Regulating migrants as a low-cost solution for long-term care: The formalisation of a dual care labour market in Austria

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This paper explores how care, migration and employment policies in Austria have shaped the long-term care labour market and whether the legalisation of personal care by migrant carers has contributed to bridging the cleavages between the 'grey' labour market of so-called '24-hour care' and the formal long-term care labour market. We offer insights into the Austrian approach of subsidizing demand for home care services that relies on low-cost employment of migrants to meet current care needs. The authors conclude that the migrant care policies were unable to address persisting inconsistencies at the interface between the primary and grey care labour market. Instead, they fostered the dualisation of the care workforce which is characterised by double standards dividing carers by migration and nationality, socioeconomic differences, precarious working conditions, social protection entitlements and labour rights.

Austria is characterised by a traditional family care model and a strong cash-for-care orientation that transformed the Austrian long-term care market into a demand-driven market Coupled with increasing female employment rates and changing demographic structures as well as significant wage-differentials and unemployment in neighbouring CEE countries, new care arrangements emerged in Austria in which families privately employed live-in 'migrant carers'. These predominantly middle-aged women provided care around-the-clock on fortnight shifts in private households. Until recently, these forms of employment came with highly precarious working conditions, no regulations on working time, no social security coverage and a generally irregular labour market status. In 2007 Austria introduced legal measures to formalise migrant carers' labour market status by regulating qualification requirements and their access to the social insurance system and thus a new job profile of the 24-hour carer was created.

Empirical evidence from qualitative interviews with policy stakeholders and carers reveals that the policy changes in 2007 have not reached convergence between 24-hour care and the conventional formal care labour market. Underlying political factors, related to pressure for cost containment, corporate protection of job profiles and inconsistent labour market and employment policies have created distinctive patterns in the division of labour between migrant carers and formal carers in Austria. Despite Austria's pioneer approach in addressing some of the most critical features of 24-hour migrant care, this form of employment remains non-regular, precarious and under-regulated in terms of professional and social status, working conditions, social protection and professional standards. While the formal care market is kept closed, the 24-hours care market remains easily accessible – but unattractive for professionals from high-income EU countries, 24-hour care provided by migrant carers is accepted as a budget-friendly solution to face increasing care demand in Austria.