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# DEFEN-CE:

## Social Dialogue in Defence of Vulnerable Groups in Post- COVID-19 Labour Markets

Marta Kahancová, Simona Brunnerová,  
Barbora Holubová, Monika Martišková

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Institute

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## Executive Summary

This report is part of the EC-funded research project DEFEN-CE: Social Dialogue in Defence of Vulnerable Groups in Post-COVID-19 Labour Markets (VS/2021/0196). It scrutinizes **how social partners influenced COVID-19-related policy responses towards vulnerable groups in the labour market, and whether this experience created opportunities for strengthening social dialogue** in general. The empirical focus is on Czechia and Slovakia as representatives of embedded neoliberal countries. This means liberalizing labour market policies during their economic transition starting in the 1990s, but at the same time, anchoring some institutional mechanisms of policy-making, including social dialogue at the national level.

The analysis is based on new empirical data in two dimensions:

- primary data on policy measures relevant for the vulnerable groups in the labour market, categorized in a standard database of the most important COVID-19 measures relevant for vulnerable groups.
- 19 original semi-structured interviews with employer organizations, trade unions, governments, and NGOs in Czechia and Slovakia, implemented in 2022-2023.

### Vulnerable groups in the labour market

**Vulnerabilities related to COVID-19 primarily arose from workplace closures and subsequent job losses.** These challenges predominantly impacted employees with precarious working contracts that offered little or no social protection against job loss. This includes workers on small-job contracts, agency workers, and foreigners. Socially vulnerable groups faced additional difficulties during the pandemic, with single parents being particularly affected. Trade unions, employers, and NGO representatives identified single parents, foreigners, persons with disabilities and marginalized Roma communities as groups facing increased COVID-19 related exposure to loss of labour market status and poverty.

### COVID-19 related labour market measures for vulnerable groups

**The most important conclusion is that at the beginning of the pandemic, neither Czechia nor Slovakia introduced measures to specifically protect vulnerable groups. In later phases, however, smaller adjustments helped provide a degree of coverage of vulnerable groups.** At the beginning, all COVID-19 related state measures were broadly aimed at protecting the employment level, mostly directed towards full-time employees. Adjustments in the eligibility and the scope of the measures were introduced later towards particular groups in the labour market which remained excluded from the initial measures (e.g., liberal arts professions, persons with multiple small contracts, gig workers, self-employed, etc.). Acknowledging this overall trend, **the benefit of vulnerable groups from the introduced measures was highly individualized depending on the person's labour market situation.**

The most important and widely debated measures - *Kurzarbeit* schemes, income replacement and the pandemic care supplement – did thus apply also to eligible individuals from among the vulnerable groups on the labour market. However, since

labour market vulnerability derives e.g., from uncertainty due to fixed-term contracts or low-wage work, the extent to which these measures were available to vulnerable groups vis-à-vis persons in stable employment relationships is questionable. For the above reasons, the uptake of the offered compensations among precarious employees was estimated to be low, mostly because of the difficult conditions and requirements to fulfil.

**Slovakia saw the adoption of two specific measures that sought to protect the Roma population.** These did not particularly target their labour market protection, as the employment rate among marginalized Roma communities remains extremely low. Still, being considered as one of the most vulnerable groups in the society and on the labour market, it is relevant to mention that policies were also specifically tailored to consider Roma needs from the point of view of public health, while being highly discriminatory towards labour market access for Roma people.

### **Social partner involvement in the design of COVID-19 labour market measures**

The involvement of social partners in the design of labour market measures did not specifically target vulnerable groups, but measures for the general labour market population focused predominantly on full-time employees. Social dialogue structures to adopt these measures were halted in the first months of the pandemic in both countries (in Slovakia, also coinciding with government change), but resumed operation and yielded outcomes in measures co-determined by social partners. First of all in both countries, a temporary mechanism of short-time scheme employment retention was introduced in co-determination with social partners. Then, social partners advocated for ad hoc measures such as income compensation in health care, social care, retail and tourism. Trade unions also pushed for considering COVID-19 as an occupational disease.

The ad hoc government advisory bodies that emerged at the outbreak of the pandemic and initially raised concerns about the competition to established social dialogue structures ceased to exist towards the pandemic's end, while social dialogue structures proved to be stable and functional in both countries. At the same time, innovations and new approaches did not emerge in the social dialogue structures.

### **Effects on social partners and social dialogue**

Social partners perceived an improvement in their legitimacy and role in access to COVID-19 related decision making, but the impact on the long-term established social dialogue and bargaining structures has remained neutral. Convergence in interests between unions and employers occurred in employment protection measures, which fuelled their greater relevance in the adoption of related state measures. However, none of these measures specifically concerned the vulnerable groups. These were rather represented via NGOs, which however lacked access to policy-making. The pandemic did not yield improvements in cooperation between social partners and NGOs, or the expansion of social partners' dedicated representation of interests to particular vulnerable groups.

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## Introduction

The COVID-19 pandemic has posed unforeseen challenges for European economies and societies. For the governments and policy makers in the labour market, these challenges included protecting vulnerable groups from the direct health-related consequences of COVID-19, but also indirect challenges related to income and job protection and general risks of exposure to poverty. The COVID-19 pandemic thus provides a unique context to study not only the strategies and power relations in social protection and labour market policymaking vis-à-vis vulnerable groups. It also provides an opportunity to study how social partners used the unprecedented situation to engage in the defence of vulnerable groups in the labour market, and how this experience created new opportunities for strengthening the legitimacy of social dialogue as an institutional mechanism.

Within this context, the current **report scrutinizes how social partners influenced COVID-19-related policy responses towards vulnerable groups in the labour market, and whether this experience created opportunities for strengthening social dialogue** in general. The empirical focus is on two Central Eastern European (CEE) countries – Czechia and Slovakia. Both countries emerged from the split of Czechoslovakia in 1993 and the literature in political economy presents them as embedded neoliberal countries (Bohle & Greskovits, 2012). This means liberalizing labour market policies during the economic transition starting in the 1990s, but at the same time anchoring some institutional mechanisms of policy making, including social dialogue at the national level. From a research design perspective, these countries represent the most similar cases within the embedded neoliberal type of political economies, yet the report seeks to compare whether policy responses and opportunities emerging for social dialogue differentiate across Czechia and Slovakia.

The report is part of the EC-funded research project **DEFEN-CE: Social Dialogue in Defence of Vulnerable Groups in Post-COVID-19 Labour Markets** (Project No. VS/2021/0196), covering 10 EU Member States (Czechia, Slovakia, Latvia, Lithuania, Finland, Sweden, Germany, the Netherlands, Italy and Spain) and two Candidate Countries (Serbia and Turkey).

The report seeks to respond to three research questions:

- What public policy and social dialogue measures, seeking employment and social protection for vulnerable groups in the labour market, were implemented during the COVID-19 pandemic in Czechia and Slovakia?
- To what extent and how did social dialogue play a role in the implementation of these policies on social and employment rights of vulnerable groups in the COVID-19 pandemic?
- What lessons and opportunities for strengthening social dialogue emerged from the social partners' involvement in shaping policies in the social and employment rights of vulnerable groups during the COVID-19 pandemic in Czechia and Slovakia?

To answer these questions, this report is structured as follows: First, it provides background information on the pandemic and the labour market situations in Czechia and Slovakia, second, the report analyses the main vulnerable groups and policies adopted to protect these groups in the labour market during the COVID-19 pandemic, and third, the role of social partners in the design of these policies is described. Finally, the report assesses opportunities for strengthening the legitimacy of social partners and social dialogue.

Evidence for this report has been collected within the DEFEN-CE project and comprises mainly three sources of data. First, secondary data were collected on the labour market situation and social dialogue in order to contextualize findings related to COVID-19 developments. Second, the authors and a broader research team collected primary data on the policy measures relevant for the vulnerable groups in the labour market. These data were categorized in a standard database of most important COVID-19 measures relevant for vulnerable groups. Third, the authors collected original empirical evidence in 19 interviews with key informants (see Table 1 for the overview of interviews). The structure of the interviews sought a balanced perspective from several types of actors, namely, the government, social partners, and non-governmental organizations that provide services to selected vulnerable groups. All respondents were asked to evaluate which vulnerable groups were hit hardest by the pandemic from the perspective of their labour market participation and economic activity, which government policies and measures were perceived as the most important for addressing the needs of these vulnerable groups, and to determine the role of particular actors and predominant social partners in shaping these policies and measures. Respondents were also asked to assess the impact of the pandemic experience on strengthening social dialogue. The authors conducted 11 interviews in Slovakia and 8 in Czechia. Among these, 6 interviews were conducted with trade union representatives (2 in Czechia and 4 in Slovakia), 4 interviews with employer associations (2 in each country), 4 interviews with government representatives (1 in Czechia and 3 in Slovakia), and 5 interviews with NGOs (3 in Czechia and 2 in Slovakia).

All interviews were conducted by the authors in person or online in 2023 following a semi-structured questionnaire (see Annex). All interviews were transcribed and coded by the authors. For the transcription, the authors also worked with the Sonix transcription software and provided quality control to each transcription. The transcribed interviews were coded using the Dedoose software, following a deductive and an inductive approach to coding. This approach was applied systematically across all country analyses within the DEFEN-CE project (see Annex for the overview of codes). Data were handled in accordance with ethical and data protection principles. All remaining errors are the sole responsibility of the authors.

**Table 1 Overview of original interviews by the authors**

| Interview code | Country | Respondent type         | National or sectoral level | Name of the organization   | Interview date and format |
|----------------|---------|-------------------------|----------------------------|--|---------------------------|
| CZ01TU         | CZ      | trade union             | national                   | Czech-Moravian Confederation of Trade Unions   | 04.01.2023, online        |
| CZ02NGO        | CZ      | NGO                     | national                   | Platform for social housing  | 05.01.2023, in person     |
| CZ03NGO        | CZ      | NGO                     | national                   | Centre for Social Issues – SPOT  | 24.01.2023, in person     |
| CZ04EO         | CZ      | Employers' organization | national                   | Union of employers' federations  | 3.3.2023, online          |
| CZ05EO         | CZ      | Employers' organization | national                   | Federation of Czech and Moravian consumer cooperatives, COOP group                               | 21.2.2023, in person      |
| CZ06GOV        | CZ      | government              | national                   | Ministry of Labour and Social Affairs  | 25.04.2023, in person     |
| CZ07TU         | CZ      | trade union             | sector                     | Trade Union Federation KOVO  | 14.02.2023, in person     |
| CZ08NGO        | CZ      | NGO                     | national                   | Club of single mothers   | 20.01.2023, online        |
|                |         |                         |                            |  |                           |
| SK01TU         | SK      | trade union             | sectoral                   | Trade Union Federation KOVO  | 31.01.2023, in person     |
| SK02EO         | SK      | Employers' organization | national                   | Association of Employers' Federations  | 6.2.2023, online          |
| SK03TU         | SK      | trade union             | national                   | Confederation of Trade Unions of the Slovak Republic   | 7.2.2023, online          |
| SK04TU         | SK      | trade union             | national                   | Joint Trade Unions of Slovakia   | 07.02.2023, online        |
| SK05EO         | SK      | Employers' organization | national                   | Association of Industry Federations and Transport  | 13.2.2023, in person      |
| SK06TU         | SK      | trade union             | national, public sector    | Slovak Trade Union Federation of Health and Social Work  | 13.02.2023, in person     |
| SK07NGO        | SK      | NGO                     | national                   | Healthy Regions - public employment services   | 17.2.2023, online         |
| SK08NGO        | SK      | NGO                     | national                   | Human in Danger  | 17.2.2023, in person      |
| SK09GOV        | SK      | government              | national                   | Ministry of Labour, Social Affairs and Family of the Slovak Republic (Section Employment Policy) | 24.2.2023, online         |
| SK10GOV        | SK      | government              | national                   | Office of the Plenipotentiary of the Government of the Slovak Republic for Roma Communities      | 23.3.2023, in person      |
| SK11GOV        | SK      | government              | national                   | Ministry of Labour, Social Affairs and Family of the Slovak Republic (Section Social Services)   | 31.3.2023, online         |

## I. Contextualizing the COVID-19 labour market developments

The pandemic impacted the economies of both countries; and while the drop in their GDP was not as steep as the EU average (dropping to about 94 percent of the GDP value of 2015), the GDP of both countries plummeted in the second quarter of 2020 (reaching 100% of the 2015 GDP level in Slovakia, and about 102% in Czechia) (HCSO, 2022).

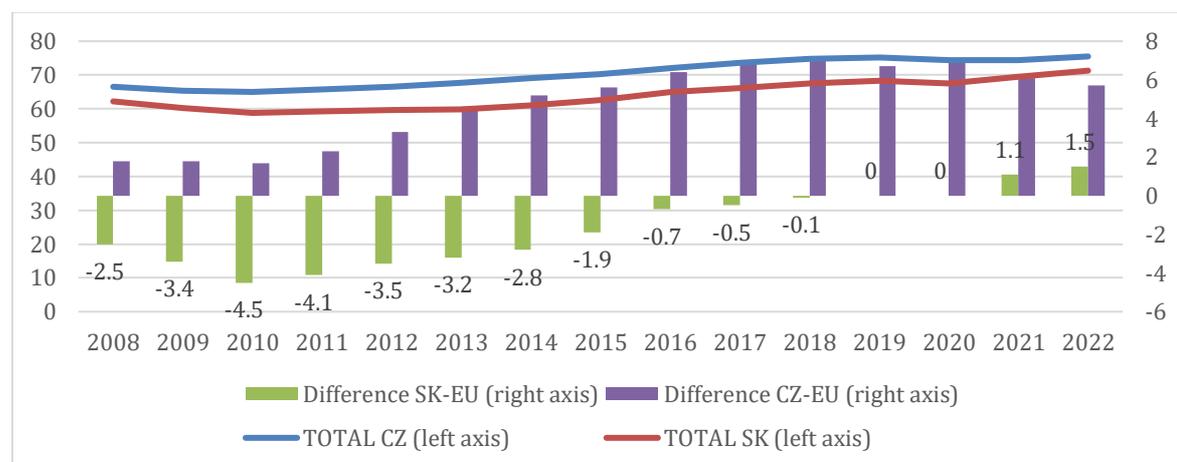
In the remainder of this section, we introduce the main characteristics of the labour market in both countries from the perspective of three main margins: those who want to work (participation rate), those who are unable to find work (unemployment rate) and availability of work (main characteristics connected to precarious work, esp. low wage work and flexibility of contracts). In each of the categories, we follow the differences between age groups, gender and education level. All data were retrieved from the Eurostat database in June 2023.

### I.1 Participation rate

The participation rates on the Czech and Slovak labour markets has increased by 9 percentage points since 2008, in Czechia from 66,6 to 75,5 per cent in 2022, while in Slovakia the increase was from 62,3 to 71,3 per cent. This long-term employment gap between both countries underwent only a slight convergence during the pandemic in 2021 (HCSO, 2022).

Compared to the EU average, Czechia has kept above average values since 2008, while Slovakia exceeded the EU average only in 2021 (see **Error! Reference source not found.**).

**Figure 1 Participation rate compared to EU 27, in %**

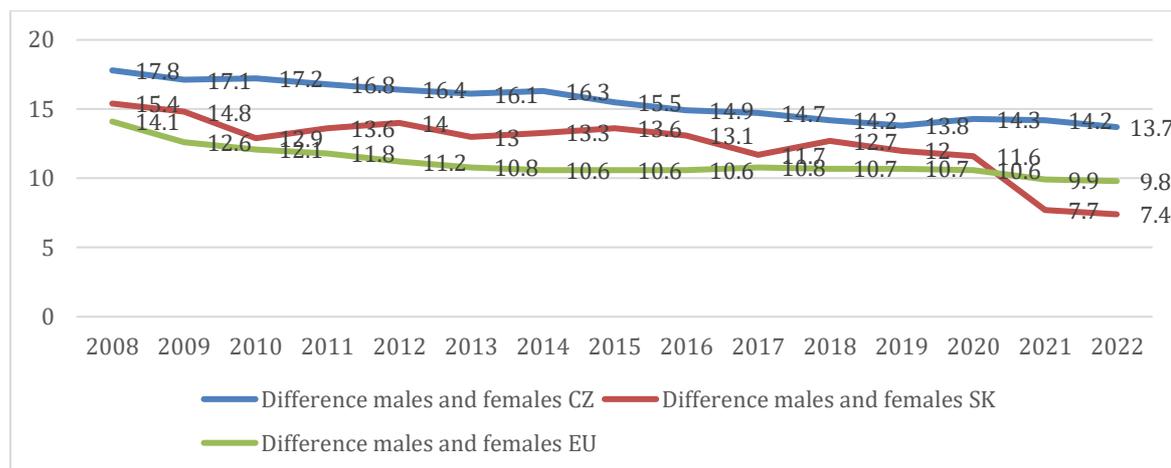


Source: Eurostat [lfsa\_ergaed], own compilation

Note: Difference SK-EU and CZ-EU was computed as a difference between participation rate of the given country and the EU27 average in the given year. Negative value denotes below average values and positive value denote above average values for the given country.

The difference between male and female participation has decreased over time. In Czechia the difference in male and female participation rate was 17 percentage points in 2008, while it decreased to 13,7 per cent in 2022. In Slovakia, figures were lower, 54,6 and 70 in 2008 increasing to 67,6 and 75 in 2022. Faster increase of women’s participation stands behind these dynamics in both countries, it was much sharper in Slovakia where women’s participation increased by 13 percentage points (**Error! Reference source not found.**).

**Figure 2 Participation rate on the labour market, by gender, in %**



Source: Eurostat [lfsa\_ergaed], own compilation

The share of employed persons that were not able to work during the pandemic of course increased and reached its peak in the second quarter of 2020. This was a similar trend to the EU average, yet the rates differed: in Slovakia, about 18.5 percent of employed persons were not working in the second quarter of 2020, while in Czechia it was slightly below 15 percent, compared to the EU average of 18 percent (ibid.).

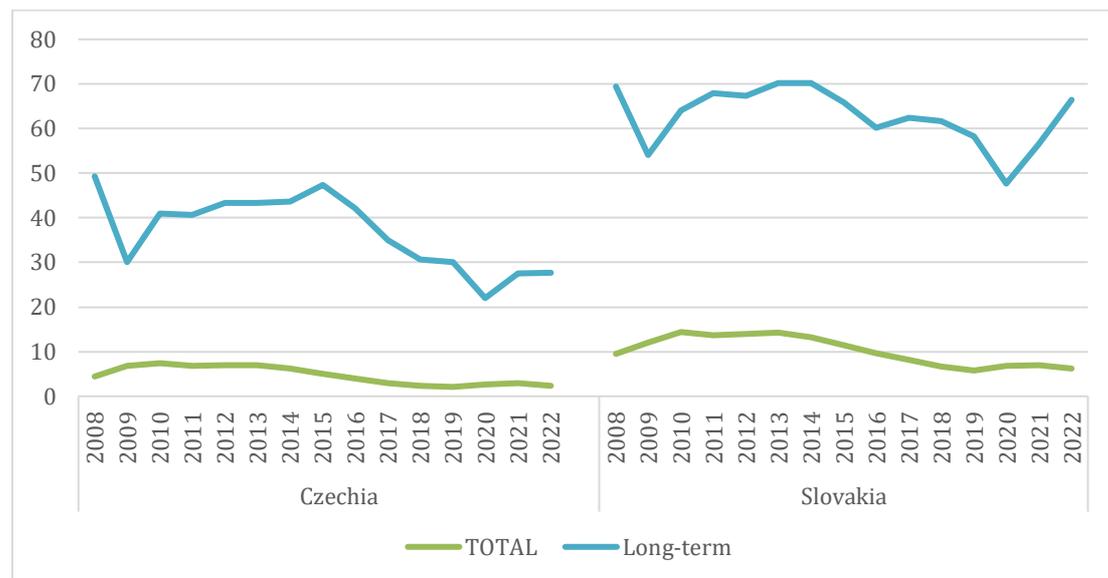
## I.2. Unemployment, low-wage and part-time work

The biggest difference between Czechia and Slovakia is in their unemployment rates. While Czechia kept the unemployment level below 7,4% (peak in 2010) in the whole period between 2008 and the COVID-19 pandemic, Slovakia had doubled figures during this period. The level of unemployment in the pandemic increased only slightly and was temporary (by 0.3pp in Czechia and 0.1pp in Slovakia between 2020 and 2021). Already in 2022, the unemployment level decreased, 2.9 to 2.3 and in Slovakia from 6.9 to 6.2 per cent (see **Error! Reference source not found.**).

Interestingly, the long-term unemployment rate, which was significantly higher in Slovakia than in Czechia in the pre-pandemic years (oscillating between 58-61% in Slovakia and between 29-31% in Czechia), underwent a steeper drop in Slovakia in the first and second quarters of 2020 upon the outbreak of the pandemic (from 59% to 40%), while in Czechia, this decline was less dramatic (from 29% to 20%) (HCSO, 2022).

Job search opportunities for the unemployed were also constrained, suggesting that during the pandemic, it took longer to find a job and that many unemployed were exposed to long-term unemployment, remaining without a job for over a year (see Figure 3). The transition rate of men from unemployment to employment in Slovakia remained systematically lower compared to Czechia at the outburst of the pandemic, leading to some convergence in the last quarter of 2020 (HCSO 2022).

**Figure 3 Unemployment and long-term unemployment**



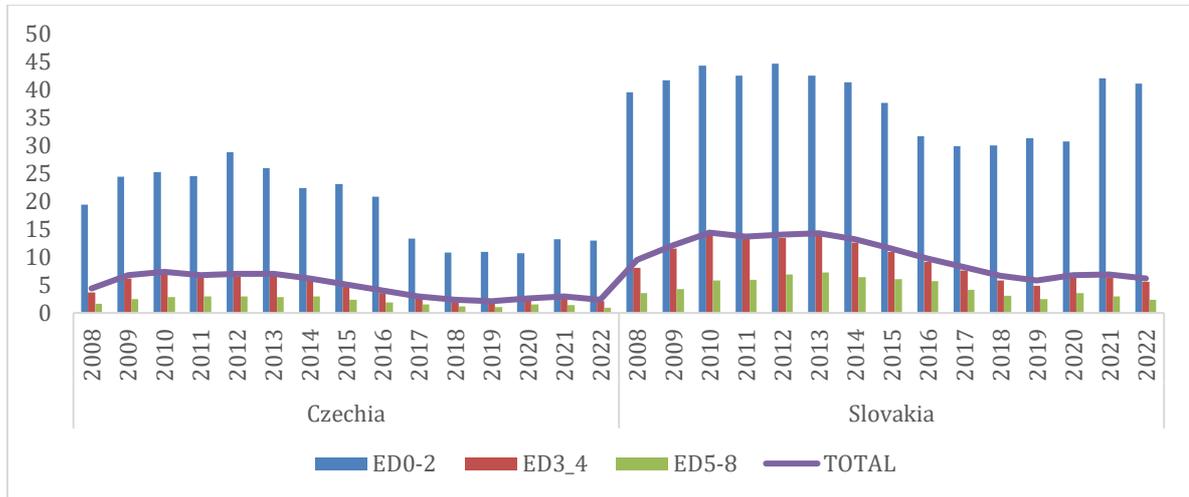
Source: Eurostat[lfsa\_urgaed, lfsa\_upgacob]

An insight into the structure of unemployment reveals that the unemployment of low skilled workers (ISCED 0-2) increased during the pandemic in Slovakia from 30 to 42 per cent. The Czech labour market also recorded an increase in unemployment among the low skilled, but only very mild compared to Slovakia, from 10.7 to 13.2 per cent (see **Error! Reference source not found.**). This suggests that **education level determines the level of vulnerability at the Slovak labour market more than in Czechia.**

Youth unemployment was significantly higher in Slovakia and increased slightly during the pandemic in both countries (HCSI 2022: 57). Czechia reports below the EU average levels reaching 6.8% in 2022, while Slovakia reports above average figures, reaching 14% in 2022 (see **Error! Reference source not found.**). Concerning the unemployment rate of young low-educated, Slovakia's labour market sufferance is more than double compared to the EU average. During the pandemic, their situation worsened, increasing the figures from 54.1% in 2020 to 64.1% in 2021. Czech young workers under 25 suffer from higher-than-average unemployment levels as well, but their levels oscillate at the EU average. During the pandemic, the rate increased from 16.5 to 21.3 in 2021. Both countries recorded a decrease in 2022. One of the **factors behind the high rates of young unemployed persons is the concentration of unemployment among the Roma minority, especially in Slovakia.** The Roma were particularly vulnerable and disadvantaged during the COVID-19 pandemic because of

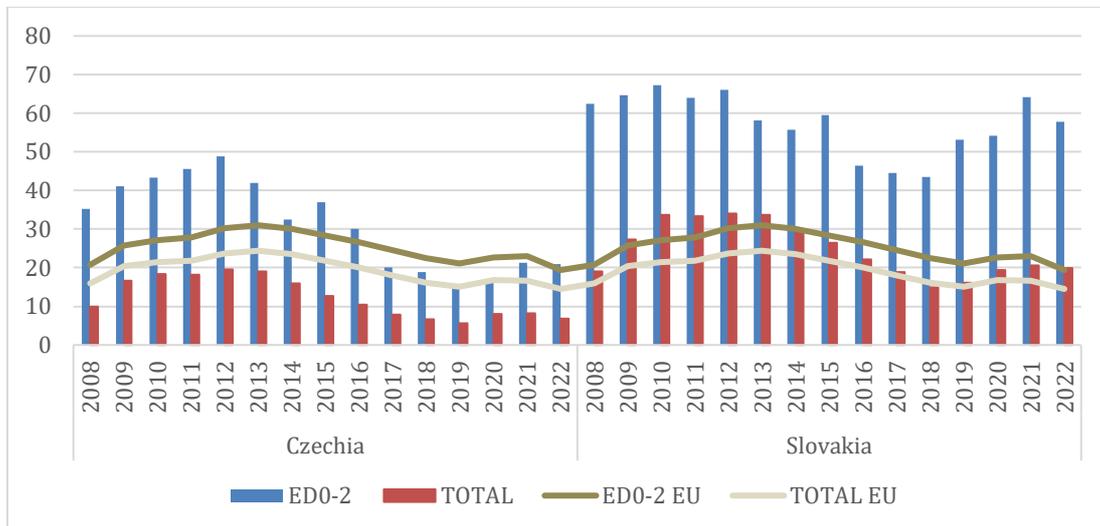
their weak involvement in the labour market prior to pandemic, which mirrors in their low income and low education rates. In the policy response their rights and specific needs and interests were almost entirely overlooked; or they were discriminated against within the COVID-19 policies defined generally but applied differently to the majority population.

**Figure 4 Unemployment and education level, in %**



Source: Eurostat[lfsa\_urgaed], own compilation

**Figure 5 Youth unemployment, in %**

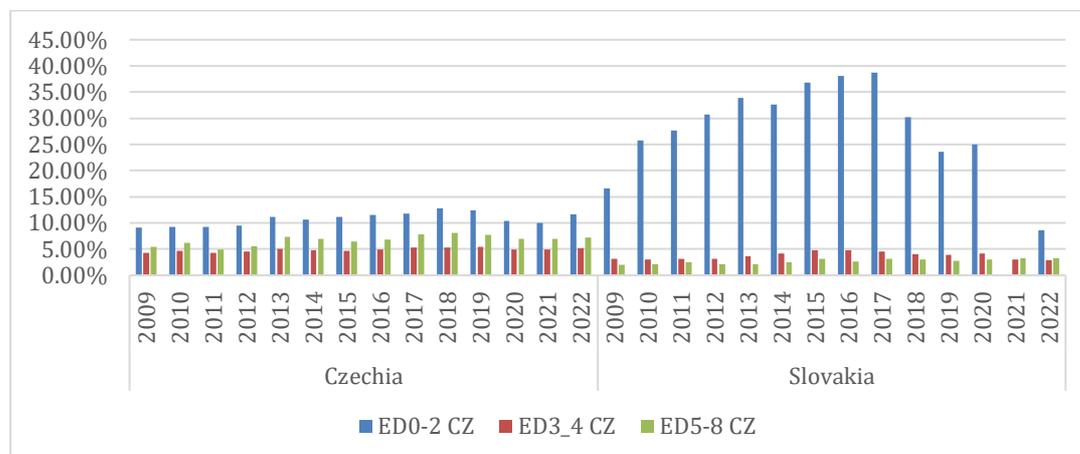


Source: Eurostat [lfsa\_urgaed], own compilation.

The labour market in both countries, similarly to other west European countries, suffers from **dualization of working conditions**, offering job security and social protection to employees with full-time unlimited contracts while employees on short-term non-standard forms of work suffer from lower levels of protection. Although full-time

contracts dominate the labour market in both countries, non-standard forms of work are present with lower income and lower-qualified positions (see **Error! Reference source not found.**).

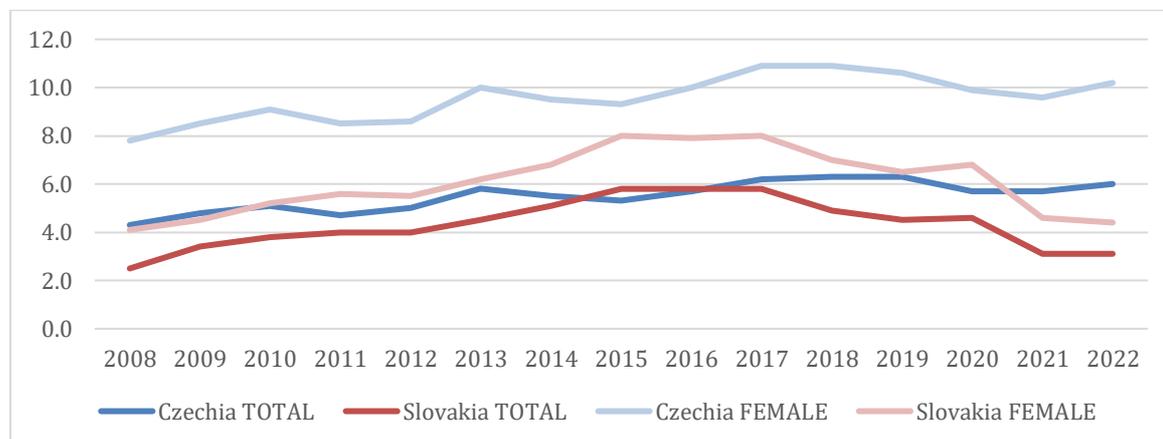
**Figure 6 Part-time work and education**



Source: Eurostat [LFSA\_EPGAED], own compilation

Women also more often work in part-time positions, especially in Czechia (see **Error! Reference source not found.**) where along with the regular part-time work, it is possible to work on contracts with lower job security where the termination period is only 15 days and they are not entitled to sick leave. These factors multiply vulnerabilities at the labour market.

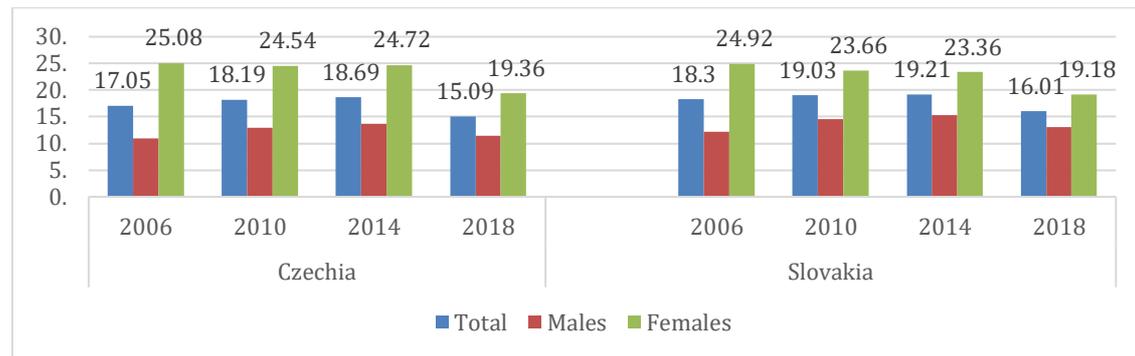
**Figure 7 Share of part-time total and for female, in %**



Source: Eurostat [LFSA\_EPPGA]

Women in Czechia and Slovakia are also threatened by poverty as their share among low wage workers is 3-4 percentage points, higher than males (see **Error! Reference source not found.**).

**Figure 8 Share of low wage workers, in %**



Source: Eurostat [earn\_ses\_pub1]

Several factors underpin the different labour market outcomes in Czechia and Slovakia. First, the countries' **structural labour market characteristics differ**. Slovakia suffers from regional labour market differences and long-term exclusion of Roma people from the labour market, thus the overall unemployment level is significantly higher than in Czechia. The Czech economy entered the pandemic overheated, with an unemployment level as low as 2 percent, which is considered a natural rate. Regional differences in the level of unemployment persisted in Czechia as well, but were less substantial than in Slovakia. In turn, the starting position of both countries prior to the pandemic in terms of the unemployment rate differed.

The second factor is the **presence of foreigners in the labour market**. Foreigners in Czechia make up more than 10 percent of the workforce, many of them occupying low paid positions in precarious forms of work (Valenta & Drbohlav, 2018), (Leontiyeva, 2014). The largest minorities in Czechia are Ukrainian, Slovak and Vietnamese workers, whereas Ukrainians mostly engage in a circular mode of migration. During the COVID pandemic, 20% of registered Ukrainians left Czechia which contributed to decreasing their numbers by 36,000 to 133,000 persons in the first three months of the pandemic (between March and June 2020) (MPSV, 2023). Interestingly, right in the autumn of 2020, their numbers increased to pre-pandemic level and continued increasing to more than 200,000 persons in 2021. Foreigners thus served as a buffer for the Czech economy during the pandemic, and they were the first to be exposed to the risk of losing a job, while not being reflected in the unemployment statistics (Martišková & Šumichrast, 2022). In contrast to Czechia, Slovakia had a significantly lower number of foreigners in the labour market. 143,000 foreigners were registered to work in Slovakia in 2019, and this number increased to 152,000 in 2021 (ibid).

Third, Czechia also has a **high share of self-employed on the labour market**, around 13% of overall employment. Their numbers decreased during the COVID-19 pandemic, but their share remained higher than in Slovakia. There is suspicion among trade unionists that many of the self-employed are involuntary self-employed. In the Czech system of social contributions, self-employment allows for lower payments to social security which provides incentives to work on this form of work for both employees and employers. Out of 855,000 self-employed, only 2,8% employed workers.

Fourth, there is a high share of **indebted people in Czechia**. Strict legislation and a lack of control of loans and interest rates leads to the fact that there are more than 900,000 people indebted and threatened by foreclosures or who have already experienced them. Being indebted means having difficulties in finding a regular job or having a very low disposable income. In Slovakia, the number of indebted people was similar in 2020, 976,506 natural persons, but at the end of 2022 this number decreased to 419,910 people. This was mostly possible because of adjustments in legal regulation: upon certain conditions, long-term unpaid loans were considered settled<sup>1</sup>.

From a sectoral perspective, in both countries, the **sectors economically most affected by the loss of jobs during the pandemic were HORECA, culture and free time activities and logistics**. In absolute terms, the highest decrease was recorded in industrial production, but this is because it is one of the biggest sectors in both countries. In contrast, employment during the COVID-19 pandemic did not decrease in construction, public administration, defence, education, healthcare and social care sectors.

In terms of **loss of income**, in Slovakia in the most critical month of May 2020, there was a year-on-year income decline for 43% of employed individuals. In Czechia, the **income decrease affected self-employed and unemployed** the most, when 40% of them experienced the decrease of more than 40% of their income. The most affected groups in Czechia were unemployed and self-employed where 40% of them experienced more than a 40% income decrease. Vulnerability on the Czech labour market also increased the type of contract when 22% of workers with agreements outside the regular employment experienced an income decrease higher than 40%, while among regular employees such a rapid decrease occurred in only 10%. Households with children and single parents were also exposed to a larger income decrease than families with two earners. Among families with children, those with pre-school age children were affected with the income decrease the most (Kališková & Zapletalová, 2022).

An IDEA-CERGE suggests that the **decisive factor of income decrease was the education level**:

*"Persons with primary education were clearly the most affected, persons without a high school diploma were slightly better off, those with a high school diploma were even better off, and those with a high school diploma had the smallest drop in income (only 8% of university graduates experienced a loss of income). There are probably several reasons for this. The first is the higher stability of employment for those with higher education, the higher frequency of employment of those with lower education in some of the affected sectors (e.g. hospitality), but also the opportunities for transformation of work into an online environment for*

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<sup>1</sup> <https://www.finsider.sk/rychle-spravy/pocet-exekucii-na-slovensku/>

*people with higher education. It also appears that households living in small villages of up to 5000 inhabitants were more affected by the pandemic.”*

*Source: Kališková & Zapletalová (2022)*

In sum, the impacts of the COVID-19 pandemic on the labour market were unequal throughout society. Analyses suggested risk factors which increased the probability of being affected in terms of the labour market status and income. These include the type of the contract, the family situation and sector the individual was employed in, as well as where individual lived. Above all these characteristics the education level determined the extent of the impact on income level. Box 1 summarizes the key labour market impacts on the economy and employment in both countries.

**Box 1: The COVID-19 pandemic effects on the economy and employment**

- Decline in the economy of both countries in 2020, comparable to the financial crisis in 2009 (CZ decline – 5.5%, SK decline – 3.3%)
- Employment decreased by 0.7 pp in Czechia and 0.9 pp in Slovakia in the pandemic years, men being more affected than women
- Unemployment rate increased by 0.3pp in Czechia and 1pp in Slovakia
- Low educated and people in the age group up to 25 were most likely to lose their jobs in both countries, but people in Slovakia more exposed to job losses
- Besides employment decline, 2020 also saw a significant decrease in income for employees who had to stay home in both countries
- In Slovakia, the pandemic did not affect the disposable income of individual outside the labour market; in fact this increased by 5.4%. The disposable income of retired persons increased by 1.4% in 2020. In Czechia, individuals outside the labour market experienced income decline in a limited extent; the least affected were retired persons, followed by students and parents on parental leave.

Source: own contribution based on (Kališková & Zapletalová, 2022; Valachyová & Senaj, 2021)

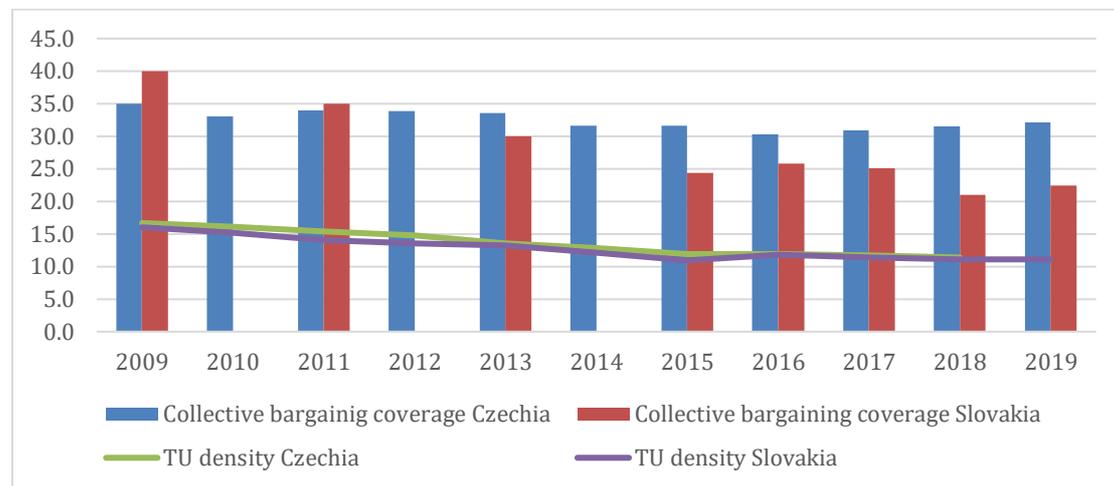
### **I.3 Industrial relations and social dialogue structures**

The above economic impacts of the pandemic occurred in the context of particular structures of industrial relations and social dialogue. They are summarized below, in order to contextualize the analysis of how social partners played a role in designing and implementing COVID-19 policies and measures to protect vulnerable groups. Both countries are post-socialist nations with a shared history in Czechoslovakia, which dissolved in 1993. After the fall of socialism in 1989, both countries reconstructed their industrial relations structures. They adopted the ILO conventions on collective bargaining and trade union rights and implemented them into the legislative foundations for industrial relations, with minimal changes since then. The system strictly adheres to the derogation principle, allowing lower-level bargaining to improve conditions within legal and multi-employer/sector agreements. The legal framework

serves as a reference point for bargaining at the sector and company levels (Myant, 2010).

The system favours establishment/company-level bargaining in the private sector due to low sector-level social partner participation and actor diversity. In the public sector, Slovakia has established coordinated collective bargaining between state authorities and trade unions, whereas Czechia relies more on informal and fragmented coordination. Slovakia has a formally more coordinated collective bargaining system, involving both sector and company-level interactions, but mostly in the public sector, while Czechia predominantly relies on decentralized company-level bargaining, while having slightly better coordination in the private sector. The bargaining coverage is reported to be higher in Czechia than in Slovakia based on the ILOstat dataset. Despite differences in coverage rates, both countries reported a similar trade union density of 11 percent in 2019 (**Error! Reference source not found.**).

**Figure 9 Collective bargaining coverage and trade union density**



Source: ILOSTAT (IRdata), own compilation

The system promotes upward derogation in collective bargaining, meaning that lower levels of bargaining at the sector and establishment levels can only establish improved working conditions compared to what is already stipulated in legislation or higher-level agreements. As labour legislation already covers detailed regulations regarding working conditions and upholds the principle of upward derogation, there is limited room for manoeuvre and incentive for sectoral bargaining. Social partners find themselves with limited options for negotiation between legal regulations and customized company-level bargaining, resulting in a constrained bargaining environment.

Despite the ongoing debate surrounding sector-level and/or multi-employer bargaining, both Czechia and Slovakia have strong legal support for collective bargaining, leading to comparatively high bargaining coverage rates in the Central and Eastern European (CEE) context (see **Error! Reference source not found.**). However, it is important to note that bargaining coverage varies across sectors and does not significantly alter the

social partners' motivation to participate in policy and legislative initiatives as an alternative to arduous bargaining with uncertain outcomes.

The institutional framework establishes criteria for trade unions to act on behalf of workers in (sectoral) collective bargaining and national tripartism. This system favours a unified trade union structure with a dominant national-level confederation, which must represent a significant portion of workers to participate in consultations. In Slovakia, prior to 2021, the threshold for union confederations to engage in national tripartite social dialogue was set at 100,000 employees (Kahancová et al., 2019; Košč, 2020). However, since 2021, the system has introduced a more inclusive approach, allowing smaller unions that were previously excluded from tripartism to participate in consultations. In Czechia, the threshold is 150,000 employees being represented by the trade unions or employers.

To improve working conditions for employees in these circumstances, Czech and Slovak trade unions primarily rely on their institutional power resources. They make use of institutional safeguards, such as access to national tripartism, in both countries. Additionally, unions leverage their societal power by forming political coalitions (Kahancová & Martišková, 2023a; Kohl & Platzer, 2007). In cases where these avenues are not available due to the neoliberal stance of ruling parties, trade unions can still engage in worker mobilization through protests and petitions, although strikes are less common (Myant, 2019).

In addition to national-level institutional resources, it is important to consider access to bargaining and the existing bargaining practices at lower levels. The impact of sectoral collective agreements on working conditions, particularly in the private sector of both countries, is mostly symbolic rather than substantive (Kahancová et al., 2019). Coverage rates have declined due to various changes, particularly in Slovakia, regarding extension rules.

In the Slovak public sector, wage increases for public servants, including those in education and part of public healthcare, are regulated by a sectoral collective agreement. However, in Czechia, wage setting for public employees is determined through unilateral government orders. In the hospital sector, the presence of dual ownership structures adds complexity (Kaminska & Kahancova, 2017). Approximately 80 to 95% of collective agreements address provisions related to wages, holidays, and meal contributions, while other regulations are less commonly included (MPSV, 2021). Moreover, regulations that extensively address stipulations indirectly through legislation are less frequent in collective agreements.

Unions may rely on organizational and societal resources to strengthen their power, such as recruitment activities, organizational capacities, and cooperation with society. However, these resources are underdeveloped and poorly organized in Czechia and Slovakia (Mrozowicki, 2011). This results in collective interest representation being dependent on unstable political ties, declining membership, and decentralized bargaining (Avdagic, 2005; Bohle & Greskovits, 2012).

To compensate for domestic resource weaknesses, unions have developed cross-border ties and integrated into EU-level trade union structures. Over the past two decades, particularly since their EU membership in 2004, unions have strengthened their international cooperation and actively engaged in EU-level trade unionism to gain resources for domestic strategies (Adamczyk, 2018; Akgüç et al., 2019). This aligns with the expectation that international ties and support from other unions, along with reliance on EU-level directives, help unions enhance their resources in relation to governments, employers, and society in their respective countries (Gumbrell-McCormick, 2011).

## II. Covid-19 and its impact on vulnerable groups

This section sheds light on the COVID-19 pandemic and its impact on vulnerable groups in Czechia and Slovakia. First, we identify which vulnerable groups were perceived as those extensively affected in the labour market by the COVID-19 pandemic. Then the section presents key discourses and policy measures in both countries that were adopted to mitigate the impact of COVID-19 and that are directly or indirectly targeting the identified vulnerable groups.

Evidence in this section is based on original data from the DEFEN-CE database on specific policy measures targeting vulnerable groups in the labour market; and interviews with respondents in Czechia and Slovakia (see Table 1 above)

### II.1 Vulnerable groups in Czechia and Slovakia

Similar to other European countries, Czechia and Slovakia were affected by the pandemic through health measures, a decline in economic activity, increased government debt and excess deaths. The waves of COVID-19 outbreaks resulted in higher than EU average deaths in both Czechia and Slovakia. The increase of deaths culminated in Slovakia in January 2021, while Czechia lasted until March 2021. Another culmination rate, albeit lower than the first one, reached both countries in November-December 2021, followed by a steep decline in deaths caused by the COVID-19 disease (HCSO, 2022, p. 22). The mortality rate culminated in 2020 at 12.1 deaths per 1,000 population in Czechia, and 10.8 in Slovakia compared to the EU average of 11.6 in the same year (ibid.).

Section I provided an insight into labour market effects of the pandemic, including contextual information concerning the likelihood of vulnerability and vulnerable groups. Before a more specific focus on particular policies and measures to mitigate the impact of the COVID-19 pandemic on vulnerable groups, we identify the key vulnerable groups in the Czech and Slovak labour markets below. Other outputs of the DEFEN-CE project provide a rich analytical insight into the concept of vulnerability<sup>2</sup>; in this report we refrain from various definitions of this concept. What is relevant for the research questions of this report is the assessment of vulnerability from the perspective of labour market participation. Thus, we are not interested in general vulnerable groups exposed to health and social risks, e.g. the elderly or children, but to people exposed to losing their jobs, income decline, labour market exclusion and the risk of poverty. However, it should be acknowledged that general vulnerability may determine the labour market vulnerability to a large extent.

**Vulnerabilities related to COVID-19 primarily arose from workplace closures and the subsequent job loss.** These challenges predominantly impacted employees with

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<sup>2</sup> See the outputs published at: <https://blogs.helsinki.fi/defen-ce/category/publications/>

precarious working contracts that offered little or no social protection against job loss. This includes workers on small-job contracts, agency workers, and foreigners. Socially vulnerable groups faced additional difficulties during the pandemic, with single parents being particularly affected. Trade unions, employers, and NGO representatives identified single parents as a group facing heightened sensitivity to COVID-19 measures in both countries.

Trade union representatives also highlighted the vulnerability of **people with disabilities**, who already faced challenges in finding employment prior to the pandemic. The COVID-19 crisis further decreased their prospects for inclusion in the labour market. **Roma people and foreigners** in low-paid positions were among the most impacted groups, with no specific compensatory measures in place according to respondents. While these groups were not new to the Czech labour market (the relevance of Roma mostly in Slovakia and the relevance of foreign workers mostly in Czechia), the pandemic amplified their vulnerability through income decreases and limited access to social protection.

Perceptions of vulnerable groups was different among various stakeholders, obviously derived from the focus of the interviewed organization. There was a general agreement across the types of respondents in both countries that the most vulnerable are people in low-income jobs (low-wage earners), single parents and elderly workers who may face difficulties in finding alternative jobs. Workers in precarious jobs were mentioned as vulnerable mostly in Czechia, because the Czech Labour Code stipulates limited social security contributions and entitlements for persons with such marginal contracts (*Dohoda o pracovní činnosti, Dohoda o provedení práce*<sup>3</sup>). In Slovakia, people employed on work agreements are subject to most of the same social security obligations and entitlements as persons in regular employment contracts, except a shorter dismissal period, which is in the case of agreements is only 15 days compared to minimum one month for a regular working contract.

An additional subgroup of low-wage workers in Czechia was those exposed to foreclosures due to indebtedness. A Czech respondent (an employers' association in retail) highlighted that this groups of vulnerable workers creates operational problems for employers:

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<sup>3</sup> In both countries there are legal institutes of employment outside the regular contract called in general the agreements. There are two types of agreement: 1) agreement on working activity (*dohoda o pracovní činnosti/pracovnej činnosti*) and 2) agreement on work performance (*dohoda o provedení práce/vykonaní práce*). Both are meant as additional working contracts to the regular one, or as a temporary working contract. The essence of concluding an agreement on working activity is the performance of certain repetitive activities, but within the scope of maximum 10 hours per week in Slovakia, or 20 hours in Czechia. Slovak LC further allows for maximum 520 hours per year in the case of seasonal work. A agreement on work activity may be concluded for a maximum of 12 months and dismissal period is 15 days in both countries. Agreement on work performance is meant to be concluded for short term work arrangements and for non-repetitive activities. In Czechia, maximum 300 hours per yers is allowed. Up to 10 ths CZK (400 EUR) per month no social contributions are paid, only income tax (19%) is deducted. In Slovakia, all gains from this form of agreement are subject of deduction of social and healthcare insurance.

*“A high share of our workers is exposed to foreclosures and this turns out to be a huge problem from an operations point of view. We [employers in retail] face huge labour shortages and are forced to employ persons with indebted, which then work in positions with financial responsibility.”*

*(Source: CZ05EO)*

Another frequently mentioned vulnerable group is **single parents**, whose vulnerability increased especially as a result of the obligation to stay home with children during lockdowns. If this occurred in sectors where work intensified, e.g., first-line workers in retail or healthcare, such parents were exposed not only to a drop in income, but also to job loss due to a long absence. According to the interview, this vulnerability affected more women as single parents, and especially those working in over-feminized sectors and earning less than men.

An interesting case has been mentioned by Czech interview respondents regarding **middle-income persons working on a contractual basis without a stable employment relationship**. The following quote illustrates this case:

*“...there was a woman with three contracts and she worked all the time based on a service contract. Very likely she was self-employed with a decent income, she had a child, and it was all set up great to allow her to function well and pay the rent. But suddenly it all crashed. She just could not start a regular job, e.g. in a shop, with a child. At the same time, she was left out from all statistics because [from an income perspective] she did not appear to be from a vulnerable group.”*

*(Source: CZ03NGO)*

A specific category of vulnerable groups is the **Roma ethnic minority**, mentioned in both countries, however vulnerability and poverty exposure of the Roma is significantly higher in Slovakia due to their segregated rural lives. The key problem with Roma was the enforcement of stricter lockdown measures than applicable to the majority population. Even during lockdowns, the majority population was allowed to go to the workplace (if the company was operating) with a statement of the employer. In contrast, some Roma settlements were closed and guarded by police and the army, not allowing anyone out – e.g. for work, for a medical visit, or for withdrawing money from a bank (Holt, 2020). This had detrimental consequences – even the extremely low labour market participation rate of the Roma declined, counting in those who worked abroad and returned home during the pandemic, and those who worked undeclared but could not reach their work in such strict lockdown situations .

From the 19 coded interviews, 36 mentions of vulnerable groups were generated via deductive coding. Box 2 shows the categories of vulnerable groups from the perspective of labour market vulnerability, as identified by the interview respondents in both studied countries.

## **Box 2 Vulnerable groups in the labour market**

- Low-wage earners (CZ and SK)
- Workers in precarious jobs, such as work agreements or marginal contracts (CZ and SK)
- Single parents (CZ and SK)
- Young people in the labour market (CZ and SK)
- Elderly workers, above 50 (CZ and SK)
- Migrant workers, mostly Ukrainians (CZ)
- Roma ethnic minority population (mostly SK)
- People with disabilities and health issues (CZ and SK)
- Middle class workers with various sources of income (mostly CZ)
- People working undeclared, albeit a small group (CZ and SK)

Source: own compilation

Sector related specificities were mostly tied to the protective measures and health protection concerns such as in the case of healthcare, social services or retail. Here the work of healthcare employees were generally appreciated, while the support and a need for additional remuneration for difficult working conditions in social care or in retail was less articulated.

In sum, the collected data show that respondents in both countries share their views in the **identification of vulnerable groups, mostly low-wage workers, workers in non-standard/precarious job forms, single parents, elderly workers and specific categories like Roma ethnic minorities, persons with disabilities and foreign workers**. The perspective of our respondents thus points on the topic of multiple vulnerabilities, thus not only those stemming from labour market participation, but broadens our narrow definition to social and health vulnerability. These groups did not emerge with the pandemic, they were also vulnerable before; however, the pandemic further exacerbated their vulnerabilities and exposed them to new risks and the need of social and income protection. Compared to statistical evidence and analysis provided in the previous section, the respondents also identified ethnicity, migration status and disability as an important factor of vulnerability in the labour market during the COVID-19 pandemic. The combination of some of these factors of vulnerability has especially made persons in marginalized Roma communities the most vulnerable, and this vulnerability increased because of the pandemic. The following interview quote from a Government representative illustrates this case:

*“[...] Specifically, those Roma that worked on various work agreements...were simply terminated because there is marginal or actually almost no legal protection. And they lost their jobs.” (Source: CZ06GOV)*

## II.2 Government policies and measures relevant for vulnerable groups

Both countries introduced several **general measures to mitigate health risks already at the early phase of the pandemic in Spring 2020**. These included the closure of schools and other social distancing measures, the reduction of persons permitted in public gatherings (later followed by a complete prohibition of gatherings), and later measures of broad lockdowns. Both the Czech and Slovak governments declared a state of emergency, which gave the governments special powers to adopt legislation without the regular legislative procedure and stakeholder discussion.

In response to the COVID-19 impacts, both Czechia and Slovakia implemented schemes to maintain employment and compensate for income loss. Support programmes focusing on employees and the self-employed emerged in both countries, but in Czechia earlier than in Slovakia. The adopted measures were predominantly (ad hoc) **employment retention and compensation schemes through specific pandemic programs**. In addition, several **automatic stabilizers** were introduced, focusing on parametric changes in the social security and tax systems.

### II.2.1 Employment retention and compensation schemes

In Czechia the **compensation program called Antivirus** aimed at maintaining employment in the case of a production decrease or temporary closure of a company due to the lockdowns. Already in the first pandemic wave between March and June 2020, 600,000 employees were supported by this measure, which was 13% of all employees. Since the situation on the labour market further stabilized in the second wave, only around 300,000 employees were supported (Gec, 2021). After a year and the half of the pandemic, the Czech Ministry of Labour and Social Affairs reported overall support to more than a one million of employees, which was 37% of all employees in the private sector (MPSV, 2021).

In the context of vulnerable groups and their income loss, the most controversial was the one-time payment to retired people which cost one quarter of all ad hoc compensation measures, but the retired were among the groups least affected by the income decrease (Kališková & Zapletalová, 2022).

Slovakia introduced its **set of compensation schemes called First Aid** gradually in three 'first aid' packages. In total, 2,475 million of EUR were spent to compensate the income loss of employers, workers and the self-employed over three waves of the pandemic between March 2020 and February 2022. About 55,000 employers and 770,000 individuals were supported financially. Over 131,000 of the supported persons were self-employed including solo self-employed (Baliak et al., 2022). The highest share was paid in the second wave of the pandemic between October 2020 and July 2021, reaching 213 million EUR in February 2021 and 200 millions EUR in March 2021 (ibid).

Both employment retention programmes were transferred into a systematic change, adopted in both countries and largely supported by social partners, in the form of the **permanent short-time work (STW) schemes** (commonly referred to by the German term *Kurzarbeit*). *Kurzarbeit* was introduced as a permanent scheme in both Czechia and Slovakia in late as 2021, after long discussions on how to set the criteria for its implementation. The STW schemes are considered the most important systematic change of mitigating the impact of the pandemic or any future crisis. As explained in Section III, ***Kurzarbeit* was also one of the measures that required social partner involvement on which social dialogue had an impact in both countries.** The *Kurzarbeit* scheme is explicitly tailored to prevent an increase in unemployment but does not distinguish the extent of vulnerability the supported worker may suffer from. **There is no requirement on employee characteristics and the support of a particular employee is up to the discretion of the employer.** Collective bargaining at the company level does not play a role in deciding which employees will be supported. Of course, employers need to meet the general eligibility conditions to receive the state support.

During the COVID-19 pandemic, around 60% of support in Czechia was **allocated to the most affected sectors**: commerce (23%), HORECA (20%) and industrial production (17%) (MPSV 2021). The costs of the compensation measures to maintain employment were estimated at 50 billion CZK (2,000 million EUR) (ibid). In Slovakia, the highest support per job went to the HORECA sector (an average of 680.7 EUR per job in February 2021 compared to 559.8 EUR in February 2022), to construction (690.6 EUR per job in February 2021 and almost the same amount of 678 EUR per job a year later), to industry (511.9 EUR on average per job in February 2021, and a drop to 375 EUR per job a year later) and wholesale and retail (624.4 EUR on average per job in February 2021 compared to 559.0 EUR per job a year later) (Baliak et al., 2022). During the first pandemic wave, support in Slovakia mostly targeted jobs in large firms, while at the later stages, support went mostly to small companies and solo self-employed (ibid.).

In Slovakia, support to the self-employed was provided from the second quarter of 2020 in a form of a monthly lump sum financial contribution (EUR 360) for the self-employed without any other income and without social insurance, while these persons were allowed to simultaneously receive income from a temporary work contract or disability pension. Changes to this lump sum were introduced later in 2020 and 2021 as the pandemic progressed. These contributions were conditioned by exact rules regarding the decrease in business.

### Box 3 : Kurzarbeit in Slovakia and Czechia

In Slovakia, the new permanent STW scheme was enacted by Act no. 215/2021 on Short-time Work Support. It also establishes an Employment Retention Fund as a new social insurance fund administered by the Social Security Authority. This new policy measure did not increase the social insurance contributions paid by employers. An essential condition for granting financial support is restrictions on business operations caused by external temporary factors beyond the employer's control. Financial support applies if the employer cannot assign work to at least one third of employees in the amount of at least 10% of the weekly work time. The fund aims at compensating 60% of the average hourly gross wage for a maximum duration of 6 months within 24 consecutive months. Initially, the Ministry of Labour also intended to oblige self-employed persons to pay a mandatory contribution to the newly established fund, but in the end, the Act applies only to employees and employers and excludes public sector employees.

In Czechia, *Kurzarbeit* has been debated since 2009 and implemented in limited forms since 2012. During the pandemic, employment retention schemes were first introduced in the second quarter of 2020. An amendment to the Czech Act on Employment in 2021 stipulated the permanent mechanism of shortened working scheme *inspired by the Kurzarbeit* scheme from COVID-19 pandemic. *Kurzarbeit* should be introduced, upon tripartite agreement, after natural disasters, pandemic or crises of various origin.<sup>4</sup> The new rules stipulate that workers can stay home in case of a lack of work up to four days a week, but for a maximum of one year. Employers are obliged to pay the employees at least 80 per cent of their wage during the period out of work. The state should compensate four fifths of these costs including social security and health insurance contributions, up to the amount of 150 per cent of the average national wage.<sup>5</sup> In 2022, the Czech Federation of Employers in Industry called for further amendment to the *Kurzarbeit* scheme as the current scheme is costly for the firms and public funds.<sup>6</sup>

Source: own compilation based on the cited sources

The structure of the above compensation measures vis-à-vis the needs of vulnerable groups suggests that in both countries, **most of the support went to the employment retention of employees in a regular employment relationship**. According to an estimation of the Czech Ministry of Labour, without the employment retention support, unemployment would have increased by 10% (MPSV 2021). At the same time, the **support for self-employed or persons working in non-standard employment forms was criticized to be slow and less efficient**.

<sup>4</sup> Source: <https://www.denik.cz/podnikani/kurzarbeit-cesko-spusteni.html> [accessed 24 July 2023].

<sup>5</sup> Source: <https://zpravy.aktualne.cz/ekonomika/nova-pravidla-kurzarbeitu-plati-zeman-podepsal-novelu/r~5c8adee4d02411eba824ac1f6b220ee8/> [accessed 24 July, 2023].

<sup>6</sup> In 2020 and 2021, the Czech government spent about 0,9 per cent of the GDP on *Kurzarbeit* schemes. Source: <https://www.kurzy.cz/zpravy/635843-cesky-kurzarbeit-mene-stedry-nez-nemecky/> [accessed 24 July 2023].

Similar measures were introduced for the self-employed in Czechia: upon mandatory closure of the business venues imposed by the Government, the self-employed were eligible to apply for the subsidy provided by the Local Labour offices. The condition of losses in sales applied, too, and the amount of support was conditioned by the extent of losses. Adjustments were also introduced in Czechia as the pandemic progressed.

### II.2.2 Ad hoc postponement of mandatory contributions

Next to the dominance of employment retention schemes, another widely utilized measure was the postponement of mandatory social security contributions paid from the income of employers, self-employed and the employed in Slovakia and their temporary cancellation in Czechia.

In Czechia, the measure targeted postponement of contributions for self-employed and employers cost 576 million EUR. Furthermore, a debt moratorium concerning all loans and mortgages concluded before March 2020 was introduced, with a deferral period of 3-6 months. All borrowers who were adversely impacted by the pandemic were eligible for this measure. Although not directly linked to the labour market, it held significant importance for vulnerable groups, in particular, low-wage individuals, in helping them navigate through the effects of the pandemic.

In Slovakia, the sum of delayed social security and health insurance contributions peaked at 20.75 million EUR in May 2020, while the state had already managed to collect 19.81 percent of this amount by the end of 2022 (Baliak et al., 2022). After May 2020, the use of this measure underwent a sharp drop (10,53 millions of EUR in delayed state income from social security contributions and 3,6-7,8 millions in the period of July 2020 to January 2022).

### II.2.3 Automatic stabilizers

In Czechia, along with ad hoc measures, several changes in the social and tax systems were introduced to compensate the loss of income of the general population, applicable also to vulnerable groups. The measures included the increase of some payments from the social systems (living and existential minimum, parental leave) and in the tax system (changes in the income taxation and cancellation of the property selling tax).

The costs of these compensation measures in Czechia reached 2,560 million EUR (Kališková & Zapletalová, 2022). The taxation changes decreased the revenues of the state budget by more than 4,640 million EUR, while changes to the social support system for low income households were by far the least expensive from among the adopted measures (160 million EUR).

Slovakia also implemented certain automatic stabilizers. Following the government change in March 2020, the new orientation led to increased social transfers targeting pensioners and families with children regardless their labour market status or vulnerability.

Additionally, there were challenges related to the minimum wage increase due to the introduction of an automatic wage setting mechanism from 2020. According to this mechanism, the minimum wage is set at 57 per cent of the average gross nominal wage in the economy two years prior to the year for which the minimum wage is being set. This mechanism applies unless social partners agree on a different level for the statutory minimum wage. However, such agreements are generally not reached, except for 2023, when a historic agreement was achieved to increase the minimum wage to 700 EUR. For 2024, the automatic mechanism will be applied again due to the failure of social partners to agree on a defined minimum wage level.

#### II.2.4 Other measures relevant from the perspective of vulnerable groups

From among other measures, not specifically related to labour market protection but relevant for vulnerable groups, both countries introduced income supplement schemes for the care of children and/or close family members. In Czechia, the self-employed who needed to stay at home with children younger than 13 (in the third quarter of 2020 changed to the max. age of 10) due to school closures were not entitled to social insurance compensation called "*ošetřovné*" (care allowance), because the self-employed are not obliged to pay this contribution and the majority do not pay it voluntarily. Regular employees have compulsory insurance and thus were entitled within normal rules. To narrow this discrepancy, the self-employed were entitled to this social insurance compensation. Throughout the entire pandemic it was possible to apply for compensations during the lockdowns. The Program was cancelled in January 2022 because reasons for its prolongation ceased to exist.

A similar measure, a so-called pandemic care supplement, was introduced in Slovakia. This measure received wide public attention and centred in many public discourses, where the continuous labour market participation of parents (especially single parents) while schools are closed and/or enterprises are closed was addressed.

Other forms of compensation bonuses emerged too, e.g. in liberal arts and professions, in both countries. They targeted the general population, and vulnerable groups identified above could benefit from them when meeting the general eligibility conditions.

### II.3 Evaluation of COVID-19 measures from the perspective of vulnerable groups

How relevant were the above measures for vulnerable groups? **None of the countries introduced specific labour market related measures that would be tailored to the identified vulnerable groups.** Instead, most measures targeted the general population or specific occupational groups like the self-employed. **Acknowledging this overall trend, we conclude that the benefit of vulnerable groups from the introduced measures was highly individualized depending on the person's labour market**

**situation.** The most important and widely debated measures - *Kurzarbeit* schemes, income replacement and the pandemic care allowance – did thus apply also to eligible individuals from among the vulnerable groups. However, since labour market vulnerability derives e.g., from uncertainty due to fixed-term contracts or low-wage work, the extent to which these measures were indeed available to vulnerable groups vis-à-vis persons in stable employment relationships is questionable. Earlier studies on precarious work in Czechia and Slovakia showed that people in times of crises, persons without fixed contracts were the first ones to be exposed to job losses, while protection measures were aimed at employment retention of the stable workforce (Kahancová, 2016; Sedláková & Martišková, 2016). Vulnerable groups, e.g., single parents, young workers, or workers with other minority profiles but stable contracts, could utilize the pandemic employment replacement schemes comparably to non-vulnerable groups. In the case of the self-employed, the same criteria applied, and vulnerable groups could utilize the adopted measures. Yet the **most important conclusion from this analysis is that at the beginning of the pandemic introduced measures broadly addressed the general labour market population.** In turn, adjustments in the eligibility and the scope of measures were introduced later during the pandemic as particular groups in the labour market turned out to be not eligible and thus left out from the initial measures (e.g., liberal arts professions, persons with multiple small contracts, gig workers, etc.).

For the above reasons, the uptake of the offered compensations among precarious employees was estimated low, mostly because of the difficult conditions and requirements to fulfil.

*“[...a particular limitation was] the requirement of three months of sickness insurance before the entitlement to the compensation bonus. Given that people working on [a work] agreement are often employed on a casual or seasonal basis, it may have been difficult for many of them to meet this condition. At the same time, the possibility of obtaining this type of work decreased during the pandemic. Temporary pandemic measures therefore applied to people in precarious forms of employment, but only partially.”*  
(Kališková & Zapletalová, 2022)

The system of social security did not allow to apply for sick leave to those working on agreements, despite having paid the required contributions. The right to claim sickness benefits was only temporarily granted to those who paid sickness insurance in the first and second periods based on special laws from 6 May 2020 which meant that the three month period had to be covered by their own resources (Svobodová et al., 2021).

**The timing of the compensations** was also criticized in both countries. While in Czechia, entrepreneurs and their employers had a chance to apply for compensations already in March 2020, the self-employed and agency workers waited till April 2020, and people working on work agreements and some of the self-employed until August 2020. In Slovakia, the government change in March 2020 accounted for the fact that the long-expected employment protection measures were introduced with a delay in late March, upon pressures from various stakeholders in society, including employers and trade unions. In each of the subsequent waves, the self-employed had to wait more

than a month to learn if and what kind of compensation would be available for them, compared to employees covered by compensations immediately (ibid).

Important is also the understanding of the role of **work agreements as the additional income of those with low wages from their main employment, or those outside the labour market**. Since the income from social security payments or social support system may be low, vulnerable groups such as the unemployed, disabled or parents in parental leave use the agreements as a way to increase their income. At the same time, agreements offer very low job protection and require decreased social security payments. The Ministry of Labour in its analysis of vulnerable groups at the beginning of the pandemic excluded exactly the people combining agreements with other sources of income as not vulnerable (ibid). But as shown in statistics, those were the most affected by the income decrease (Kališková & Zapletalová, 2022). This thinking caused the delay in the support programs to the most vulnerable.

**Vulnerable groups which were not entitled to compensation measures** in Czechia were referred to social compensations paid by Labour Offices, however, two main problems arose with this approach. The first referred to the functioning of the Labour Offices, whose capacities failed to meet the requests for social payments during the pandemic, but also the lack of unification of decision processes. This led to the provision of different outcomes regarding uptakes in different regions of Czechia. The second problem was the stigmatization associated with the social benefits uptake and the difficulty of the administration processes. The Czech Ministry of Labour and Social Affairs stated that they initially did not at all consider a direct compensation bonus to individuals. They assumed that the number of persons working on work agreements with lower social protection stood only at about 10,000 workers; and recommended using the current system of social transfers including the extraordinary instant support framework (Svobodová et al., 2021).

Besides the above COVID-19 related compensation measures targeting the general population that generally applied also to vulnerable groups, **Slovakia saw the adoption of two specific measures that sought to protect the Roma population**. These are not particularly targeting their labour market protection, as the employment rate among marginalized Roma communities remains extremely low. Still, being considered as one of the most vulnerable groups, it is relevant to mention that **policies were also specifically tailored to consider Roma needs from the point of view of public health, while discriminating against the Roma regarding their labour market access and rights**.

First, the national project *Korona te merel* was implemented by Zdravé regióny, a service-related public employment organization under the Ministry of Health of the Slovak Republic. The aim of this project was to improve the health conditions in the marginalised Roma communities during the pandemic. The project was implemented within the already established network of health care assistants and coordinators and included activities related to the prevention and mitigation of the impact of the

pandemic on marginalised communities. This national project was implemented within the Operational Programme Human resources and complemented another national project called Healthy Communities 2A.

Second, the national project *Support for activities addressing the adverse situations related to the pandemic COVID-19 in marginalised communities (NP COVID)* was implemented by the Office of Plenipotentiary of the Slovak Government for Roma communities, and financed from the Operational Programme Human Resources. The project was launched shortly after the outbreak of the pandemic, acknowledging government attention to the highly vulnerable group soon enough after the pandemic outbreak. The project activities consisted of direct material need provision (e.g., food aid, water supply, hygienic products, etc.), and financial coverage and provision of community assistants who serve to conduct activities in awareness raising about prevention, testing and vaccination. The project was implemented in 180 municipalities with the presence of marginalised communities, while both municipalities and civil organisations could apply for the grant scheme. In total, 200 social field workers were involved in the implementation of the project.

While the above measures targeting the Roma were the only ones designed specifically for this vulnerable group, the pandemic constrained their labour market participation to a much larger extent than that of the majority population. **Without any state-level coordination, several municipalities in Slovakia decided to fully close down Roma settlements in their villages, arguing this was a measure to prevent spreading the virus.** The armed forces and the police guarded these settlements, and interview respondents (SK07NGO, SK08NGO and SK10GOV) revealed that Roma persons were discriminated against when attempting to leave the settlement and go to work, despite meeting the nation-wide requirements set by the government (e.g., a written document confirming that the person is employed, and that their workplace is not subject to a lockdown). The government plenipotentiary aimed at negotiating and releasing this closure, and so did NGOs and public employment service organizations working with Roma communities. Since the decision to close a settlement was not centrally coordinated and subject to the decision of the local municipality, the negotiating power of the above organizations was constrained. Activation works, a form of active labour market policy to raise chances for inclusion on the labour market and one of the main sources of work for this community, were also stopped during the pandemic. This resulted in many Roma working abroad (often working undeclared) to return home after losing their jobs. As a result of such violations of labour and human rights of the Roma persons, the COVID-19 pandemic put this most vulnerable group with very low labour market participation rate to even greater poverty.

In sum, none of the adopted COVID-19 measures related to labour market participation were specifically targeting the vulnerable groups. Those with an established labour market status could benefit from measures introduced for the general working population. The most vulnerable, e.g., the marginalized Roma communities, that had already struggled with poverty and very low labour market participation, did not benefit

from the adopted measures. Instead, their labour rights were violated when compared to the majority population.

### III. Social partners and social dialogue in defence of vulnerable groups

Further to the overview of COVID-19 related measures and their availability to vulnerable groups, this section provides in-depth insights on the engagement of social partners in the protection of the selected vulnerable groups in the COVID-19 crisis, especially to *trace the mechanisms of involvement* and the impact of the pandemic experience on social dialogue as an institutionalized procedure. This approach aligns with the actor-oriented framework where the focus is on identification of relevant actors, their interactions and power relations, and the outcomes of these actions and interactions.

#### III.1 Actors

The involvement of the social partners was multi-channelled in both countries. Aside from traditional Tripartite social dialogue, several ad hoc advisory bodies were established to shape the policies and measures. Those bodies contested already established advisory bodies, including the national tripartite body. They involved a broader set of actors and there was no rule securing social partner participation. Therefore, in some cases, representatives of social partners were present, in other cases not. **The whole period of the pandemic was marked by a limited recognition of expert views and recommendations** in Czechia (Jüptner & Klimovský, 2022).

In Slovakia, three of such advisory bodies were established:

- **The Pandemic Committee** (*Pandemická komisia*), led by the Minister of Healthcare and comprising members from all Ministries, representatives of central and local government, some social partners (two employers' associations from the hospital sector and a representative of a peak-level employer association that participates in the national tripartite committee). The legal status of the Committee has been defined by the Ministry of Healthcare.
- **Central Crisis Committee** (*Ústredný krízový štáb*) – established upon Legislative Act No. 387/2002 Coll. on crisis government and responsible for all major decisions, e.g., lockdowns and social distancing measures. Members comprised representatives of the central and local government, as well as various stakeholders from business and non-state actors.
- **Crisis Committee for Economic Affairs** (*Ekonomický krízový štáb*) – advisory body to the government comprising representatives of the government, in particular, Ministries of Finance and Economy, as well as invited economic experts and other stakeholders.

In Czechia, several of the advisory structures dealing with economic and social situation during the pandemic were created and then dissolved. In the first wave, the Central Crisis Committee (*Ústřední krizový štáb - ÚKŠ*) had its economic advisory

body where 14 economists were present, among which was also the chief economist of the trade union federation ČMKOS, Martin Fassmann. This economic advisory body functioned only between March and June 2020 and was dissolved afterwards. It provided a series of recommendations on how the economy should be reopened and governed in the next waves<sup>7</sup>. This body did not bear the responsibility for the implementation of the measures.

In April 2020 the National Economic Council of the Government (*Národní ekonomická rada vlády – NERV*) was established as an advisory structure to the government; and consisted of some of the economists and experts from the economic advisory body of the National Security Council. However, the overall composition of members changed and the trade union did not have a representative in this body.

In Slovakia, the above committees served as supreme policy making bodies and were responsible for the adoption of all key COVID-19 related policies and measures. Representation of social partners in these committees was secured, however, it was unsystematic (not clear why a particular representative was selected over others) and the relationship to the long-established tripartite committee was also not clear.

In Slovakia, in the long-term perspective, the above-mentioned ad hoc committees did not put the established social dialogue committees in danger. As the interview findings reveal, **social partners continued to centre their action on the established tripartite committee, claiming its long-term operation and legitimacy, and did not feel that the ad hoc advisory committees, yet with some limited social partner participation, contested the already established roles of social dialogue as a policy making process.** After the pandemic, the above ad hoc committees were formally dismissed or stopped their operations in both countries, while regular social dialogue continues just like in times without economic or health crisis.

### III.2 Topics

The analysis of the database of adopted measures in Czechia and Slovakia to mitigate the COVID-19 impact reveals that **from 28 measures mentioned in Czechia, trade unions initiated two measures. In Slovakia, two measures out of 21 reported measures in the DEFEN-CE database were initiated by employers' associations and none by trade unions.**

In other measures, social partners were either consulted, informed, or not involved at all. Of 21 measures in Slovakia, employers' organizations and trade unions were consulted in four cases. These were cases seeking employment retention and wage replacements/subsidies explained in Section II. In Czechia, out of 28 measures, employer associations and trade unions were consulted in 5 cases.

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<sup>7</sup> <https://jansvejnar.cz/ekonomicky-poradni-tym-ustredniho-krizoveho-stabu-na-svem-poslednim-jednani-rekapituloval-a-uzavrel-sve-pusobeni/>

The above suggests that social partners were in general in a position of being informed or consulted on the COVID-19 related measures, and measures initiated directly by them are limited. Social partners were not involved, or did not initiate, any specific measures that explicitly target the vulnerable groups in the labour market. These measures concerned income replacement, debt moratorium, employment retention and support to the self-employed. None of these were explicitly related to defined vulnerable groups in the labour market.

#### **Box 4 Measures initiated by the social partners in Czechia and Slovakia**

Czechia:

- Change in social insurance provisions to treat COVID-19 as occupational disease
- Workplace compensation for difficult working conditions during the pandemic (healthcare and retail)

Slovakia:

- Compensation of loss of income for loss of those workers in the cultural sector not eligible for other income replacement schemes (technical and support staff)
- Subsidies for enterprises in the tourism sector

Source: DEFEN-CE COVID-19 Measures database

Social partners in Czechia initiated the **change in healthcare insurance provisions** to consider COVID-19 disease as an occupational disease. The Ministry of Health supported the argumentation of the Czech society for occupational diseases that COVID-19 is an occupational disease. As a result, employees (mostly essential workers in health and social care services) who became infected during their service and as a consequence of the illness had reduced income, could apply for compensation. Compensation was paid from commercial insurance, which each employer is obliged to conclude in the event an employee contracts an occupational disease. Employers did not agree with this provision, but since it did not increase their contributions, they accepted it (CZ04EO).

Except legal initiatives, trade unions were active **at the company level to compensate for the COVID-19 measures and associated difficult working conditions**. The contrast was apparent in support and compensations between healthcare workers and workers in retail. While the first group was compensated from the public budget, retail trade unions had to bargain individually in each company. As a result, Kaufland, Tesco, Albert, Lidl and Penny Market paid their employees exceptional remuneration for working under deteriorated working conditions during the 2020 spring wave of the COVID-19 pandemic. Moreover, these chains intended to repeat this positive approach towards their employees during the autumn COVID-19 wave in 2020. The total sales of these chains at the beginning of the pandemic, i.e. in March 2020 increased by up to one-half, characterised by an initial period of “panic-buying”. A similar situation

occurred during the 2020 autumn wave of the pandemic. Employer representatives supported this measure, but admitted that retail workers, despite being exposed to the virus similarly to healthcare workers, were not remunerated accordingly (CZ05EO).

In Slovakia, in early 2020, employer associations initiated a **measure to compensate the income loss of workers in the cultural sector**, who were not eligible for the support schemes from the First Aid package employment retention and income substitution schemes. These workers presented supportive and technical staff in the cultural sector that worked as free-lancers and had an income from combined employment activities and free-lance activities. Later in October 2020, the First Aid+ package introduced support also for persons with income from combined sources - dependent employment and self-employment. This targeted workers that did not draw any support (due to the combination of income) from the First aid measures of the Ministry of Labour, the Social Affairs and Family from March to September 2020, and at the same time their net monthly income did not exceed €540. The amount of the subsidy was then €540 per month.

The second measure initiated by employers in Slovakia addressed the problem of the closure of facilities in the tourism sector. As a result, **enterprises in the tourism sector were entitled to receive a direct subsidy** for the period of April 2020 until December 2021. Those companies in the tourism sector that (1) encountered a decrease of their revenues in the amount of more than 40% (compared to revenues gained in 2019) and, at the same time (2) were ordered by the Regional Health Office to close their facilities due to the COVID-19 risk, were eligible to apply for the subsidy.

### III.3 Actors' interaction

- **Social partner mutual interaction: from value sharing to interactive bargaining at the tripartite level**

At the Tripartite level, social partners in both countries recognized the threat of job loss and unemployment as the most serious challenge related to socio-economic impacts of the COVID-19 pandemic. This was the main reason why they supported the employment protection measure Kurzarbeit, as illustrated by the following interview quote from a Slovak employers' association:

*“And that was our common problem - it was the employers' problem, it was the workers' representatives' problem and of course it was the government's problem because as long as companies are going bust here, we are going to have higher unemployment and that is going to increase, the merry-go-round that is clearly there. So the problem, I think, was a common one, and certainly we had a common view of it, that we had to address it.”*

(Source: SK05EO)

This common understanding motivated social partners to cooperate and seek solutions to prevent job losses, and helped developing shared values in overcoming the challenges of the pandemic:

*“I have to say that the cooperation between us [employers and trade unions] was really good. Because we understood that, in order to achieve what we needed to achieve, we had to come together and appeal to them together, we consulted on our measures, even though our membership bases are slightly different, but in some things we also have common ground, but we were very clear on that and the common goal was clear - to help businesses to survive this situation.”*

(Source: SK02EO)

Trade unions understood the situation similarly, both in Czechia and Slovakia:

*“And we at that time, of course, as trade unions, I think this was addressed right away at the tripartite [committee], and we as trade unions basically supported it because we also saw that as employment protection really became a key priority for us at that time as well.”*

(Source: SK01TU)

*"For me, the cooperation with employers, I think it works well. In the long run, maybe it doesn't have to look like [...], but the communication there is working in my view."*

(Source: CZ01TU).

This **value sharing between employers and unions appeared right in the first wave of the pandemic** (Spring 2020), and it concerned both the need of health protection at the workplace and the need for compensation measures to protect employment. However, in both countries, the tripartite committee as the main channel of policy influence for social partners was not functioning at the outbreak of the pandemic – the government<sup>8</sup> was preoccupied with public health protection measures and regular debates with social partners on economic issues were temporarily halted. In turn, social partners, acknowledging the above-mentioned shared values, **developed pressures onto the government to redirect policy attention also to employment protection issues**. This fuelled exemplary joint statements (e.g., a joint press release by peak-level employer associations in Slovakia, while they normally act individually) and requests targeting the government and pressures to develop interactive bargaining between social partners and policy makers. **After the tripartite committees resumed to operate, social partners returned to their usual strategies to reach influence, namely, a more individualized interactive bargaining approach to seek protection of their interests in their respective sectors**. This is important, as sectoral requests differed. For example, in industry, support to Kurzarbeit was extensive due to a

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<sup>8</sup> In Slovakia, a new government was just being established in March 2020 after parliamentary elections.

decrease in production, while in essential sectors like hospitals and retail, social partners targeted the measures of high work intensity, burnout and the lack of workforce.

Later with subsequent waves of the COVID-19 pandemic, the interactive bargaining prevailed as the main form of interaction especially related to job retention measures:

*”So the rage, the dialogue, that was already happening, it was in the second phase. It was when we discussed how to mitigate the measures, how to modify something and so on. That is, after some time, after the first six months of COVID, let's say.”*

(Source: CZ04EO).

Besides the ad hoc committees established during the pandemic (see Section III.1 above), tripartite bodies in both countries remained the main channels for interactive bargaining between social partners. Tripartite bodies were recognized as stable, established, functioning channels for discussing policy proposals to help employers and employees in both countries.

Social partners, however, mentioned that **in selected topics, the interests of unions and employers appeared in competition to each other**. This was in the case of bonus payments to healthcare workers in Czechia, where employers wanted flexibility in per capita allocation while trade unions insisted on an equal sum to be paid to everyone to avoid unjust payments based on the individual preferences of bosses towards their subordinates.

*“And that was probably one of the biggest disagreements we had, where we said it was just bullshit because somebody was at home, some nurse because she had a ward that was subdued, somebody wasn't going to that job much, somebody was going on three shifts, somebody was only a social worker during the day, somebody was just going to get more and somebody was going to get less. Well, that's where we kind of disagreed.”*

(Source: CZ04EO).

Representatives of the Czech trade union metal sector OS KOVO highlighted that the mutual interaction with their counterpart, the employers' organization AutoSAP was mostly limited to health protective measures, which they discussed at the sector level, but the implementation occurred at the workplace level. Measures to mitigate social impact in the automotive metal sector were not discussed among social partners in this sector; instead, legislative approaches prevailed.

- **Interaction of social partners with the government: competition and control outside the tripartite committee**

Besides the tripartite committee, social partners sought interaction with policy makers also via other channels. Along with dialogue at the tripartite level, interview respondents referred to the strengths of personal ties with ministry officials as an

important prerequisite for social partners to be involved in COVID-19 related policy settings. Interviewed trade union representatives stated that the most important contact for them was the Ministry of Labour, while for employers this was the Ministry of Commerce in Czechia and the Ministry of the Economy in Slovakia. **Since these interactions were not guided by any specific rules and were happening outside the established social dialogue structures, social partners appeared here uncoordinated and in some cases in mutual competition.**

Employers admitted that each of the employer associations and trade unions was taking their own individual steps:

*“We have certainly taken our individual steps as well, where we, bilaterally, have tried to sort of negotiate some things towards those government representatives.”*

(Source: SK05EO)

Trade unions also mentioned the need to communicate with ministry representatives and being invited to various work groups and committees. They felt excluded from such type of interaction, while considering representation of a wider set of stakeholders including unions as necessary. In seeking contact to government representatives beyond formal channels of tripartite interactions, **individual union representative activity as well as party affiliation was an important factor of access to policy making related to COVID-19.** In that case, employer organizations and trade unions were not only competitors vis-à-vis each other, but appeared to be in competition with other stakeholders, such as NGOs. This applies e.g. in the context of the various ad hoc committees set up at the beginning of the pandemic to deal with the adoption of protective measures, in which social partners were involved on a non-transparent basis. Also, the relationship of such committees to the established long-term tripartite structures was not clear. Retrospectively, these committees ceased to exist, while tripartite committees continue in their long-established operations.

In Czechia, social partners were invited to ad hoc consultations and working groups at various ministries, but the participation in these activities depended on the individual efforts to be a part of the discussion:

*“We got into it just by being proactive and being familiar with the people in those ministries and thinking about it a little bit and trying to find out what's abroad and we always gave them something afterwards and we were on call for twenty-four hours so we were available. So we were involved not from the position of a social partner or someone who is involved in social dialogue, but from the position of some predatory association or organization that wants to be there, wants to give feedback and or maybe even demand what should be done because they didn't have the data from the field.”*

(Source: CZ04EO).

The Ministry of Economy and Commerce (*Ministerstvo průmyslu a obchodu, MPO*) actively consulted the situation in different sectors with the entrepreneurs and representatives of sector level organizations who also act as a social partners, but the purpose of these consultations was not directed towards social dialogue development.

*“But at that time the minister was Karel Havlíček and I must say that he called the meeting every week mostly on Fridays, sometimes in the evening or on Saturdays. He actually had meetings with all kinds of representatives of business associations, and he always asked about the specific problems that each association had and tried to solve them”*

(Source: CZ05EO).

Slovak social partners highlighted the role of the lawmakers and politicians in shaping the legislation and policies. They highlighted the fact, that final decision was upon the Government and Parliament and thus despite their mutual bargaining and effort to find a compromise, the final result was not in their control. Thus, at the Tripartite level, the Government and the Parliament took the control while social partners were losing it.

*“We have suggested this on a number of occasions, including in terms of those legislative amendments, how it could work, for example, in parliamentary bills, because we have been accused of this many times, that we also agreed in the inter-ministerial comment procedure on some wording of the law, where it was not easy, we came to compromise solutions, we all agreed, it was passed by the Government, and then it goes to the Parliament, and there it is changed by one parliamentary motion completely, but that it is completely different and all our effort is lost.”*

(Source: SK02EO)

Serving only as an advisory body to the government, without the right to adopt binding decisions is obviously the main disadvantage of the Tripartite committee. Despite this disadvantage, social partners acknowledge the importance of the formal tripartite body (against the ad-hoc advisory bodies established during the pandemic) in the process of policy making during the COVID-19 pandemic. As a result, **social partners remained committed to deploying their institutional power granted via their status in the tripartite committee also in their effort to influence COVID-19 induced protection measures** (Kahancová & Martišková, 2023b). Nevertheless, these efforts did not specifically address measures vis-à-vis vulnerable groups, but instead general employment concerns for the workforce as a whole (see Section III.2 on the topics addressed).

### III.4 Outcomes

This section evaluates social partner involvement in the adoption and implementation of COVID-19 measures vis-à-vis vulnerable groups in the labour market. In particular, the outcome of their involvement for the beneficiaries and third parties are evaluated.

The outcome in terms of improving the position of social partners themselves is addressed in the next section.

As shown above, **targeted policies to protect vulnerable groups in the labour market during the COVID-19 pandemic were not adopted in any of the two studied countries**. All measures that were adopted targeted the general labour market constituency. Vulnerable groups – if meeting the generally set conditionality – could benefit from these general measures. Where dedicated measures emerged (vis-à-vis the Roma minority in Slovakia), these **targeted the protection of health and not their labour market status or income security**.

In terms of advisory bodies, a temporary competition emerged between the long-established stable tripartite structures for policy advice, and ad-hoc advisory bodies that the governments in both countries established in response to the pandemic with the participation of a broader set of stakeholders beyond social partners only. The involvement of social partners in these advisory committees was ad hoc and often not transparent (e.g. not based on the largest membership base, but rather on individual leadership and ‘voice’ in the public). At the beginning of the pandemic, social partners showed concerns whether these bodies would undermine the role of tripartite social dialogue. However, as the pandemic evolved, and social dialogue resumed its functions, social partners in both countries realized the existing institutional stability of the formal tripartite committees operating for years and anchored in legal regulation. As an outcome, the role of social dialogue was not undermined.

In terms of social partner involvement, **Kurzarbeit was the flagship topic of social partner involvement in COVID-19 related measures in both Czechia and Slovakia**. Short-time work schemes emerged in close cooperation with social partners and represented the main employment protection measure during the pandemic. Both employer and employee representatives at the tripartite level reported satisfaction with the way the social dialogue helped shaping this particular measure and its legislative underpinning. In Slovakia, both trade unions and employers jointly considered themselves as a forming entity of legislative proposals, claiming that they were active in initiating proposals for the permanent legislation.

*“For example, when the permanent Kurzarbeit was introduced, we were already involved in the initial concepts. So, for example, this law was drafted in a way in which we hope that all legislation will be drafted in this way. That at the very beginning, when they had it as an idea in their heads, they started to communicate with us, a concept was created, and then somewhere in the next one and a half to three quarter years, a law was prepared which, as it were, already reflected our viewpoint to the fullest extent.”*

(Source: SK02EO)

At the same time, the executive body, the Ministry of Labour, Social Affairs and Family in Slovakia, revealed their own responsibility for the process of implementing the proposals related to *Kurzarbeit*:

*“We implemented them, we de facto translated them into life. The fact that we are a central government body and the fact that the competence of the Department of Social Services is precisely to guide and manage legislation and to issue decisions in this area, the vast majority of them were initiated by us, that is to say, from our side.”*

(Source: SK09GOV)

Finally, the spinoff of social partner roles in policy making was that the adoption of the *Kurzarbeit* **measure at the national level also activated collective bargaining at the company level**. This is because collective agreements stipulated a 60% income replacement in case of lockout or unexpected events on the employer’s side in accordance with pre-pandemic legislation. But *Kurzarbeit* introduced an 80% income replacement scheme into legislation, which created the pressure to renegotiate any collective agreements that stipulated the 60%. The willingness of employers to renegotiate increased after the *Kurzarbeit* adoption, since the state subsidized the majority of this income replacement and the costs for employers were reasonably modest:

*“In case of an obstacle to work on the part of the employer and for serious operational reasons, the income compensation is at least 60%. [...] some collective agreements ... contained the above [stipulation]. They could be 60, 70, 80, 90, they could be up to 100% , but few had that. [...] when COVID actually broke out, that provision had not yet been changed in the Labour Code. That is, the 60% automatically began to be applied, and ... when the Labour Code was changed [...] they were entitled to at least 80% unless the collective agreement stipulates otherwise. [...] there was a terrible pressure and there was also dissatisfaction of both [union] members and employees, that actually the collective agreement in this case worsens their legal position. That's why the negotiations started. [...] The second thing is that sometimes even the employer himself wanted it not to be 80%, unless *Kurzarbeit* was introduced. [...] the state also contributed [...], it actually cost the employers only 20%, because the rest was actually covered by the state. After that, even employers were more willing [to renegotiate collective agreements to stipulate the 80% income replacement].”*

(Source: SK01TU)

In **Czechia**, social partners also expressed their **satisfaction with the level of involvement in shaping the *Kurzarbeit* legislation** (in Czech discourse it was referred to as the *Antivirus* program). The main channel of involvement was, similarly to Slovakia, the tripartite consultations. For trade unions, the strong connections to the

political representation, especially to the Minister of Labour and Social Affairs further enhanced the level of involvement and impact in this piece of legislation:

*“Thanks to the fact that programs such as Antivirus, which the CMKOS called for and which the Ministry of Labour and Social Affairs very quickly launched, were very good in the beginning, they actually kept these people's jobs on the labour market, that is, the unemployment of these people did not increase, and if it did, it was only very, very minimally.”*

(Source: TU01CZ)

### III.5 Evaluation

The above evidence and analysis show the extent of social partners' involvement in COVID-19 related policy measures and the limited focus of these measures specifically on vulnerable groups in the labour market. How has this experience affected the social partners themselves, their own legitimacy, and (the future of) social dialogue and collective bargaining?

The findings from interview analysis in both countries are consistent in the perception of **increased legitimacy of social partners as actors during COVID-19**. This applies both to trade unions and employer associations in both countries. The following interview quote illustrates this perception:

*[...] the topic of First Aid was my topic. I have to say that this significantly increased our credit, because we were able to truly get involved, come with proposals how to improve this First Aid. By the way, [our association] received an appraisal for this from the Ministry of Labour.”*

(Source: EO5SK)

The relationship among social partners themselves also improved, despite being in a competitive position in some situations (see Sections III.1-III.4 above). This was fuelled by value sharing and the need to find joint approaches and solutions to mitigate the negative impacts of the COVID-19 on the labour market (although not specifically in targeting the interests of vulnerable groups):

*“For example, those relationships between representatives of employers of employees, I think, [improved]. Since there was a crisis and the situation was complicated, this connected us, so we can address issues more constructively, more operational, this is where I see a positive [impact].”*

(Source: SK02EO)

In the interviews, social partners were asked about the impact of the COVID-19 pandemic on social dialogue. They mostly evaluated its intensity and importance. In terms of intensity of social dialogue, referring to meetings and interactions, the interviewed respondents noticed that the **first wave of the COVID-19 pandemic was**

**marked by a decrease in interactions among social partners (and the government) in both countries.** In Slovakia, this was partly conditioned by the coinciding change of government; where the first official meeting with the new prime minister took place only in May 2020, while the entire 2020 year was marked by less intensive interactions and adjustments to the new digital forms of communication. In Czechia, an interview with an employer association revealed that the established communication channels at the beginning of the pandemic did not help to re-boost the interactions, because of the lack of proactive communication by the state (CZ05EO).

An important development for social dialogue was the **acceleration of digital change and reorientation to digital communication.** Digitalization is perceived by the interviewed social partners as one of the major benefits of the pandemic, the availability of online meetings and the high flexibility related to online communication. Digital communication became a standard part of social dialogue. While national social partners reported an easy shift to online meetings, at the company level, challenges occurred more often, as illustrated by the following interview quote:

*“In our group, we significantly reduced contacts. [...] the common regular meetings of officials and workers and the management completely stopped during COVID-19. This was caused partly by the structure, there are for example more elderly persons that were not really technically ready, so it took a longer time until we started online meetings. And mainly, the online meetings are one-way, people don’t tend to get involved into a dialogue. I think this was quite a large barrier and I would say it still persists.”*

(Source: CZ05EO)

Some respondents reported a rather neutral impact of the pandemic on the intensity of social dialogue. The main reason is that the **general, long-term functioning of interactions between the government and social partners did not change.** However, as a Czech interview quote illustrates below, social partners observed a change in the government orientation and consider this crucial for the quality of tripartite consultations.

*“[...] There was a change in the government. This is logical, there is a right-wing government. So it is logical that it will remain more distant to trade unions than a left-wing government. [Social dialogue] works with some limitations, but we cannot say that we would be kept excluded from negotiations.”*

(CZ01TU)

Interview findings also suggest an improved communication of employer association vis-à-vis local governments and territorial governments, for example, in Czechia:

*“The communication with other sections of public administration, like regions, cities, municipalities, improved. At once, it is as if social dialogue has been broadened and we were having regular meetings and we were addressing issues with the others for a long time.”*

(Source: CZ04EO)

At the same time, **social partners did not report improvements in their interactions with NGOs**. It is important to recall that **NGO representatives played an important role in articulating the needs and impacts of the measures on vulnerable groups** such as the self-employed, persons exposed to poverty due to working in flexible contracts or being single parents. This could be related to the COVID-19 transformation of understanding vulnerabilities, which was the topic carried out mostly by NGOs as the pandemic evolved and affected some sectors of the population much more than others.

NGOs were active in addressing the needs of marginalized Roma communities, especially in Slovakia, but these were related mostly to their health situation and less to their labour market situation. During the interviews, NGOs highlighted the discriminatory treatment of the marginalized Roma communities in their access to work (SK07NGO and SK08NGO). The State Plenipotentiary for Roma Communities (SK10GOV) also acknowledged discrimination, but together with NGOs, these actors lacked decision-making powers and claim they could not have improved the situation. **While social partners possessed greater access to decision-makers, the labour market discrimination of marginalized Roma communities based on COVID-19 lockdown measures were not on the social partner agendas, leaving these communities without proper interest representation coupled with decision-making powers**. Similarly, in Czechia, social partners did not articulate the needs of vulnerable groups such as the self-employed or working on agreements. NGOs articulated their observations and survey results among vulnerable groups via media, which had an impact on the form and size of the supportive measures (see Part II). This however remained outside of the established channels of influence where social partners were involved.

In sum, social partners perceived an improvement in their legitimacy and role in access to COVID-19 related decision making, but the impact on the long-term established social dialogue and bargaining structures is neutral. Convergence in interests between unions and employers occurred on employment protection measures, which fuelled their greater relevance in the adoption of related state measures. However, none of these measures specifically concerned the vulnerable groups. These were rather represented via NGOs, which however lacked access to policy-making. The pandemic did not yield improvements in cooperation between social partners and NGOs, nor the expansion of social partner dedicated representation of interests of particular vulnerable groups.

## IV. Conclusions

The COVID-19 pandemic affected national economies, labour markets as well as lives of individuals. As a key external shock shaping societies and economies, it also created opportunities for gaining influence over related policy domains. The aim of this report is to assess such opportunities, namely, how social partners and social dialogue processes helped shaping COVID-related measures that aimed at protecting vulnerable groups at the labour market. Being part of a larger project covering 12 European countries, the current report focused on Czechia and Slovakia as most similar cases within embedded neoliberal political economies and industrial relations systems in Central and Eastern Europe. This section summarizes the study's main findings in the form of responses to a set of questions below.

- **What conclusions on the impact of the pandemic on the labour market, and in particular, on vulnerable groups, can be drawn from the comparison between the studied countries?**

In both countries, the pandemic brought economic decline and a modest rise in unemployment. Vulnerable groups from the labour market perspective did not significantly differ across Czechia and Slovakia – experts and respondents identified single working parents, people in precarious work situations (e.g. with fixed-term contracts) and persons with low income as those most exposed to poverty and job loss because of the pandemic. In both countries, but significantly more importantly in Slovakia, marginalized Roma communities that belong to the most poor and vulnerable groups in society in general, were further hit by the pandemic and even faced some discriminatory treatment when national policy measures were not applied to these communities due to the decisions of local authorities (e.g., concerning access to one's workplace).

- **What measures were adopted to protect the identified vulnerable groups, do the countries covered differ from each other, and in what aspects and how can the differences be explained?**

Neither Czechia nor Slovakia introduced measures to specifically protect vulnerable groups; all COVID-19 related state measures were broadly aimed at the protection of the employment level, mostly focused on full-time employees. Adjustments in the eligibility and the scope of measures were introduced later as the pandemic evolved and particular groups in the labour market remained excluded from the initial measures (e.g., liberal arts professions, persons with multiple small contracts, gig workers, self-employed, etc.). Acknowledging this overall trend, the benefit of vulnerable groups from the introduced measures was highly individualized depending on the person's labour market situation. The most important and widely debated measures - *Kurzarbeit* schemes, income replacement and the pandemic care supplement – did also apply to eligible individuals from among the vulnerable groups. However, the uptake of the offered compensations among precarious employees was estimated low, mostly because of the difficult conditions and requirements to fulfil. Slovakia saw the adoption of two specific measures that sought to protect the Roma population. These did not particularly

target their labour market protection, as the employment rate among marginalized Roma communities remains extremely low. Still, being considered as one of the most vulnerable groups, it is relevant to mention that policies were also specifically tailored to consider Roma needs from the point of view of public health, while treating the Roma in a highly discriminatory manner regarding their labour market access and rights.

- What role did social partners play in adopting these measures, and how did their interaction with other stakeholders evolve to shape these measures?

While social partners possessed greater access to decision-makers, the labour market discrimination of marginalized Roma communities based on COVID-19 lockdown measures were not on the social partner agendas, leaving these communities without proper interest representation coupled with decision-making powers. Similarly, in Czechia social partners did not articulate the needs of vulnerable groups such as the self-employed or working on agreements. NGOs articulated their observations and survey results among vulnerable groups via media, which had an impact on the form and size of the supportive measures (see Part II). This however remained outside of the established channels of influence where social partners were involved.

- Were differences between the studied countries in the role of social partners observed? If so, how can they be explained?

The social dialogue structures and the role of social partners in accessing policy making are extensively similar in both countries. In turn, social partners response and engagement in designing COVID-19 related measures was also similar. Social partners in both countries often cooperate with each other and seek inspiration from their counterpart. This was the case also during the pandemic, although the actual engagement occurred exclusively within national domains, without formal cross-border cooperation. One key difference between both countries is that Slovakia has a more established and practiced (sectoral) collective bargaining compared to Czechia. When collecting data for this report, the Czech respondents did not refer to social partner involvement in the design of national COVID-19 measures (for the general labour market population, not specifically for vulnerable groups) having a direct impact on collective bargaining. In contrast, in Slovakia, the interviews revealed that the adoption of national measures activated collective bargaining because the original stipulations in collective agreements regarding income replacement in case of lockout fell below the national regulation.

- What impact did the social partner activity/initiatives yield on strengthening their legitimacy in society as a policy-relevant stakeholder? Did their involvement help strengthen the established and formalized channels of influence, e.g. national tripartite social dialogue fora or other means of influence? What differences were found across the studied countries?

In both countries, the social partners perceived an improvement in their legitimacy and role in their access to COVID-19 related decision making, but the impact on the long-term established social dialogue and bargaining structures is neutral. Convergence in interests between unions and employers occurred on employment protection measures,

which fuelled their greater relevance in the adoption of related state measures. However, none of these measures concerned specifically the vulnerable groups. These were rather represented via NGOs, which however lacked access to policy – making. The pandemic did not yield improvements in cooperation between social partners and NGOs, or the expansion of social partners’ dedicated representation of interests of particular vulnerable groups.

- **What key policy implications and lessons can be drawn from this country comparison?**

While the emergence of ad hoc advisory bodies to the government upon the outbreak of the pandemic challenged the established social dialogue structures, in the long-run, these challenges are not justified. After the initial turbulent policy making via various ad hoc committees, the social dialogue structures, that had been established in both Czechia and Slovakia for decades, did not undergo any relevant weakening or strengthening. Social dialogue structures, albeit weakening and shifting towards individualized lobbying activities by peak-level social partners, remained stable and were not shaken by the pandemic.

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