

**TITLE: The interaction between migrant care workers, family carers and professional services in the elder care sector: empirical evidence from Italy**

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**1. Stream:** 12.1. Transnational care markets: european care regimes in the age of migration

**2. Summary:** The decreasing availability of informal networks to provide care to dependent older people, on the one hand, and the “familistic”, “cash-for-care” orientation of the Italian welfare system, on the other hand, have incentivated a widespread, private employment of migrant care workers in Italy. This phenomenon has relieved many families from most burdensome care tasks, especially in case of a live in solution, by shifting to migrant workers the heavier tasks such as housework and basic personal care, and refocusing families’ role on more emotional and organisational activities. The traditional role of professional elder care services has also been affected, ending up with “repositioning” themselves in restricted areas such as more sophisticated personal care and transportation. This “crowding-out” phenomenon has been accompanied by a growing request for better training and integration opportunities for these new actors into the existing formal care network, a call which has been met however only partly and very slowly, so far. This paper will focus on these challenges, by describing how long term care policies are called, not only at a national but also at a European level, to ensure that this phenomenon occurs in forms that, while respecting the human rights and interests of all actors involved, can at the same time improve the attractiveness of the LTC sector for domestic staff, too. This would, on the one hand, reduce the need to solve current care labour shortages through migration, a practice which can seriously endanger the low-income sending countries, once their more skilled human resources move abroad. And help to keep in mind, on the other hand, that migrants might, on the long run, end up to become themselves, if not adequately protected, one of the social groups more at risk in terms of health and socio-economic needs.

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