

**Third-Party Submission pursuant to Rule 21A of the Rules
of the European Committee of Social Rights
*submitted in response to Ireland's 21st National Report on
the implementation of the European Social Charter***

Majka Ryan, Stefano Angeleri, Eimear Spain, and Jennifer Schweppe

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by

Centre for the Study of Hate and Inequalities – SHINE (University of Limerick, Ireland)

in consultation with

ANESC – Academic Network on the European Social Charter and Social Rights (Irish/UK section)

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About the Centre for the Study of Hate and Inequalities – SHINE

The Centre for the Study of Hate and Inequalities – SHINE is an interdisciplinary priority research centre at the University of Limerick. Through our research, we seek to understand conflict and hate, document and expose inequalities, and create actionable and practical solutions to global challenges. At SHINE we are committed to creating new knowledge through interdisciplinary scholarship and cross-sectoral dialogue, and in doing so we work with civil society organisations and international human rights organisations. Through our scholarly research, we are committed to the realisation of the United Nations Sustainable Development Goals and the promotion of human rights, democracy, and the rule of law. Our research is located across seven thematic strands:

- Identities, Injustice, and Inequalities
- Borders and Migration
- Criminalising Hate
- Young People in an Inclusive Society
- Populism and Politics: Democratic Resilience and Democratisation
- Social Inclusion and Community Transformation
- Communicating Hate: Media, Emerging Technologies, and Digital Safety.

SHINE is a space in which interdisciplinary scholarship flourishes, where translational ground-breaking research originates, and where we prioritise a commitment to creating an inclusive and safe space for future generations.

About the Academic Network on the European Social Charter – ANESC

The Academic Network on the European Social Charter (ANESC) is a non-profit network that brings together scholars and other experts committed to promoting the European Social Charter and social rights through education and training initiatives, research projects and publications, and contributions to national and international judicial and

quasi-judicial proceedings. The Network is organised through national sections, including the Irish–UK Section, of which several of the authors of this submission are members.

About this Report

This report takes the form of a “shadow” or “alternative” report to the European Committee for Social Rights, and has emerged from the work of SHINE in the area of *Identities, Injustice, and Inequalities*, and its strong collaborative relationship with ANESC. Supporting the work of international human rights organisations in this way is an important part the work of both organisations, where evidence-based scholarship allows such organisations to gain a more nuanced understanding of the realisation of rights in Ireland, especially for vulnerable groups.

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Introduction

Members of SHINE and ANESC have prepared this report in response to Ireland's 21st National Report on the implementation of the European Social Charter. The report does not offer a comprehensive response to all relevant questions submitted to Ireland and other states that have accepted the collective complaint procedure (Statutory Report Group 1), and should be read as part of the broader collection of reports submitted from other third parties.

Given the expertise of the contributors, this report centres on the following issues for which we can offer evidence-based responses to the Committee:

- A. Working time of medical professionals (art. 2)
- B. Issues relating to psychosocial risks and other new and emerging occupational risks in the gig and platform economy (art. 3)
- C. Issues relating to fair remuneration in atypical jobs (art. 4).

A. Article 2 “the right to just conditions of work” – Working time of medical professionals

The European Committee of Social Rights (ECSR) specifically requested information relating to the issue of working hours in the health sector in its June 2025 list of questions.¹ The Government of Ireland's December 2025 State report on the implementation of Articles 2, 3, 4, 5, 6 and 20 of the European Social Charter (hereinafter, the "State Report")² is silent on the issue.

This Organisation of Working Time Act 1997 (OWTA), as amended, transposed the European Working Time Directive (2003/88/EC) (EWTD) into national law. Compliance with the Act has been problematic within the health sector as evidenced. The Medical Council's annual *Workforce Intelligence Report*, which monitors doctors working practices, found in 2024 that **23.1% of respondents reported working more than 48 hours** on average per week, in contravention of the EWTD and national legislation.³ The rates of compliance with the EWTD varied across divisions, with **37.1% of trainee doctors working in excess of 48 hours on average per week**.⁴ The experience of Non-Consultant Hospital Doctors is illustrative of the challenges faced in this sector.

In 2024, the National Taskforce on the Non-Consultant Hospital Doctor (NCHD) Workforce published their final report, and recognised compliance with EWTD and the OWTA as a priority action area, with NCHDs requiring “prompt access to a fair and equitable roster”⁵

¹ European Committee of Social Rights, *Proposed Questions for the Next Statutory Report Group 1 (to be submitted by States Parties having accepted the collective complaints procedure by 31 December 2025)* (5 June 2025) <https://rm.coe.int/questions-2025-eng/4880288419> accessed 26 June 2026.

² Government of Ireland, 21st National Report on the Implementation of the European Social Charter. Articles 2, 3, 4, 5, 6 and 20 RAP/RCha/IRL/21(2026), 30 December 2025 <https://rm.coe.int/rap-rcha-irl-21-2026/48802a1abc> accessed 26 June 2026.

³ Medical Council, *Medical Workforce Intelligence Report 2024* (Medical Council, 2025), p. 21, available at [Publication title Publication Subtitle second line](#). However, this reflected a decrease from 26.6% in 2023 and 28.6% in 2022.

⁴ Ibid, p. 21.

⁵ Department of Health, *National Taskforce on the Non-Consultant Hospital Doctor (NCHD) Workforce: Final Recommendations Report* (Department of Health 2024), available at, [ca4a6c6c-national-taskforce-on-the-non-consultant-hospital-doctor-nchd-workforce-final.pdf](#), p. 5

which is compliant with the EWTD and OMTA. However, two years later, in May 2026, the Irish Medical Organisation noted that “[i]llegal and unsafe” **working hours remain a concern**, with ongoing reports of breaches of the OMTA including 24- or 36-hour shifts being common in some disciplines of medicine.⁶

Beyond a breach of legal obligations, excessive working hours are directly linked to **diminished patient safety, reducing cognitive function and increasing the risk of medical error**.⁷ Therefore, continued non-compliance with working time legislation has implications for both the health and well-being of doctors and the safety of patients.

The persistence of excessive working hours is reflective of broader challenges within the sector, including workforce shortages, a challenging recruitment environment and structural challenges. While the State has committed to implementation of the EWTD, it must be acknowledged that achievement of these aims requires that “clinical service configuration and infrastructural deficits within the Irish health service are addressed.”⁸

We submit:

In line with Article 2 of the European Social Charter (right to just conditions of work), as interlinked with its article 3 (right to safe and healthy working conditions) and article 11 (the right to protection of health), Ireland should:

- 1) Ensure the effective enforcement of statutory limits on working time through strengthened labour inspection, transparent monitoring of compliance across all health services and effective remedies for breaches;

⁶ Catherine Reilly, 'The NCHD Taskforce Report: Two Years On' *Medical Independent* (8 March 2026) <https://www.medicalindependent.ie/in-the-news/news-features/the-nchd-taskforce-report-two-years-on/> accessed 26 June 2026.

⁷ Matre D, Skogstad M, Sterud T, Nordby KC, Knardahl S, Christensen JO, Lie JS. Safety incidents associated with extended working hours. A systematic review and meta-analysis. *Scand J Work Environ Health*. 2021 Sep 1;47(6):415-424. doi: 10.5271/sjweh.3958. Epub 2021 Apr 9. PMID: 33835186; PMCID: PMC8504541.

⁸ Department of Health, *National Taskforce on the Non-Consultant Hospital Doctor (NCHD) Workforce: Final Recommendations Report* (Department of Health 2024), available at, [ca4a6c6c-national-taskforce-on-the-non-consultant-hospital-doctor-nchd-workforce-final.pdf](#), p. 13.

- 2) Eliminate excessive working hours by addressing workforce shortages, ensuring compliant rostering and prohibiting shifts that exceed legal limits;
- 3) Recognise inadequate staffing levels, and increase investment in health service infrastructure, essential to guarantee safe working conditions, protect doctors' health, and safeguard patient safety and well-being. This should be led by denormalising breaches of OMTA.

B. Article 3 “the right to safe and healthy working conditions” – Issues relating to psychosocial risks and other new and emerging occupational risks in the gig and platform economy

Given that one of the key areas of focus in the ECSR's June 2025 list of questions concerns the content and implementation of national policies addressing psychosocial risks and other new and emerging occupational risks in the gig and platform economy, this section focuses on that issue, with particular attention to situations where such risks arise in the context of work performed in private homes.

In response to the queries regarding Article 3.1, *Health and safety and the working environment*, the State responds by noting that the Health and Safety authority is responsible for the **promotion and enforcement** of occupational safety and health legislation.

With respect to Article 3.1 and the platform economy, Ireland cites Article 12 (Safety and Health) of the Directive 2024/2831 of the European Parliament and of the Council of 23 October 2024 on improving working conditions in platform work (the “EU Platform Work Directive”), noting that the State is working to a transposition deadline of December 2026. With respect to obligations, the State notes:

“[D]igital labour platforms to assess and manage risks to workers’ safety and health arising from automated systems, including psychosocial and ergonomic risks. Platforms must evaluate safeguards, implement preventive measures, and ensure workers are informed and consulted. They are prohibited from using automation in ways that cause undue pressure or harm and must also prevent violence and harassment through effective reporting channels.”⁹

⁹ Government of Ireland, 21st National Report on the Implementation of the European Social Charter. Articles 2, 3, 4, 5, 6 and 20 RAP/RCha/IRL/21(2026), 30 December 2025 <https://rm.coe.int/rap-rcha-irl-21-2026/48802a1abc> accessed 26 June 2026, p. 9.

We note that companies operating in the gig and platform economy predominantly engage workers on a self-employed basis and are also **predominantly performed by migrants** across Europe.¹⁰ Research shows multiple benefits that vulnerable and frequently socially excluded communities gain from having easy access to flexible work.¹¹ Other studies have revealed that migrant workers in platform-mediated work report encountering fewer bureaucratic restrictions and less frequent experiences of discriminatory recruitment practices than they would when trying to obtain regular employment.¹²

The Health and Safety Authority lists the following as typical psychosocial hazards:

“[B]ullying, conflicting demands and lack of role clarity, lack of control over how work is done and/or the work rate, job insecurity, remote working, high-dependency clients, poorly managed organisational change, lone working, lack of support from colleagues or management, poor communication or lack of communication, [and] shift work”.¹³

It sets out a range of responsibilities for employers and employees, as well as means by which a risk assessment for psychosocial hazards can be carried out.

¹⁰ Piasna, A. and Zwysen, W. (2026) ‘Is Platform Work Migrant Work? The Economic and Social Conditions behind Migrant (Over-)Representation in the Platform Economy across Europe’, *International Labour Review*, 165(1), pp. 1–22. <https://doi.org/10.16995/ilr.23806>.

¹¹ van Doorn, N. (2024) ‘The contingencies of platform power and risk management in the gig economy’, *Internet Policy Review*, 13(2). <https://doi.org/10.14763/2024.2.1778>.

¹² Zwysen W. and Piasna A. (2024) Digital labour platforms and migrant workers: analysing migrants’ working conditions and (over)representation in platform work in Europe, Working Paper 2024.06, ETUI, https://www.etui.org/sites/default/files/2024-03/Digital%20labour%20platforms%20and%20migrant%20workers_2024.pdf

¹³ Health and Safety Authority, Managing Psychosocial Hazards in the Workplace 2023 (Information Sheet, April 2023) https://www.hsa.ie/eng/publications_and_forms/publications/occupational_health/managing_psychosocial_hazards_in_the_workplace_2023/ accessed 26 June 2026.

Research shows that migrant platform workers in Ireland do encounter such **multifaceted psychosocial risks**.¹⁴ In the context of home care and domestic platform work, the key issue is that work is carried out in private homes, where a defining feature of the working environment is the absence of oversight or supervision.¹⁵ This results in a complex and interconnected set of health and safety risks that platform workers are required to assume. While these risks affect all platform workers, structural conditions exacerbate migrants' intersectional vulnerabilities and heighten their exposure to such risks. Migrant platform workers' vulnerability, arising from these structural conditions, creates favourable conditions for exploitation.¹⁶

Furthermore, research finds that gig providers (private households) do not see themselves as employers or the work as employment, but rather as 'informal help'.¹⁷ In addition, as workers are **frequently forced into self-employment**, platforms position themselves as work mediators or facilitators rather than as employers. In this work context, individual workers must protect *themselves* from psychosocial harm. This perception persists despite the clarification provided by the Supreme Court in *Revenue Commissioners v Karshan (Midlands) Ltd t/a Domino's Pizza*, which established a structured framework for determining employment status based on the reality of the working relationship rather than contractual labels.¹⁸

¹⁴ Ryan, M. and Murphy, C. (forthcoming 2026) 'Labouring in the Shadows: Precarity in Platform-Based Home Care and Domestic Work', Platformizing Domestic Work. Work Organization and Worker Protection across Europe, Springer. See also, Ryan, M. and Murphy, C. (2026) 'Individualised risk in platform-mediated home care and domestic work: Insights from migrant workers in Ireland', Nevin Economic Research Institute Conference, South East Technological University (SETU) Waterford, 26 May, <https://www.nerininstitute.net/sites/default/files/2026-05/Majka%20Ryan%20UL%20presentation%2026%20May%2026.pdf>

¹⁵ Pulignano, V., Marà, C., Franke, M. and Muszynski, K. (2023) 'Informal employment on domestic care platforms: a study on the individualisation of risk and unpaid labour in mature market contexts', Transfer: European Review of Labour and Research, 29(3), pp. 323-338. <https://doi.org/10.1177/10242589231177353>

¹⁶ Misztal, B. (2011). The challenges of vulnerability: In search of strategies for a less vulnerable social life. Palgrave Macmillan.

¹⁷ Pulignano, V., Marà, C., Franke, M. and Muszynski, K. (2023) 'Informal employment on domestic care platforms: a study on the individualisation of risk and unpaid labour in mature market contexts', Transfer: European Review of Labour and Research, 29(3), pp. 323-338. <https://doi.org/10.1177/10242589231177353>

¹⁸ *The Revenue Commissioners v Karshan (Midlands) Ltd t/a Domino's Pizza* [2023] IESC 24.

Research shows that platform-mediated work can contribute to:

- Risks of racism and discrimination
- Health risks, associated with contagious diseases but also heavy lifting without ergonomic support or appropriate equipment for such tasks
- Emotional and mental health risks associated with:
 - Undue stress caused by the sense of powerlessness as well as algorithmic monitoring and rating systems. Negative client reviews affect workers' ability to secure gigs and forces them to agree to unreasonable requests from gig providers
 - In the home care sector, unmitigated and unsupported costs of empathy and compassion for high dependent patients
 - Inability to afford mental health supports
- Risk of economic deprivation as workers are pressured to accept work below minimum wage
- Risk of underemployment caused by chronic job insecurity and unpredictable work patterns.¹⁹

We submit:

- 1) The lack of transposition of the EU Directive means that, currently, there is no visibility on the part of the HSA and State on the issue of occupational risks associated with platform work (as relevant under Article 381 of the European Social Charter).

¹⁹ Ryan, M. and Murphy, C. (forthcoming 2026) 'Labouring in the Shadows: Precarity in Platform-Based Home Care and Domestic Work', Platformizing Domestic Work. Work Organization and Worker Protection across Europe, Springer. See also, Ryan, M. and Murphy, C. (2026) 'Individualised risk in platform-mediated home care and domestic work: Insights from migrant workers in Ireland', Nevin Economic Research Institute Conference, South East Technological University (SETU) Waterford, 26 May, <https://www.nerinstitute.net/sites/default/files/2026-05/Majka%20Ryan%20UL%20presentation%2026%20May%2026.pdf> .

- 2) The information provided is insufficient to assess whether risks in the sector have been, adequately incorporated into occupational health and safety regulations regarding Platform Workers, and whether effective enforcement mechanisms are in place to ensure compliance (under Articles 3§2 and 3§3 of the European Social Charter).
- 3) The swift and effective transposition of the EU Platform Work Directive is essential to ensure that all platform workers are, where applicable, correctly classified as employees and adequately protected from psychosocial risks through preventive, regulatory, and enforcement measures, including when performing tasks such as caring or cleaning in private homes, in order to ensure full compliance with Article 3 of the European Social Charter, and national law.

C. Article 4 “the right to a fair remuneration – Issues relating to fair remuneration in atypical jobs

Though not directly addressed in the list of questions in this reporting cycle, in its 2022 Conclusions (Ireland),²⁰ the ECSR, put forward arguments and raised questions about fair remuneration for workers in atypical employment. The Committee noted: “the requirement that workers be remunerated fairly to ensure a decent standard of living for themselves and their families applies equally to atypical jobs” and referred in particular to:

“workers employed in emerging arrangements, such as the gig economy or platform economy, **who are incorrectly classified as self-employed** and therefore, do not have access to the applicable labour and social protection rights. As a result of the misclassification, such persons cannot enjoy the rights and protection to which they are entitled as workers. These rights include the right to a minimum wage”.²¹

The Committee, in the 2022 Conclusions, asked Ireland to explain “what measures are being taken to ensure fair remuneration of workers in atypical jobs as well as misclassified self-employed persons in the platform economy”.²²

During the new reporting cycles this source of concern has not been addressed.

We note that gig or platform workers are at risk of economic deprivation. Recent research²³ on platform-mediated work performed by migrants in home care and domestic work sector in Ireland shows that:

²⁰ European Social Charter (2022) European Committee of Social Rights Conclusions 2022: Ireland, pp. 15-16, <https://rm.coe.int/conclusions-2022-ireland-e/1680aaa247>

²¹ Ibid.

²² Ibid.

²³ See, for example, Murphy, C., Gibbons, T. and Ryan, M. (2025) ‘Playing ostrich’: sectoral social dialogue and digital platforms in Ireland, University of Limerick: The European Commission's Directorate-General for Employment, Social Affairs and Inclusion, https://origamiproject.it/reports/d4.2_report.pdf

- Precarious nature of the platform-mediated work and the competitive environment in which workers bid for gigs often without success leads to **chronic underpayment**.
- The imperative to earn a livelihood within this competitive environment exerts pressure on workers to accept gig rates that fall below the statutory minimum hourly wage.
- Underpayment of these workers results from performing significant amount of unpaid work that necessitates from constant need for platform monitoring / presence to respond to requests immediately upon their arrival, leaving time-gaps between gigs to accommodate for unforeseen circumstances and gig cancellations.
- Workers report lacking access to the social safety nets for periods of unemployment or illness.
- Workers report an **absence of holiday pay and compensation for public holidays**, resulting in their effective hourly rates being significantly lower than those of workers in standard employment.
- The **cost of travel, work equipment and training/upskilling** are also assumed by workers.

In our view, this evidence viewed in the context of the limited information provided by the Government regarding the measures taken to fulfil its obligations in relation to fair remuneration for workers in atypical forms of employment, raises serious concerns as to whether remuneration meets the minimum threshold required under Article 4§1 of the European Social Charter, namely that wages should not fall below 50-60% of the net average national wage.²⁴ The disproportionate representation of migrant workers in this sector raises additional concerns as to whether the measures and practices in question give rise to indirect discrimination on the ground of nationality, in breach of Article E of the Revised Charter (in conjunction with article 4).

²⁴ European Social Charter (2022) European Committee of Social Rights Conclusions 2022: Ireland, pp. 14-15 <https://rm.coe.int/conclusions-2022-ireland-e/1680aaa247>

We submit:

Ireland must ensure that platform workers, primarily legally staying non-nationals, receive fair remuneration consistent with Article 4§1 of the European Social Charter by:

- 1) Guaranteeing payment for all working time, including waiting time intrinsic to platform work;
- 2) Preventing earnings from falling below the statutory minimum wage and the Charter's adequacy threshold;
- 3) Strengthening enforcement; and
- 4) Ensuring entitlement to paid leave, public holiday pay, and appropriate social protection.



Centre for the Study of Hate and Inequalities – SHINE

The Centre for the Study of Hate and Inequalities – SHINE at the University of Limerick shines a light on the hardest and harshest realities of communities and societies.

From interpersonal violence to global injustice, our work seeks to understand conflict and hate, document and expose inequalities, and create actionable and practical solutions to global challenges. Through our scholarly research, we are committed to the realisation of the United Nations Sustainable Development Goals and the promotion of human rights, democracy, and the rule of law.

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