>st</sup> of March 2025 and the second one on the 14<sup>th</sup> of April 2025.

The workshop with employers, managers, human resources, personnel and HR specialists, hosted a total of 10 participants; where 7 participants were men and 3 women. Participants represented a variation of backgrounds; two participants represented elder's care house, one participant was a lawyer, five participants were HR managers and two participants were Regional Managers.

The first workshop with men and women who (may) provide informal care, hosted a total of 3 participants with all 3 being women. The second workshop with men and women who (may) provide informal care, hosted a total of 8 participants with all 8 being women. All participants were employed working as: Teachers, Environmental Officers, Researchers, Project Managers, Senior Project Managers, Directors of R&D and Head of community and Impact.

#### Workshop with employers, managers, human resources, personnel and HR specialists

The workshop with employers, managers, HR personnel and specialists was insightful and productive, marked by distinct group dynamics that influenced the flow of discussion and levels of participation. Some participants engaged actively, while others were more reserved, prompting a varied exchange of perspectives. The introductory material presented sparked several thoughtful questions, indicating a genuine interest in the topic and a need for further clarification in certain areas. Overall, the workshop highlighted diverse experiences, understandings within the group, as well as common knowledge and awareness in regards to specific policies, contributing to a richer dialogue around informal care and workplace policies.

#### Workplace

During the discussion, it became evident that there was clear lack of awareness among participants regarding existing legal provisions in Cyprus; specifically the law that allows employees to take up to five days of unpaid leave annually to provide long-term care. Additionally, the conversation explored new ways and practices that could support employers in offering incentives and implementing flexible

working conditions for employees with unpaid caring responsibilities. Notably, most participants were unfamiliar with the EU Work-Life Balance Directive and the gender gap in long-term care, highlighting the need for greater dissemination of relevant information and guidance within workplaces.

### *Informal Long-term Care & Gender Care Gap*

An important point raised during the discussion was the deeply rooted assumption, especially among women, that their daughters will be the ones to care for them as they age. This expectation, frequently observed in the community, was central to the conversation on the gender gap in long-term care. To address such inequalities, participants suggested engaging with key stakeholders, such as the Commissioner for Gender Equality, to explore ways to promote gender equality and incentivise the implementation of the Work-Life Balance Directive. One proposed approach was the introduction of tax reliefs for companies that support a healthier work-life balance. Additionally, providing more opportunities for remote work and flexible hours was highlighted as a practical measure to better support employees, particularly those managing unpaid care responsibilities alongside their professional roles. There is a pressing need to invest in the training and support of informal caregivers, the majority of whom are women. Equipping caregivers with essential skills, such as first aid, basic elder care techniques and access to reliable information, would enable them to provide safer and more effective care. Moreover, establishing a dedicated psychological support line for caregivers was identified as a vital measure to address the emotional burden and stress that often accompany long-term caregiving. These steps are crucial not only for improving the quality of care but also for addressing the gendered nature of informal caregiving and promoting a more equitable distribution of care responsibilities.

In conclusion, the workshop provided valuable insights into the challenges and opportunities related to informal care, workplace policies, and the gender care gap. The varied dynamics within the group fostered meaningful discussions, revealing both existing knowledge and areas where further awareness is needed.

During workshop 1, a variety of thought-provoking points were raised, shedding light on key challenges and potential solutions for improving support systems for employees, particularly long-term caregivers. Among the most striking revelations were the widespread lack of awareness about existing laws, such as the 5-day unpaid leave for long-term carers, and the subtle but pervasive gender gap in caregiving responsibilities. From the ingrained cultural expectation that daughters will naturally care for aging parents (as it was explicitly mentioned: *“Why else did I give birth to a girl?”*), to the underutilisation of the Work-Life Balance Directive, the conversation brought to the forefront the urgent need for systemic change.

While participants demonstrated a solid understanding of certain legal provisions, such as the unpaid leave policy for caregivers, there was a clear gap in knowledge regarding broader initiatives like the EU Work-Life Balance Directive. This underscored the importance of increasing awareness and guidance within workplaces. The conversation around informal long-term care highlighted the deeply ingrained gender expectations, particularly the assumption that women will provide care for elderly family members.

To address these disparities, participants emphasised the need for policy reforms, such as tax reliefs and flexible work options, as well as investment in caregiver training and psychological support. Overall, the workshop emphasised the necessity for a more equitable approach to caregiving, one that provides

adequate support for caregivers and promotes gender equality in the distribution of care responsibilities.

## Workshops with men and women who (may) provide informal care

The workshops with individuals who (may) provide informal care were engaging and impactful, with strong group dynamics and consistently high levels of participation. Participants contributed to a respectful, non-judgemental atmosphere, marked by active listening, openness and balanced participation across all group members. Discussions were both rich and deeply personal, often delving into emotional caregiving experiences that fostered a sense of solidarity and trust. This supportive environment enabled participants to share freely and connect over shared challenges and insights related to informal care.

### *Background/Personal Experience*

All participants from the two workshops conducted with women on the thematic area of informal care, shared experiences from a family perspective; as observers, active members of informal care giving or active supporters of informal caregivers. All participants referred to being observers of family care givers, supporting their mothers who provided informal care to their grandparents or ill fathers or other close relatives in the past. One participant shared experiences that are ongoing; with her parents providing informal care to her grandparents. All 11 participants are currently employed and most of them were employed when they had to take the role of the informal carer or supporter of the informal carer. Four participants were still students when they either supported family members acting as caregivers or provided informal care themselves, in cases that was required. Most participants also expressed, that even if they did not consider themselves as active caregivers, it was certain that they had to assist their relatives who were the primary informal carers in order to ensure sufficient care the person in need; elderly or ill person.

Focusing on informal care practices related to long-term care and the services offered in their workplace, participants primarily referred to the annual leaves that all employees are available to take. No further information was shared, as they noted that they were not aware of anything else in regards to long-term care services provided by their employers.

When the discussion expanded to the obstacles they face in taking up leave or flexible work arrangements to accommodate caregiving responsibilities, participants highlighted broader social factors. They expressed a fear of sharing personal information with their employers, concerns about workplace stigma and the potential negative impact on their career progression or chances of promotion. Additionally, participants pointed to the possibility of lack of empathy from managers and CEOs regarding caregiving needs, that again could impact their career progress.

One participant, who holds a director-level position, shared the employer's perspective; noting the challenges of guaranteeing a set number of annual leave days in exceptional caregiving circumstances, alongside the difficulty of hiring temporary replacements to cover the absent employee's duties.

In conclusion, the statements show a lack of awareness about workplace support for informal caregiving, from the employees' perspective, alongside fears of stigma and career impact. From the employers' point of view, it is evident that, especially in the private sector, they could face challenges in managing extended leave, in regards to human capital. From both perspectives, there is clear

emphasis on the need for more supportive, flexible workplace policies and greater awareness to both employees and employers about these policies.

### *Informal Long-term Care*

When asked about the current situation of informal long-term care in Cyprus, all participants expressed a lack of awareness. As discussions evolved, they noted that providing informal long-term care is perceived as the "*normality*" in Cyprus, contributing to their limited awareness of any formal national framework. Participants emphasised that informal care is culturally expected; especially when it involves supporting elderly or ill relatives and described it as simply "*the way we grow up*."

In exploring the strengths and weaknesses of the current situation, participants identified the strong family ties and close-knit cultural values as a major strength. Practical factors, such as the short distances within Cyprus, were also seen as facilitating the ability to provide in home care. However, participants recognised that this cultural expectation, particularly the assumption that women will take on caregiving roles, can also be viewed as a weakness.

Among the key weaknesses identified were the lack of organised state support for formal care services, the heavy reliance on family-based informal care and the absence of awareness and practical guidance for informal carers on how to best support their families.

In regards of being aware of existing policies or regulations on (informal) long-term care in Cyprus, most of the participants responded that they were unaware, as it was not needed to be aware about them. Participants added that even if not aware about the national policies or regulations in regards to informal care, the regulations that they are aware about is the process they need to follow, via an agent, to hire domestic migrant workers to support families in providing informal care, due to the lack of strong state regulations of long term care. They have also commented that in any case, whilst again receiving support from formal care (eg. Ambulance call) the expenses are on a personal level for the ride, with no financial support from the state about such expenses in emergency situations

Regarding awareness of existing policies or regulations on (informal) long-term care in Cyprus, most participants stated they were unaware, as they felt there was no need to be informed about them, as they felt there was no need to be informed; mainly due to the cultural norms surrounding perceptions of informal care in the country. They added that even if they are not familiar with national policies or regulations on informal care, they are aware of the practical procedures on what consists of the process of hiring domestic migrant workers through agents to support families in providing informal care. This practice stems from the absence of robust state regulations on long-term care. Participants also noted that even when they receive support from formal care services (e.g. calling an ambulance), the costs are covered personally, with no financial assistance from the state for such emergency expenses.

Participants further reflected on their opinion if there is gender divide in long-term care, they referred to stereotypes being enforced to long term care, that result to women naturally having that role, thus, reflecting an overall gender divide in (informal) care services as well. Participants also referred to the idea that, as women have multiple roles, that one of them is being a mum, it is understood that they naturally carry the caring and more sensitive role, thus, being more capable in taking care of others who are in need. Expanding it further, participants also stated that on a structural level, having the

role of an informal carer, is not recognised on a structural level, as this is understood as a family focus matter and not an official employment; it is comprehended as mandatory. This is also backed up with culture and matters of remorse of the individual. There were also some interesting additions by some participants, stating that there are currently shifts in society and its perceptions, and it is observed that men are also taking care of people in need.

Participants further reflected on whether a gender divide exists in long-term care. They referred to embedded stereotypes that position women as naturally suited for caregiving roles, reinforcing the idea that informal care is predominantly a responsibility of the woman. This perception contributes to an overall gender divide in (informal) care services. Further comments reflected the perception that caring for a relative in need is considered a special kind of care; one that should be the responsibility of family members. However, the burden often falls on women within the family, due to the widespread belief that they are naturally more suited to caregiving roles. Participants also discussed how the multiple roles women are expected to fulfill, lead to the assumption that they inherently possess nurturing and sensitive traits-due to motherhood, making them more capable of caring for others in need.

Expanding on this, they pointed out that the role of an informal carer is not structurally recognised, as it is often seen as a private, family matter rather than formal employment. In this context, caregiving is perceived as a moral obligation and thus is not seen nor recognised as employment or something that you should be compensated for. Cultural expectations and feelings of personal remorse further reinforce this perception. Some participants, however, noted positive shifts in societal attitudes, observing that more men are now stepping into caregiving roles and challenging traditional gender norms.

Participants were unaware of how policies and legislation support and recognise the status of informal care, noting that such recognition is largely absent, shaped by cultural perceptions deeply rooted in traditional views of caregiving.

### **Gender Care Gap**

Regarding the Gender Care Gap, participants stated they were unfamiliar with the term and its meaning. They also noted a lack of awareness about what informal long-term care entails; some even expressed that they might not recognise it as a defined role. This is largely because both the role and the gender care gap are taken for granted and perceived as predetermined based on one's gender. As the discussion progressed, participants emphasised that it should be the responsibility of both the government and employers to understand these terms and related practices. Being informed themselves would enable them to raise awareness among employees. All participants identified this lack of awareness, both terminology and the relevant Directive, as part of a broader structural and governmental issue.

In discussing the identification of needs and challenges related to the gender care gap, participants highlighted both economic and psychological factors. Several also referred to a broader lack of systemic support for the personal development and advancement of women, who are often assigned multiple roles, including that of caregiver, and are expected to prioritise these roles accordingly. When exploring the theme of valuable support mechanisms, all participants explicitly acknowledged the importance of being aware of the relevant EU Directive and the national legal framework that supports-or should align with-it, considering this awareness a necessary first step. The need for



psychological support was also clearly mentioned; Psychological support was highlighted as a major need for support. Overall, a general awareness of related procedures as practical forms of assistance was identified a main need for support. Many also noted a broadly humane and empathetic attitude within workplaces, particularly in the private sector, where employee needs are often assessed on a case-by-case basis. Reflecting on the support offered within their employment contexts, participants cited flexible working hours, remote work options.

Interestingly, some participants emphasised that employers themselves may require support, especially when accommodating caregiving responsibilities among staff. Examples included ensuring job retention through part-time arrangements, allowing positions to remain active while employees fulfil caregiving duties. Overall, a personalised, human-centered approach was recognised as a key form of support, highlighting the importance of acknowledging individual circumstances.

Regarding the impact of the gender care gap on the employment and social lives of carers, some participants highlighted the existence of gender-based discrimination in these sectors; Women are often perceived as the default caregivers, a stereotype that significantly affects both their professional and personal/social lives. In terms of employment, participants noted that caregiving responsibilities have a considerable impact on a woman's career trajectory, negatively affecting and delaying opportunities for promotion and professional growth. Socially, women are frequently unable to attend events or must leave early due to caregiving duties, limiting their social engagement. Participants described a broader snowballing effect: increased informal care responsibilities lead to reduced employment opportunities, which in turn affect women's economic stability. This economic impact further limits social participation and can further contribute to psychological strain and diminished overall well-being.

A final reference to this thematic area focused on how the care of older adults is perceived and practiced in Cyprus. All participants emphasised the role of gender stereotypes, traditional gender roles and community values in shaping expectations around caregiving. They reflected on the widespread assumption that *"the women of the family"* are automatically responsible for providing informal care to elderly relatives; an obligation that is both unpaid and largely unrecognised, as it is culturally perceived as a natural, predetermined role.

Participants repeatedly used terms such as *"social expectation, gender stereotypes, guilt, obligation and commitment"* in their responses. They further noted that the reinforcement of these gendered expectations is exacerbated by the fragmented formal care system in Cyprus. With limited state support as well as the high cost of specialised eldercare/house cares/medical cares (e.g., €2,000 per month for a room), families often feel they have *"no choice"* but to rely on informal care, that is granted that will be provided by the women of the family.

### **National proposals:**

Participants proposed several recommendations that should be implemented at the national level to address the gender gap in informal long-term care. A key suggestion was to increase awareness of the Directive; starting from state institutions and extending to employers and employees. Participants stressed that employers, in particular, should first understand the relevant terminology, as well as national data and trends related to caregiving. They emphasised the importance of not only being

familiar with the Directive itself but also recognising its significance. Such awareness could help shift mindsets and promote the Directive's practical application in workplace policies.

At a broader level, participants recommended the development of an institutional framework that clearly defines informal carers and caregiving-related terms, to formally recognise informal care. On a practical level, they stressed the need for informal care to be acknowledged and compensated, with specific reference to the necessity of state funding. Overall, participants called for a widespread awareness campaign: to name, define and distribute knowledge around what constitutes informal care and who informal carers are.

Overall, the two workshops (with women participants) provided deep insights into the lived experiences, perceptions and challenges of individuals, predominantly women, who (may) provide informal long-term care in Cyprus. Participants highlighted a clear lack of awareness and structural recognition of informal care, both in national policy and workplace practices. Cultural expectations, gender stereotypes and the invisibility of caregiving as legitimate work were central themes throughout the discussions. Despite the emotional burden and career-related concerns voiced, participants also showed openness, solidarity and a willingness to propose meaningful changes. Their reflections underscore the urgent need for policy reforms, employer sensitisation, and public awareness campaigns that not only acknowledge the value of informal care but also promote gender equality, supportive work environments and more sustainable care systems across the country.

In conclusion, all workshops provided valuable insights into the challenges faced by informal caregivers in Cyprus, particularly women, who continue to bear the brunt of caregiving responsibilities. While participants across both groups demonstrated a willingness to engage and shared powerful personal insights, they also revealed significant gaps in awareness of rights, policies, and available support mechanisms. The discussions highlighted a lack of awareness about existing policies and support systems, as well as deeply rooted cultural and gender stereotypes that shape caregiving expectations. Despite these barriers, participants expressed a strong desire for change, advocating for more recognition of informal caregiving, improved workplace policies and better support systems. These conversations underscored the importance of raising awareness, reforming policies and creating a more supportive, gender-equal environment for caregivers in both the workplace and broader society.

## 5. CONCLUSIONS AND RECOMMENDATIONS

### Main conclusion reached through the desk and field research activities:

Both desk-based and field research data point to a significant gap between the policies in place and their practical implementation in Cyprus, particularly in the areas of caregiving responsibilities, informal care and the gendered nature of caregiving roles.

Despite notable advancements in legislation, such as the introduction of the Work-Life Balance Directive and Law 216(I)/2022, which aim to provide better support for caregivers, these efforts have not yet resulted in meaningful changes on the ground, especially for women. While laws such as the 5-day unpaid leave for long-term caregivers exist, there is widespread lack of awareness about these provisions, which undermines their practical use and limits the effectiveness of the legal framework designed to promote work-life balance.

Cultural norms and deeply entrenched gender stereotypes continue to play a significant role in shaping caregiving responsibilities. In Cyprus, women are overwhelmingly expected to shoulder the majority of informal caregiving duties, which reinforces a gendered division of labor. This arrangement restricts the ability of women to fully participate in the formal workforce and also exacerbates gender inequalities. Caregiving responsibilities often result in women working reduced hours, accepting lower-paying or part-time jobs, or even interrupting their careers altogether. These systemic issues are further compounded by the limited availability of state-funded care services and the insufficient enforcement of existing laws, leaving informal care—often provided by family members or migrant domestic workers—as the primary mechanism of care.

The primary research results revealed a strong desire for change among participants, who expressed a clear call for more comprehensive policy reforms and greater sensitisation of employers. There was a collective emphasis on the need to increase public awareness of caregiving issues and the existing legal frameworks designed to support caregivers.

The findings underscore the urgent need for targeted policy interventions that recognise and support informal caregiving and also address the deeply gendered nature of caregiving roles. These roles continue to disproportionately affect women, limiting their opportunities in the labour market and perpetuating gender inequalities in both the workforce and within caregiving systems. The insights from the field research highlight the necessity for systemic changes that will ensure a more equitable distribution of caregiving responsibilities, promoting not only gender equality but also the full participation of women in the workforce.

In conclusion, both the desk-based and field research clearly demonstrate that, while progress has been made at the legislative level, practical implementation remains limited and gender inequalities in caregiving persist. The combination of inadequate enforcement, lack of awareness and persistent gender stereotypes hinders the effective application of existing frameworks. Unless these structural and cultural barriers are addressed, caregiving will remain an invisible and unevenly distributed

responsibility, primarily borne by women. There is an urgent need to bridge the gap between policy and practice, ensuring that legislative efforts translate into real support for caregivers and meaningful advancement toward gender equality in Cyprus.

## Needs assessment, issues and gaps identified

### Needs Assessment

The research reveals a critical need for Cyprus to bridge the gap between existing legal frameworks and the actual lived experiences of informal caregivers, especially women. Despite the introduction of laws aimed at improving work-life balance and supporting caregivers (e.g. Law 216(I)/2022), awareness and implementation remain low. There is a clear demand for more targeted and inclusive policy measures that address the realities of informal care, which is largely shaped by cultural norms and gender expectations.

The findings demonstrate a strong need for:

- **Awareness-raising initiatives** on legal entitlements, available support mechanisms and the importance of work-life balance.
- **Improved enforcement and monitoring mechanisms** to ensure existing laws are effectively applied.
- **Support structures for informal caregivers**, such as psychological services, financial incentives, and caregiver training.
- **Workplace adaptations**, including further flexible working arrangements and employer and employee education on caregiving rights, allowances and benefits.
- **Cultural change initiatives** to address gender stereotypes that disproportionately assign caregiving responsibilities to women

### Issues and Gaps Identified

#### *Policy-Practice Disconnect*

Although legislative frameworks such as the EU Work-Life Balance Directive and Law 216(I)/2022 have been introduced to support caregivers, their practical implementation remains limited and inconsistent. In many cases, there is a lack of mechanisms to monitor compliance or ensure that these laws are effectively integrated into workplace and social service systems. This disconnect means that, caregivers continue to struggle with inadequate support and protection in their daily lives.

#### *Formal vs Informal Care Giving:*

The caregiving landscape in Cyprus is characterised by a fragmented system that inadequately bridges formal and informal care structures. While formal care services are limited in scope and accessibility, informal care, often provided by family members or migrant domestic workers, functions as the primary mode of long-term care. However, there is little to no coordination or integration between these two sectors. Informal caregivers are expected to perform complex care tasks without proper training, financial compensation, or institutional support. This lack of a cohesive framework leads to inefficiencies, duplicated responsibilities and gaps in service provision. Informal care remains largely invisible in national identity, policy, planning and data collection, which further limits the development of effective support mechanisms.

### *Insufficient State-Funded Care Services*

The public infrastructure for formal long-term care remains underdeveloped and underfunded. As a result, families and particularly women, are compelled to take on caregiving duties without sufficient external support. This places a disproportionate burden on informal caregivers and perpetuates reliance on unpaid or low-paid care work, often provided by family members or migrant domestic workers, in the absence of accessible and quality state-funded care options.

### *Limited Employer Sensitisation and Workplace Support*

Employers often lack knowledge and awareness of their responsibilities under new work-life balance policies. Consequently, workplaces may not offer flexible arrangements or actively support employees who have caregiving responsibilities. There is also limited institutional guidance for integrating caregiving-friendly policies into HR frameworks, resulting in uneven implementation and limited uptake of available entitlements among working caregivers.

### *Low Awareness of Rights and Support Measures*

A significant gap exists between the legal entitlements available to caregivers and their awareness or understanding of them. Many individuals are unaware of basic provisions or the broader scope of the EU directive. This lack of awareness reduces the effectiveness of these policies, as eligible individuals are not making use of the support that is technically available to them.

### *Lack of Recognition and Valuation of Informal Care*

Despite its critical role in the care system, informal caregiving remains largely invisible in policy terms. It is rarely acknowledged as a legitimate form of work or contribution to society. As a result, there are few financial incentives, formal recognition measures or institutional supports in place to validate or compensate caregivers, which can lead to social and economic marginalisation of those involved in long-term informal care.

### *Gendered Division of Care Responsibilities*

Caregiving in Cyprus is still largely seen as the responsibility of women, rooted in traditional family roles and social expectations. This entrenched gendered division of labour severely restricts women's opportunities in the workforce, leading to part-time employment, lower earnings, stalled career progression and in some cases, full withdrawal from the labour market. The perpetuation of these patterns reinforces broader gender inequalities in economic and social spheres.

### *Cultural and Societal Norms*

Deeply embedded cultural expectations continue to shape the caregiving landscape. There is a prevailing belief that daughters or female family members are naturally responsible for looking after elderly or disabled relatives. These societal norms not only perpetuate gender inequality but also hinder broader societal acceptance of shared caregiving roles among men and women. This resistance to cultural change further entrenches the invisibility and undervaluation of caregiving work.

### *Psychological and Emotional Strain on Caregivers*

The mental and emotional toll of caregiving, especially when unsupported, is significant. Caregivers frequently experience stress, burnout, isolation and a sense of being overwhelmed, particularly when juggling work and caregiving duties without external assistance.

# Conclusions and recommendations for measures, methods and actions

## Recommendations for Measures, Methods, and Actions

### *Strengthen Policy Implementation and Monitoring*

Improve the effectiveness of existing legislation by introducing clear, actionable guidelines and accountability mechanisms. Designate competent authorities to oversee the implementation of the Work-Life Balance Directive and Law 216(I)/2022, ensuring that employers are held accountable and that employees can access their rights without bureaucratic obstacles.

### *Enhance Awareness and Accessibility of Rights*

Launch nationwide public awareness campaigns; using accessible language and inclusive format, to inform citizens of their caregiving rights and options. Create centralised, user-friendly platforms (e.g., websites or helplines) to disseminate information and offer guidance on navigating legal entitlements, benefits, and available services.

### *Invest in Formal Long-Term Care Services*

Expand and modernise the formal care infrastructure by increasing funding for state-run services such as community care centres, in-home assistance and respite care. Strengthen support systems for families to reduce over-reliance on informal caregivers and ensure that quality care is accessible to all who need it.

### *Recognise and Support Informal Caregivers*

Establish formal recognition of informal caregiving roles within national policies and data collection systems. Offer financial incentives such as allowances, tax deductions or pension credits and provide free or subsidised training and counselling to improve formal and informal caregivers' skills and well-being.

### *Promote Gender Equality in Caregiving*

Address the gendered nature of caregiving through public education and awareness campaigns that challenge stereotypes and promote shared responsibilities between men and women. Integrate gender equality goals into all caregiving-related policies and include male-targeted initiatives that encourage their participation in care.

### *Integrate Formal and Informal Care Systems*

Develop a coordinated care framework that brings together formal healthcare providers, social services and informal caregivers. Create local care coordination teams to streamline services, offer personalised care plans and improve communication between stakeholders involved in caregiving.

### *Build Employer Capacity and Accountability*

Support employers in becoming more caregiver-friendly by offering training, toolkits and policy templates that encourage flexible work arrangements, remote work options and time-off policies.

Establish incentive schemes for businesses that adopt inclusive practices for caregiving employees and a broader understanding of the needs of their employees as potential caregivers.

#### *Address Caregivers' Mental Health and Well-being*

Allow access to mental health resources for caregivers through publicly funded counselling, helplines and community-based peer support networks. Develop clear communication channels to enable open discussions around mental health and well-being. Raise awareness about the importance of recognising and supporting caregivers' mental health needs.

#### *Establish Multi-Stakeholder Coordination*

Encourage a holistic approach to care policy by building partnerships among government ministries, local authorities, civil society organisations, healthcare professionals and employers. Develop a national caregiving strategy that reflects shared responsibility and is informed by the experiences of caregivers themselves, including both formal and informal caregivers.

### Conclusions

The desk-based and field research findings reveal that Cyprus faces significant structural, cultural and institutional challenges in addressing informal caregiving and its deeply gendered nature. Although legislative progress has been made through instruments such as the EU Work-Life Balance Directive and Law 216(I)/2022, these have not yet translated into consistent or impactful implementation. A persistent gap remains between policy and practice, exasperated by low awareness, weak enforcement mechanisms, limited formal care services and entrenched gender norms.

Informal caregiving (predominantly performed by women) continues to be undervalued and insufficiently supported, resulting in emotional strain, restricted employment opportunities and long-term socio-economic disadvantages. The fragmented relationship between formal and informal care provision, alongside minimal workplace adaptation and information understanding, leaves many caregivers without the necessary resources, protections or recognition. Importantly, the research highlighted a clear demand from caregivers for systemic change, with participants voicing a need for more responsive policies, workplace flexibility and societal acknowledgment of the burdens (on women) they carry.

In summary, addressing the complex challenges faced by informal caregivers in Cyprus (mainly women) requires coordinated, gender-sensitive and well-resourced interventions. By bridging the gap between policy and practice, enhancing support systems and promoting cultural change, Cyprus can move toward a more equitable, inclusive, gender-balanced and sustainable care framework, with improved recognition and effectiveness of (informal) caregiving efforts.



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