New welfare models in action!
Evidence of successful experiences
(with a focus on long-term care)

Giovanni Lamura

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Contents of presentation

1. Introduction: a conceptual framework

2. Developments on the demand side of LTC

3. Promising experiences in LTC provision

4. The multifaceted relationship between migration & LTC
Welfare models

1. Basic definition of welfare state: organised systems aimed at promoting & protecting the wellbeing of the population, by means of norms, benefits & services in different areas (e.g. health & social care, employment & education)

2. Models or regimes indicate the peculiar way key actors relate to each other and according to their role within the system
The JPY-MYBL conceptual framework

- Collective wellbeing
- Individual wellbeing

- Sustainable welfare
  - Socio-political sustainability
  - Socio-economic sustainability

- Inclusive institutions and inequalities
  - Political decision and policy making
  - Public goods and services

- Economic institutions and markets
  - Economic management
  - Economic production

- Social production and productive life
  - Learning and personal growth

- Quality of life
  - Wellbeing and healthy life
  - Civil society and social environments

- Conditions
  - Environment
  - Science and technology
  - Ethics
  - Demographic change
Long-term care: a conceptual model

CARE NEEDS

- demographic
  (number of older people)
- health related
  (physical, mental and emotional)
- socio-economic
  (social exclusion & poverty)
- technology
  (AAL & ICT)

LTC DEMAND

MATCH ?

LTC PROVISION

- formal
  (public & private)
  - in-kind
    (home/residential) services
  - cash-for-care schemes
- informal
  - family volunteers
  - friends & neighbours
### Care regimes as a context for social innovation

<table>
<thead>
<tr>
<th>Demand for care</th>
<th>Provision of informal care</th>
<th>Provision of formal care</th>
<th>Acknowledgement of LTC as a social risk</th>
<th>Countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal-Nordic</td>
<td>Medium</td>
<td>Low</td>
<td>High</td>
<td>Denmark, Finland, The Netherlands, Sweden</td>
</tr>
<tr>
<td>Standard-care mix</td>
<td>Medium - high</td>
<td>Medium</td>
<td>Medium</td>
<td>Germany, Austria, France, UK</td>
</tr>
<tr>
<td>Family based</td>
<td>High</td>
<td>High</td>
<td>Low</td>
<td>Spain, Italy, Portugal, Ireland, Greece</td>
</tr>
<tr>
<td>Central &amp; Eastern European (CEE)</td>
<td>Low</td>
<td>High</td>
<td>Low</td>
<td>Hungary, Poland, Czech Republic, Slovakia, Romania, Bulgaria, Estonia, Latvia, Lithuania</td>
</tr>
</tbody>
</table>

Source: Leichsenring & Schumann 2016
Long-term care: a conceptual model

CARE NEEDS
- health related (physical, mental and emotional)
- socio-economic (social exclusion & poverty)
- demographic (number of older people)
- technology (AAL & ICT)

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  - family volunteers
  - friends & neighbours
- in-kind (home/residential) services
- cash-for-care schemes
**Traditional vs. prospective**

old age dependency ratio (OADR)

**traditional OADR:**  
over 65 year old population  
population aged 20-64

**prospective OADR:**  
Population with a remaining life expectancy < 15 years  
Over 20-year old population with a life expectancy > 15 years

Source: Wittgesteing Centre 2012
Traditional old-age dependency ratio projected for 2030

Source: Wittgesteing Centre 2012
Prospective old-age dependency ratio projected for 2030

Source: Rodrigues et al. 2012
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Examples of networks promoting healthy and active ageing

**WHO - Healthy Cities Network:**
- seeks to put health high on the political agenda of cities and to build a strong movement for public health at local level;
- emphasizes equity, participatory governance and solidarity, inter-sectoral collaboration and action.

**WHO – Network of Age-friendly Cities and Communities:**
- encourages active ageing by optimizing opportunities for health, participation and security to enhance quality of life as people age
- supports local authorities in adapting structures & services to be accessible to & inclusive of older people with varying needs and capacities
Long-term care: a conceptual model

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Material deprivation and risk of poverty in the over 65 year old population

Source: Rodrigues et al. 2012
Good practices in fighting poverty

- Life course perspective: **employment** policies are the single best defense against poverty (Richardson 2012)

- **Old-age minimum income schemes:** provide some protection from poverty, esp. if based on “reference budgets” (rather than on 60% poverty line) (EMIN 2014)

- An **integrated approach** (covering labour market, health & LTC, education and housing): ensures best results in addressing poverty in relation to social exclusion (Dutch Ministry of Social Affairs & Employment 2016)

- To be **meaningful**, “social innovations” to fight poverty should be: sustainable, driven by real needs, empowering people and communities, bottom-up, and supporting (not replacing!) services (EAPN 2016)
Social isolation: % of older people who seldom meet friends or relatives

Source: Rodrigues et al. 2012
Intergenerational co-housing experiences

Cohousing project ‘Casa alla Vela’ (Italy):

- **aims**: to foster intergenerational contacts & solidarity between older persons and students living in same building
- **contents/methods**: older people live with peers in apartments comprising private rooms & common spaces, sharing costs (food, electricity, water & rent), as well as of care staff. Another apartment hosts students who support their older neighbours on a voluntary basis. A social cooperative supervises the initiative, supported by volunteers.
- **outcomes**:
  - costs of care and daily life are more sustainable for both participants & local authorities
  - social integration is fostered via intra-/intergenerational exchange
  - independent living is promoted, institutionalization is delayed

Source: UNECE 2015
Long-term care: a conceptual model

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“Sweden has experienced a fall in the need for help among older people, despite incidence of health problems has increased. More likely explanation: better housing standards and better access to assistive technology have made it easier for people to manage without help”.

“A key way of reducing care demand is by improving the possibilities for the elderly to stay living in their own home, by introducing intelligent and user-friendly technical support (LTC efficiency-enhancing technologies)”.

Source: Riedel 2011
Technology as a means to reduce care demand /2

The VIRTU Channel (Baltic Islands):

- **aim**: prevent social isolation & increase access to professional services in Finnish & Estonian remote rural areas via ICT; help older persons to live at home; enhance social interaction, improve quality of life & safety.

- **contents/methods**: a touch-screen device allows interaction via video and audio with two or more users via internet, to participate in discussions on various topics, exercise and singing sessions.

- **outcomes**:
  - promoted empowerment;
  - improved social contacts.

Source: UNECE 2015
Long-term care: a conceptual model

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Informal carers: the backbone of LTC

“About 80% of all LTC across the EU is provided by spouses, daughters, other relatives and friends...” (Triantafillou 2011)

“Even in countries with a well-developed supply of formal LTC, the number of informal carers is at least twice as big as the formal care workforce” (EC 2013)
The different role of formal and informal care across various LTC regimes/models

Source: Rodrigues et al. 2012
## Formal supports for informal carers

<table>
<thead>
<tr>
<th></th>
<th>direct</th>
<th>indirect</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>specific</strong></td>
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<tr>
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<td>primarily addressing carers (e.g. respite care)</td>
<td>primarily addressing care recipients (e.g. elder care services)</td>
</tr>
</tbody>
</table>

Source: Naiditch et al 2013
Work-life balance measures in Europe

1. Mature schemes:
   a. Universal & comprehensive support schemes for carers (DK, SE, NO, IS, FI)
   b. Services mainly to care recipients & specific supports to carers (AT, BE, CH, DE, ES, FR, IE, IT, LU, NL, PT, RO, SI, SK, UK)

2. Less developed support schemes (BG, CY, CZ, EE, EL, HR, HU, LI, LT, LV, MK, MT, PL, RS, TR)

Source: Bouget et al. 2016
Comprehensive support schemes for carers: main characteristics

1. **mix** between short-term leaves, cash benefits and benefits in kind for carers and those for care recipients, broad supply of respite support

2. **home care** is widespread and easily accessible

3. **flexible** structure of the **labour market** facilitates the carer to stay in employment

Source: Bouget et al. 2016
## Support measures for informal carers

<table>
<thead>
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<th>Indirect</th>
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</tr>
</tbody>
</table>

Source: Naiditch et al 2013
InformCare: the EU multilingual hub for informal carers

- **Home page:** [http://www.eurocarers.org/InformCare](http://www.eurocarers.org/InformCare)
- **Goal:** contribute to improving quality of life of informal carers of older people in Europe, via an integrated set of web-based, multilingual support services
- **Three target groups:** carers (27 countries), care professionals & employers (10 countries)
- **Two main types of services:** information resources and interactive services
Summary of information for carers

- Information on illnesses and care management
- Available care and support services
- Psychological support - consultation
- Information on taking care of yourself
- Work and care reconciliation
- Family and care reconciliation
- Legal aspects
- Financial aspects
- Good Practices
- Emergency services

Caring for an older person
Your own needs as a carer
Support by the state
How to get practical help
InformCare's interactive services

The Caregiving years: an introduction

When you expect a child, the community (your family, friends, co-workers) rally around you and your spouse. When you expect your first child, you receive gifts, well wishes and the encouragement that you are entering a wonderful, albeit challenging, chapter in your life. As you prepare to welcome your child, you feel pride at the thought of your role as parent: How you will shape the mind of a youngster, impacting him or her with your wisdom, insights and knowledge.

Now think about a similar life experience, just one on the other end of the spectrum. An aging relative; a spouse, a parent, a grandparent, needs your help. And, you want to help— you believe in making the most of the years you have left together. But, when you tell your friends, your colleagues, even other family members, the comments you may hear are a far cry from well-wishes, “I could never do that! Why do you?” Or, the more common response: “Why don’t you just put your mother (or your wife, or your grandfather) in a nursing home? That way you won’t...
Social network

Servizi Interattivi

Ciao Giovanni Lamura!

Cosa c'è di nuovo

Pubblica Qualcosa...

Arianna Poli PROSSIMO EVENTO...
Assistenza ai pazienti con demenza, conferenza Auser - Irca
L'evento Assistenza ai pazienti con demenza, conferenza Auser - Irca inizia il 05/06/2015!
29 maggio · Mi piace · Commenta · Condividi

Arianna Poli Buongiorno a tutti! :)
<table>
<thead>
<tr>
<th>Topic</th>
<th>Replies</th>
<th>Views</th>
<th>Latest Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Di positivo oggi c'è che...</td>
<td>13</td>
<td>85</td>
<td>Ultimo Post di Arianna Poli 1 aprile</td>
</tr>
<tr>
<td>Al fianco di una persona con Demenza...</td>
<td>21</td>
<td>236</td>
<td>Ultimo Post di Arianna Poli 1 aprile</td>
</tr>
<tr>
<td>Spazio di scrittura - Le vostre storie</td>
<td>26</td>
<td>188</td>
<td>Ultimo Post di Cinzia Giul 25 Luglio 2014</td>
</tr>
<tr>
<td>quando l'assistenza del malato diventa troppo stressante...</td>
<td>0</td>
<td>10</td>
<td>Ultimo Post di Arianna Poli 30 giugno 2014</td>
</tr>
<tr>
<td>Assistenti familiari - Badanti</td>
<td>9</td>
<td>95</td>
<td></td>
</tr>
</tbody>
</table>
Messages

Servizi Interattivi

I Miei Messaggi

Messaggi Ricevuti  Messaggi Inviati  Componi Messaggio

0 nuovi messaggi ricevuti su un totale di 6  Check All

11 novembre 2014

Arianna Poli
11 novembre 2014

10 settembre 2014

10 people
(Nessun Oggetto)

2 people
(Nessun Oggetto)

Cinzia  Cristina  Andrea  Benjamin  Arianna  Amici Online (2)
Chat

Interactive Services

Write in the darker field below and press enter

Introduce Yourself

Francesco Barbabella
Hi everybody!

Francesco Barbabella

Francesco Barbabella

Francesco Barbabella
Videochat

Interactive Services

Video Chat

Attiva il tuo Microfono e il tuo Video

(1) ITALIA

Francesco Barbabella

11:23 am

11:24 am

11:25 am

11:26 am

11:27 am

Benvenuto in AVChat 3.0 (http://www.aychat.net). Manda un messaggio agli altri utenti digitando il tuo messaggio nella casella di testo in basso e premendo INVIO.
The Caregiving years: an Introduction

Stage 1: The Expectant Carer

Who are you?

In the near future, I may help a family member or friend.

You have a growing concern that, within the near future, your family member or friend will need help with some day-to-day activities, and you become the carer.
Changing language...

The Caregiving years: an Introduction

Carers
Caring for older people
Site map
Video Tutorial

The Caregiving Years
Stage 1
Stage 2
Stage 3

I May Help

Stage 1: The Expectant Carer

In the near future, I may help a family member or friend.
InformCare in a nutshell

• Common and country-specific support services for carers, available for free via internet in **32 versions, 27 EU countries and 23 languages**

• **Contents’ quality and user-centeredness** ensured via a systematic involvement of **final users and stakeholders** over 2 years & a 3-month field phase

• More than **2,500 web pages** of contents specifically produced to address **informal carers’ needs** & over **300 web pages** for **care professionals** and **employers**

• For some countries, this kind of web-based support is available in the local/national language for the first time!
Long-term care: a conceptual model

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LTC DEMAND

MATCH?

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- in-kind (home/residential) services
- cash-for-care schemes
- informal
  - family volunteers
  - friends & neighbours
Over 65-year-old care recipients, by type of care received

Fonte: Rodrigues et al 2012
Distribution of LTC providers according to ownership

<table>
<thead>
<tr>
<th>Country</th>
<th>Public</th>
<th>Non-Profit</th>
<th>For-Profit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Residential Home Care</td>
<td>Residential Home Care</td>
<td>Residential Home Care</td>
</tr>
<tr>
<td>Austria</td>
<td>55%</td>
<td>8%</td>
<td>24%</td>
</tr>
<tr>
<td>Belgium</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flanders</td>
<td>36%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wallonia</td>
<td>26%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brussels</td>
<td>24%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Czech Republic (1)</td>
<td>59%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UK (England)</td>
<td>7%</td>
<td>14%</td>
<td>13%</td>
</tr>
<tr>
<td>Finland</td>
<td>56%</td>
<td>93%</td>
<td></td>
</tr>
<tr>
<td>France</td>
<td>23%</td>
<td>15%</td>
<td>55%</td>
</tr>
<tr>
<td>Germany</td>
<td>5%</td>
<td>2%</td>
<td>55%</td>
</tr>
<tr>
<td>Italy (1)</td>
<td>30%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Netherlands (1)</td>
<td>0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slovak Republic (1)</td>
<td>75%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spain (2)</td>
<td>23%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sweden</td>
<td>75%</td>
<td>NA</td>
<td>10%</td>
</tr>
<tr>
<td>Switzerland (1)</td>
<td>30%</td>
<td>30%</td>
<td></td>
</tr>
</tbody>
</table>

Fonte: Rodrigues et al 2012
LTC-areas presenting a strong potential for innovation

1. Expansion of LTC services

2. Integration and coordination of services

3. Shift towards community-based (home) care

4. Creating and improving employment

Source: Leichsenring and Schulmann 2016

(http://mopact.group.shef.ac.uk/research-posts/innovations-7/)
Success factors for an integrated provision of services

1. Commitment of stakeholders
2. Room for improvement & experimentation (innovation)
3. Professional learning climate (e.g. training & skills development)
4. Staff motivation
5. Leadership (by a person or organisation)
6. Resources & financial agreements

Source: ESN 2016
Partnership & networking of all actors

Germany: Local Alliances for Persons with Dementia

- **aims**: pooling potential of citizens, associations, business, educational institutions & local governments, in a common effort to improve conditions of persons with dementia & their carers, bringing together all diverse initiatives in this field

- **contents**: German Federal Government assisted set up and funding of local alliances. An associated dementia guide has been developed into a platform for communication, qualification and support.

- **outcomes**:
  - nationwide over 500 alliances have been set up
  - a great variety of projects have been developed (including multigenerational houses, integrated networks, enterprises & cultural initiatives).

Source: UNECE 2015

Website: [https://www.lokale-allianzen.de/startseite.html](https://www.lokale-allianzen.de/startseite.html)
Involvement of service users’ representatives in the decision making process 1/2

Example 1: Residents’ Boards in Malta’s residential care facilities and Day Care Centres:

- **aim:** to give older people a more active role by including them in the decision-making processes of their care setting.
- **method:** Committees are established both in public residential homes for the elderly and in all day centres in Malta. Members of Residents’ Boards meet on a monthly basis and their suggestions have to be considered by officer in charge.
- **outcomes:**
  - enhanced social participation
  - improved empowerment
  - more user-centred design of care services.

Source: UNECE 2015
Example 2: The “System of Choice” in Sweden’s Public Care

- **Aims**: empowering care service users by enabling them to choose their care provider.

- **Contents**: local municipality determines price of services in advance. Key is that competition between providers is based on quality (not price): no obligation to choose a service, since a non-choice (default) alternative is offered.

- **Outcomes**:
  - In 2009-2014, over 60% of municipalities introduced the system, esp. for home help.
  - providers & range of services have risen sharply
  - over 70% offer particular features (e.g. specific languages, special dementia care, services for LGBT persons)
  - users are more satisfied and independent.

Source: UNECE 2015
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Over 65-year-old care recipients, by type of care

Fonte: Rodrigues et al 2012
Care migrants as undeclared workers in personal and household services

Undeclared workers in household & care services: estimations speak of 1 million in the EU (but probably underreported!)

**Germany**: highest level (90-95%) of “informal” employment in private homes in the EU (irregular migrants + undeclared work by neighbours, friends etc.), especially for older people (500-600,000 «informal» domestic workers);

**Italy**: migrant care workers ("badanti") in private households are **0.7-1 million**, (more than formal care workers);

**Austria**: 2 of 3 home care workers have migration background (80% of those in the 24h support scheme are legally employed)

Source: EC 2012
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CARE NEEDS MATCH?

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care recipients migrate abroad
Ad to recruit Romanian migrants to work in Slovakian facilities to provide care to German patients…

*SunSet Blvd.*

Căutăm îngrijitoare și infirmiere!!!
Condiții, cunoașterea limbei germane la nivel comunicativ. Mai multe informații la telefon 0040.312.263.738
e-mail: recrutare@sunsetblvd.sk

www.sunsetblvd.sk
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Care migrants
Different models of migrant work in LTC: community services vs. households

Fonte: Rodrigues et al 2012
## Main migrant LTC workers’ employment patterns: LTC organisations vs. private households

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Migrant’s employer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>LTC organisations</td>
</tr>
<tr>
<td>Prevalent countries</td>
<td>North-West Europe</td>
</tr>
<tr>
<td>Role of care recipients</td>
<td>Client/service user</td>
</tr>
<tr>
<td>Main source of funding</td>
<td>Public LTC funds / out-of-pocket</td>
</tr>
<tr>
<td>Control on care quality performed by:</td>
<td>Care provider or funding body</td>
</tr>
<tr>
<td>Professionalization &amp; training of care worker</td>
<td>Higher</td>
</tr>
<tr>
<td>Legal status of care worker</td>
<td>Legal</td>
</tr>
</tbody>
</table>
Migrant home carers by kind of employment contract

- Without regular contract: 61%
- Unlimited contract: 22%
- Short-term contract: 11%
- Other: 2%
- No answer: 4%

Lamura et al. 2008; ACLI Lombardia 2014
Migrant care workers’ average hours of work per day

- 9 - 12 hours: 28%
- 5 - 8 hours: 28%
- 2 - 4 hours: 16%
- 13 and over: 26%
- No answer: 10%

Lamura et al. 2010
Migrants’ most burdening aspect of providing care

- Emotional and psychological tension
- Fear that something might happen
- Physical burden
- To see the older person in this (bad) condition
- Lack/reduction of spare time
- Cannot get out of home
- Lack of rest
- Lack/reduction of friendships
- Others
- None

Lamura et al. 2010
Care drain risks in migrants’ home countries

- Migrant women’s left behind children: well-off but socially deprived & cared-for by grandmothers

- Mental illnesses of migrant women returning home after long years of isolated care work

- Educational & training costs saved by “host” countries and borne by “sending” countries
Call for a comprehensive strategy

- migration cannot be seen as a tool to tackle care labour shortages, if this jeopardizes development in source countries (via care and brain drain) or leads to migrants’ exploitation

- we need a balance between integration policies in destination countries & international cooperation & development programmes in source countries (including schemes for return migration, thanks to qualification acquired abroad)

… otherwise we will end up plundering (again) the future of poorer nations!
Thank you!
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