Transnational service provision in long-term care between Western and Eastern Europe

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1. Content and Goal of Sub-project B7

» Long-term care systems (LTCS) are latecomers of welfare state expansion.

» LTCS differ in several aspects. We study their care-mixes.

» Goal of the project is to explain why certain systems with respective care mixes came into being and how they develop over time.

» Study of six countries, i.e.
  - Germany, Sweden and Italy as destination countries of care migration
  - Ukraine and Romania as source countries of care migration
  - Poland as source and destination country of care migration

allows to analyse care migration, care chains and care drain.
Analytical approach of the CRC

Development and patterns of social policy
- Program adoption
- Coverage
- Generosity

National constellation
- Socio-economic determinants
- Political determinants
- Policy legacy

Horizontal and vertical interdependencies
- Ideas
- International Organizations
- Economic relations
- Migration
- Transnational violence
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2. Analytical approach of sub-project B7

National Constellation

- Gender Arrangements / Care Regime
  - Male breadwinner model (weak $\leftarrow \rightarrow$ strong)

- Labour Market / Human Capital
  - Professionalization of social service provision

- Welfare State profile
  - Generosity, inclusiveness
  - Role of cash transfers vs. services
  - Interrelationship between policy fields

Horizontal and vertical interdependencies

- Market Regulation
  - EU-Regulations
  - Bilateral regulations

- Migration Regime in Source Countries

Long-term care systems

Care-mix

- Care-giving
  - formal
    - Registered nurse
    - Other nurses
    - Migrants
  - informal
    - Family members
      - paid
      - unpaid
    - Migrants

Global Dynamics of Social Policy CRC 1342
**Underlying hypothesis: Sequential ordering**

» Original type of LTCS depends on national constellation
  › Formal care vs. informal care
  › Home care vs. institutional care
  › Care by professionals vs. care by care-givers with less formal qualification

» Prerequisites of respective care-mixes, i.e. formal and/or informal care-givers are not reproduced within the system

» Migration as a means to maintain care mixes that would not survive otherwise
2. Analytical approach of sub-project B7

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- Horizontal and vertical interdependencies
  - Long-term care systems
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  - Migration Regime in Source Countries
    - Gender Arrangements / Care Regime
    - Labour Market / Human Capital
    - Welfare State Profile

Growing relevance over time
3. Process-tracing and causal mechanisms

» Process-tracing
  › is a method of within-case analysis
  › to identify causal mechanisms linking independent variables to certain outputs conceptualized as dependent variable
  › to create causal chains

» We use the explaining-outcome variant aiming “to craft a minimally sufficient explanation of a particular outcome” (Beach & Pedersen 2013)

» In order to link macro and micro levels we refer to situational mechanisms, perception mechanisms and transformational mechanisms (Hedström & Ylikoski, 2010: 59)
3. Process-tracing and causal mechanisms
4. Explanandum: Migrantization of LTC in Germany

In Germany, care-giving is a ‘migrantized’ occupation

» Share of migrants
  › in the formal care sector: 18%
  › in the overall labour force: 7%
  › (Theobald & Hampel 2013: 22)

» Estimates on numbers of migrant live-in care workers in private households
  › From 60,000 (Rostgaard et al. 2011: 154) to
  › 300,000 – 400,000 (Staola & Schywalski 2016).
5. Explanation

- National constellation before the introduction of LTCI in Germany
  - Principle of subsidiarity
  - Strong interest in limiting public expenditure
  - Semi-professionalism

- Introduction of LTCI
  - Measures to support family care (in particular: cash benefits)
  - Introduction of welfare market → expansion of care industry

- Development thereafter
  - Decreasing family-caregiving potential and willingness due to demographic change, increasing female labour-market participation and changes in gender regimes
  - Expansion of care industry due to demographic change and marketization
  - End of cold-war and EU extension → potential for migrant carers

- Increasing care migration
5. Stylist Explanation: Informal Care

DEMAND
Structure: cash benefits
Process: Demographic change, decreasing informal care-giver potential

Households: problems

Households: solution

Migrant-in-family model

MECHANISM TYPES
1. situational mechanism
2. perception mechanism
3. transformational mechanism
4. macro-level association
5. Stylist Explanation: Informal Care

**ECONOMIC TRANSFORMATION AFTER 1989**

**SUPPLY**
- Economic transformation after 1989
  - Households: problems
  - Individuals/households: problems

**DEMAND**
- Households: solution
- Individuals/households: migration to DE as solution
- Migrant-in-family model

**MECHANISM TYPES**
1. Situational mechanism
2. Perception mechanism
3. Transformational mechanism
4. Macro-level association

**SUPPLY DEMAND**

**FEEDBACK LOOPS**
5. Stylist Explanation: Formal Care

**DEMAND**

Structure: Unattractive job situation for natives
Process: Demographic change

Employers: problems

Employers: solution

Migrantised formal care work force

**MECHANISM TYPES**

1. situational mechanism
2. perception mechanism
3. transformational mechanism
4. macro-level association
5. Explanation: Formal Care

**SUPPLY**

- Economic transformation after 1989 & EU integration

**DEMAND**

- Employers: problems
- Employers: solution
- Individuals/households: problems
- Individuals/households: migration to DE as solution

**MECHANISM TYPES**

1. situational mechanism
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Feedback loops
Conclusions & Next Steps

» The exemplary explanatory sketch seems to demonstrate the potential fruitfulness of the analytical framework and the chosen method

» For Germany, the narrative must be supported by substantial evidence

» For the other countries: respective narratives have to be developed and then supported by evidence.

» The bulk of research has to go into the source countries
The end

Thank you for your attention!