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'Policy futures: learning from the past?'

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Migrant care workers in the provision of social care services: roles, challenges and policy implications

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Outline

- Context: social care and migration
- Methodology
- The migrant (foreign-born) social care workforce
- Care providers' needs for migrant labour
- Quality of care: experiences of older people and migrant care workers
- Inequality, discrimination and access to employment rights

The provision of care for older people

- 2.5 million older people with care needs, 1.1 million use social care services, 450,000 experience shortfall (England)
- 'Older old' (80+) projected to double by 2031
- Largely funded by the public purse but provided by the independent sector
- Shift towards home care (personalisation), privatisation, free access only for those with greater needs

The direct care workforce

- ~ 650,000 care workers working with older people (UK)
- 88% women, 74% independent sector
- Average hourly pay rates £6.56 (NMW £5.73)
- 24% turnover rate in the private sector (England)

Access of new migrants to the UK labour market

- No entry channel to work in care except senior care worker's visas. Restrictive criteria. Restricted labour mobility.
- Access to the labour market of other categories (refugees, students, family, etc.) varies
- After 2004 EU migrants became a major source of care workers
- No specific integration strategy for new migrants other than refugees

Methodology

- Analysis of national datasets (LFS)
- Survey of 557 providers of care for older people, followed up by 30 in-depth telephone interviews
- 56 face-to-face interviews with migrant care workers (MCWs)
- 5 focus group discussions with 30 older people
- Projections of future demand for MCWs

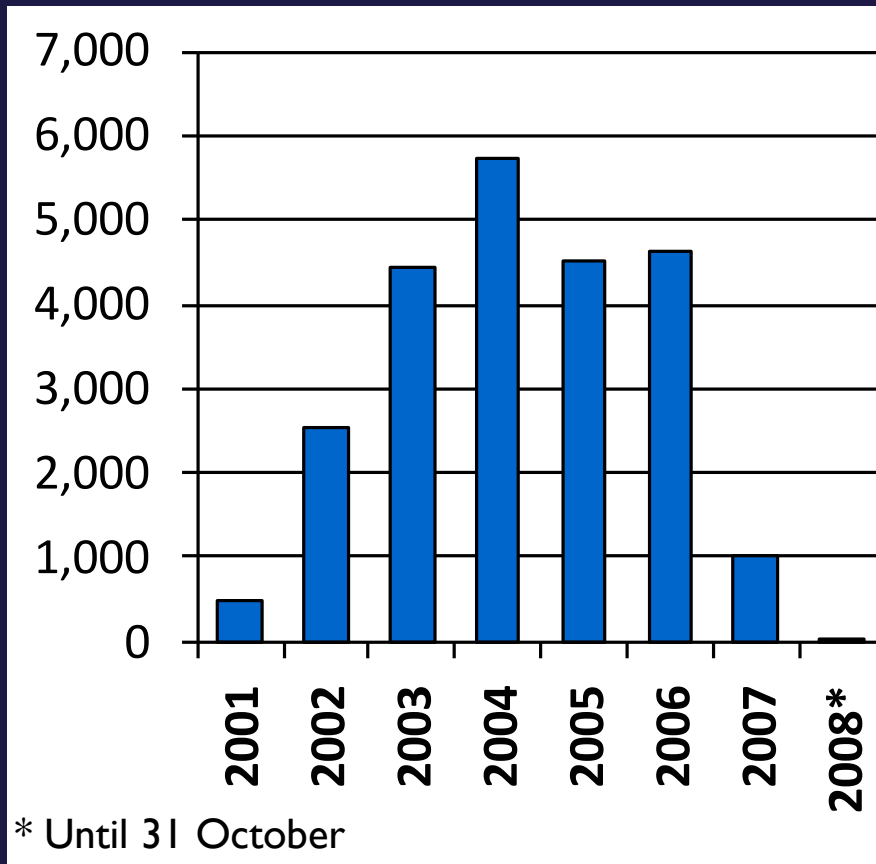
Growing reliance on migrants

LFS data on all care workers

- Proportion of foreign born care workers up from 8% (Oct-Dec 1998) to 18% (Oct-Dec 2008)
- Number of all care workers increased by 155,000 in 2003-08, nearly half of the increase due to MCWs
- Uneven distribution across the UK – over 60% of care workers in London are foreign born
- Main countries of origin of recent migrants: Poland, Zimbabwe, Philippines, India, Nigeria

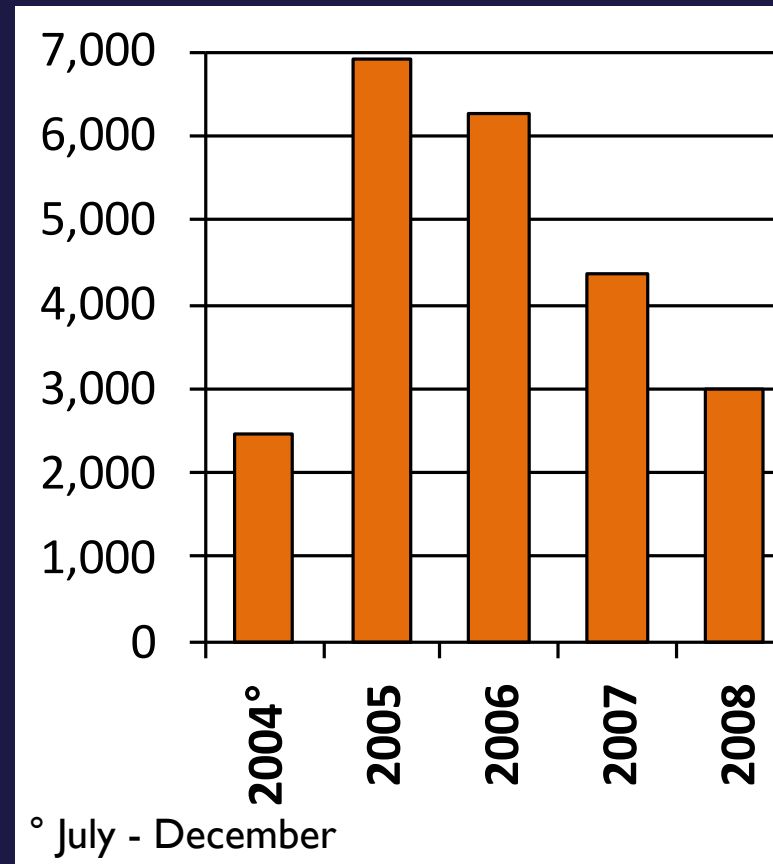
Recent decrease of labour migration flows

Senior care workers visas



Total 2001-2008 = 23,340

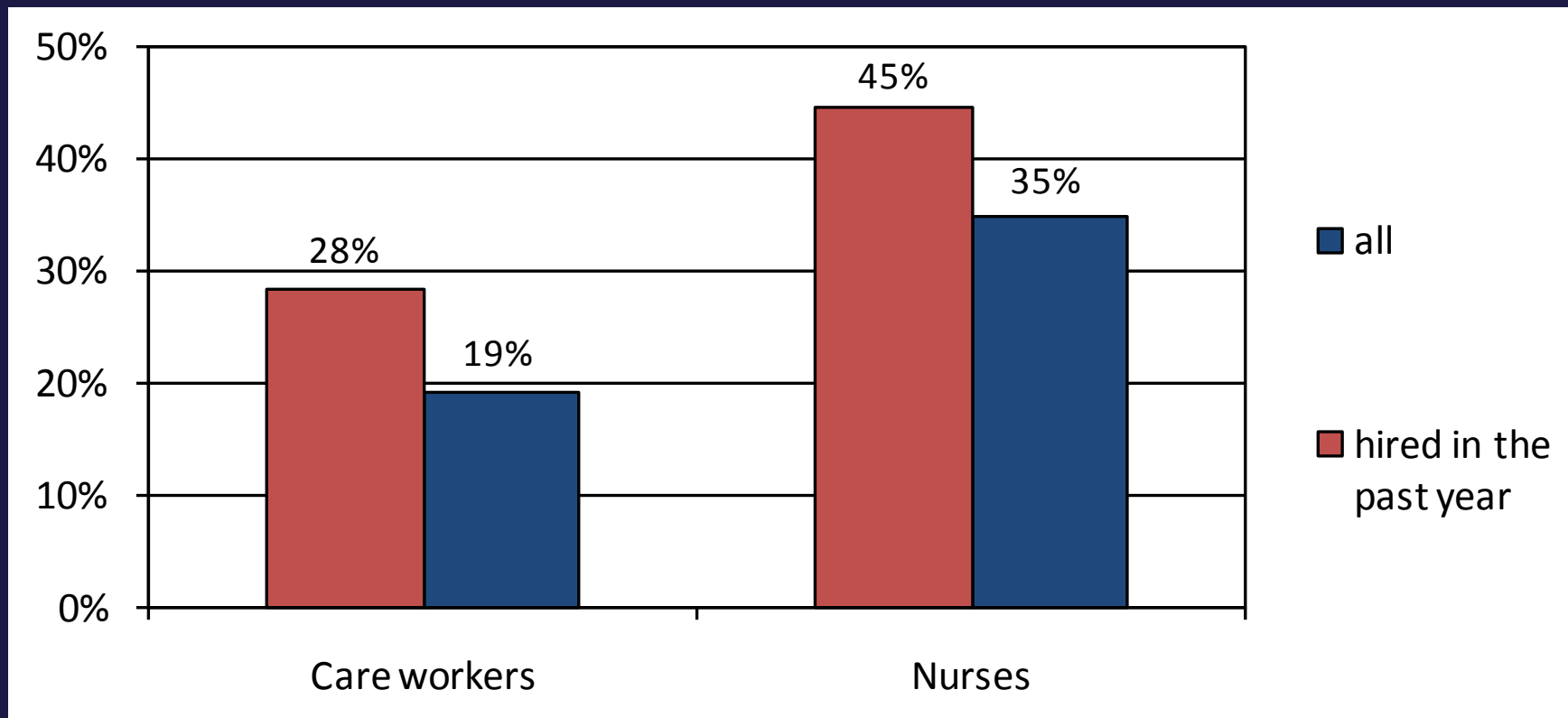
Worker Registration Scheme (A8 nationals)



Total 2004-2008 = 23,015

Greater reliance on migrant nurses

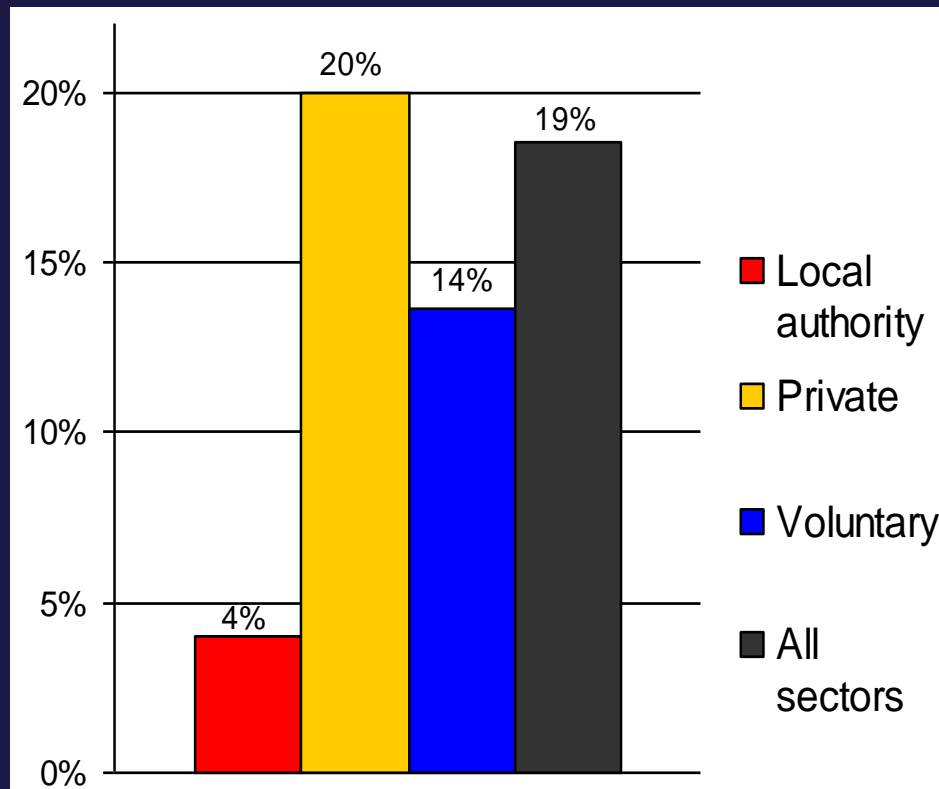
Fig. - Proportion of MCWs and nurses in care for older people (2008)



Source: Compas survey of 557 residential and home care organisations employing 13,846 care workers and 1,867 nurses

Uneven reliance across the care sector

Figure – Proportion of MCWs in the workforce across the care sector



- Reliance on MCWs is higher where pay is lower
- Long-established MCWs moved to jobs in the public and voluntary sector

Source: COMPAS survey of employers

Employment and working conditions

- A higher proportion of recent migrants than UK born workers are paid below the minimum wage
- Recent migrants are more likely to work full time, do shift work and be on temporary contracts
- 40% of foreign born care workers are British nationals or permanent residents, 20% other EU nationals, <20% work permit holders, >20% family, students and other
- 5 out of 56 migrants interviewed were, or had been, employed without permission to work in the UK

Demand for MCWs related to pay and working conditions...

- 9 out of 10 employers recruiting MCWs undertake at least some action to recruit from the local labour market
- 49% of employers reported challenges in recruiting UK born care workers (58% for nurses)
- Employers identify low pay and shift work as the main reasons for staff shortages (including low rates paid by local authorities)

... but employers also voice appreciation of migrant workers

- The vast majority of employers stated that the quality of care had not changed or had improved by employing MCWs
- Advantages of MCWs included their willingness to work all shifts (82%), a 'good work ethic' (71%), a more respectful attitude to older people (68%), and willingness to learn new skills (75%)
- The main challenge reported by employers was the lack of English language proficiency (66%). Immigration rules were a problem for 50% of employers.

A significant reliance on MCWs in the future?

- Assuming constant care levels, the total number of care workers working in older adult care would need to increase from 642,000 in 2006 to 1,025,000 in 2030.
- Assuming constant reliance on MCWs (19%), the migrant workforce would need to increase from 122,000 in 2006 to 195,000 in 2030, an average of around 3,000 a year
- Actual demand for new migrants will depend on a range of factors, but if pay and conditions do not improve reliance is likely to remain high

Uncertain impact of economic downturn

- Social care workforce less exposed to the economic slowdown than workers in other less skilled occupations
- Unemployment of care workers is rising and the number of vacancies has reduced in 2009
- Care sector employers will not necessarily be willing to recruit from the 'new' unemployed

Relationships are key to the quality of care...

- Importance of 'soft' skills

“Someone you can have a little chat with.”

“To listen to people, that’s the most important thing.”

“Someone who is loveable, understanding.” (Care users)

- Valuing relationships

*“We are like granddaughter and granny, the relationship is like that. We always have a good laugh, we always talk about everything”
(Filipino live-in care worker)*

“[Flora] is wonderful; I’ve had her four years...We are more friends than anything now, she is lovely, she really is. She is a ray of sunshine. As soon as she comes in the door it’s all laughs with her...” (Home care user)

...but there are constraints

- Staff shortages, limited time, lack of continuity
- Language and communication barriers
- Knowledge of customs of older people
- Training for directly employed care workers

MCWs' experiences of discrimination and lack of access to employment rights

Working conditions

- Hours of work
- Pay
- Distribution of tasks
- Promotion
- Training opportunities
- Complaints, disciplinary and dismissal procedures
- Access to information and advice on employment rights

Migrants' vulnerability in residential and home care

“It’s not only the day to day treatment that you get at work, but even the wage range, where most British citizens get paid more than other people from Eastern Europe, Africa or Asia, who will be doing the same work, same hours, or even working more.”
(Zimbabwean care worker)

“There’s no agreement on that [hours of work]. I work continuously, continuously, continuously, provided I’m in the house.”
(South African live-in care worker employed directly by care user)

41 % of employers say migrants not well accepted by older people

- Verbal abuse with reference to race, colour and nationality
 - “There’s a resident that can say ‘I don’t want black people. Don’t touch me. You are black. Go back to your country.’” (Zimbabwean care worker)
- Tensions between preferences of older people and rights of care workers
- Limited procedures for addressing discrimination and managers’ lack of confidence in addressing tensions
 - “A lot completely refuse, they don’t want them in the room and ask them to go away and they are quite rude to them. It’s quite difficult...there’s not an awful lot I can say really.” (Care home manager)

Addressing the recruitment challenges of the care sector

- Increase the funding and status of care work
- Improve Government coordination and communication with care providers
- Migration policy:
 - Retain a migration entry channel for senior care workers
 - Value the contribution of 'non-economic' migrants
 - Monitor the long-term need for a migration entry channel for lesser skilled care workers (not temporary workers)

Improving the quality of care, addressing discrimination and promoting employment rights

- Ensure access to language and skills training and guidance on cultural norms (building on existing good practice)
- Address the prevalence of discrimination and harassment – EHRC and local authorities have a key role
- Monitor the implications of the direct employment by older people of migrant home care workers
- Foster public recognition of the invaluable contribution of care workforce