

## **Employment of migrant care workers by Italian families assisting older Alzheimer's disease patients**

A rising phenomenon across the European Union (EU) is the increasing presence of migrant care workers (MCWs), privately employed by families of older people in need, who take over different tasks: supervision, drug administration, support in mobility and transportation, nursing and personal care, etc. They have become a fundamental resource of long-term care for older people, since public care services are generally retrenching and family members have multiple commitments because of childcare, work and social activities.

In the case of Italy, the presence of MCWs is a considerable phenomenon, since it is estimated that over 800,000 migrants are currently employed privately by families for eldercare, of whom around two thirds do not have a regular contract. The employment of MCWs is indeed the most common solution used by Italian families to care for a frail older person, but this brings significant costs to families. Furthermore, it is uncertain whether families have adequate economic resources to pay for this private care. Research performed by our group discovered that socioeconomic factors, such as the educational level of the family caregiver, influenced the employment of MCWs in Italy. Not surprisingly, people with higher socioeconomic status tended to be more likely to access private care services, leading to inequalities in social and health care. In fact, it was demonstrated that people with lower social and economic resources have fewer possibilities to pay for care and thus do not receive adequate treatment for themselves and their family members. Furthermore, these families are more burdened, because they are engaged more in eldercare, with negative effects on their health such as stress, depression, and anxiety.

The same research found that the employment of a MCW in Italy was highly associated with the availability of a cash allowance of around 500 Euros per month, provided by the government ('indennità di accompagnamento'), which sustains the access of families to the private care market. However, not all the families receiving the cash allowance behave similarly. People with higher financial capacity are more likely to hire MCWs, when entitled to receive the cash allowance, whereas families with lower income tend to rely more on themselves, saving the financial resources granted by the allowance for other purposes.

These results were produced by research carried out under the Up-Tech project, a large randomized control trial (RCT) with 438 dyads (older people with Alzheimer's Disease and their family caregivers) which tested innovative services and assistive technologies in the Marche Region in central Italy.

Policymakers in Italy and Europe should pay more attention to how cash benefits are provided and used in order to combat socioeconomic and health inequalities. In particular, in Italy, the national cash allowance is not graduated according to the real needs and socioeconomic conditions of the dependent older person. In addition, it is not limited to the purchase of care services and families

are not obliged to report on how it is used. A revision of needs assessment, use conditions and eligibility criteria might produce more equity in the system, in order to sustain families from more deprived social groups in their caregiving activities.

## **Publication**

[Socioeconomic Predictors of the Employment of Migrant Care Workers by Italian Families Assisting Older Alzheimer's Disease Patients: Evidence From the Up-Tech Study.](#)

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