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## Germany's Ageing Population and Labour Migration from Third Countries: The Case of the Care Service Industry

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<p>The purpose of this study is to answer the question of whether Germany's ageing population and labour shortages in the elderly care service industry led to an increase in labour migration from third countries in recent years. The population of Germany has been ageing since the 1970s, which resulted, among other things, in the increased demand for elderly care services. Germany has a long history of labour migration, and, as in many developed countries, its elderly care system relies heavily on migrant labour.</p> <p>The research consists of two parts. The first part focuses on the evolution of Germany's immigration policy and implementation of governmental initiatives aimed at the recruitment of nursing personnel from abroad. The second part is an investigation of the potential migration of Russian-speaking caregivers from outside the European Union.</p>	
Keywords	Long-term care, migration, Germany

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## **Glossary**

CIS	Commonwealth of Independent States
DIP	German Institute of Applied Nursing Research
DM	Deutsche Mark
EEA	European Economic Area
EU	European Union
GDR	German Democratic Republic
IT	Information Technology
LTCI	Long-term care insurance

## 1 Introduction

The world's population is ageing. This fact has implications for nearly all sectors of society. But the elderly care service industry is affected the most. If more and more people need assistance towards the end of their life, someone has to take care of it. In the European Union (EU), this should not be expected from a person's relatives, due to the rising female employment and changing family model (Anderson, 2012).

In the developed countries, the elderly care industry employs a lot of migrants. For example, Germany's elderly care system benefited from the enlargement of the EU in 2004 and 2007, as it stimulated labour migration from the developing Eastern European countries to the more prospering regions. However, these member states now face the same issue of the ageing population and will not likely be a sustainable source of the labour force in the future. If the German government plans to mitigate labour shortages with migration, it needs to look outside the Union.

This study shows that increased demand for elderly care services in Germany indeed has led to the growth of labour migration from third countries, which has been organised by both the German government and people in need of care.

## 2 A problem of ageing population and labour supply

The phenomenon of the ageing population has been acknowledged by the international community as a global trend for already a few decades. The phenomenon refers to a process of older people becoming a larger proportion of the population. The two major demographic drivers of population ageing are declining fertility and increased life expectancy (World Health Organisation, 2010). These characteristics are common for the developed countries and, thus, they are affected by the issue the most.

Germany's total fertility rate, i.e., the number of children born to a woman in her lifetime, was 1,54 in 2019; it has been below replacement level (2,1) since 1970 (see Figure 1). In 2019, the German Federal Statistical Office made an assumption that the country's fertility rate would stay between 1,43 and 1,73 until 2060.

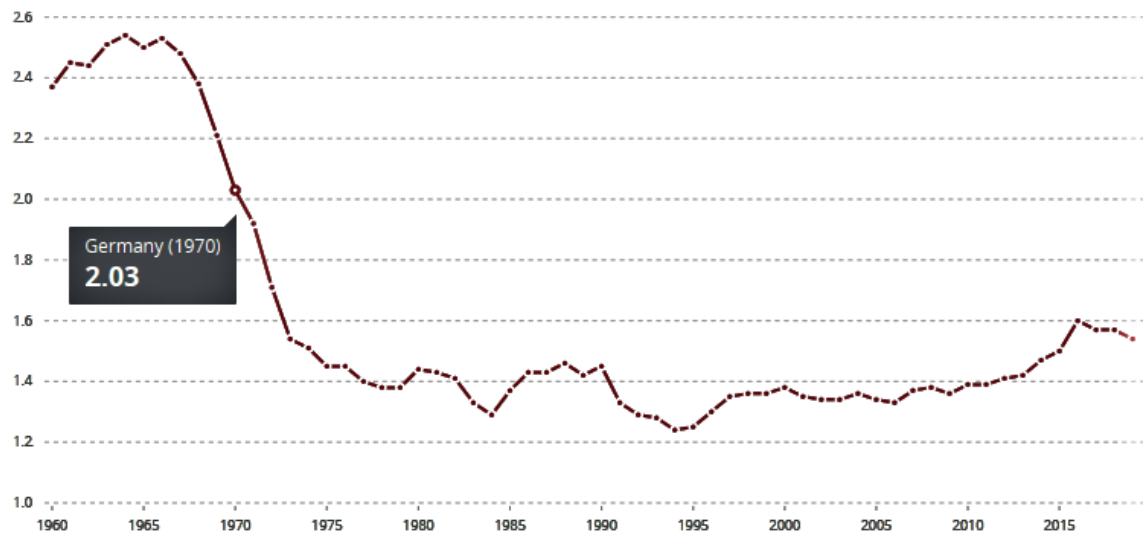


Figure 1. Germany's total fertility rate 1960-2019 (The World Bank, 2021).

In 2017, Germany was the third oldest nation in the world with 28% of its population aged 60 years or over, following Japan and Italy (United Nations, 2017). Another indicator measuring the degree of population ageing is the median age. Median age is the age that divides a population into two numerically equal groups, meaning that half the people are younger than this age and half are older (Population Reference Bureau, 2019). Germany's median age has been gradually increasing over the past decades and is projected to be 45,7 years in 2020 (Figure 2).

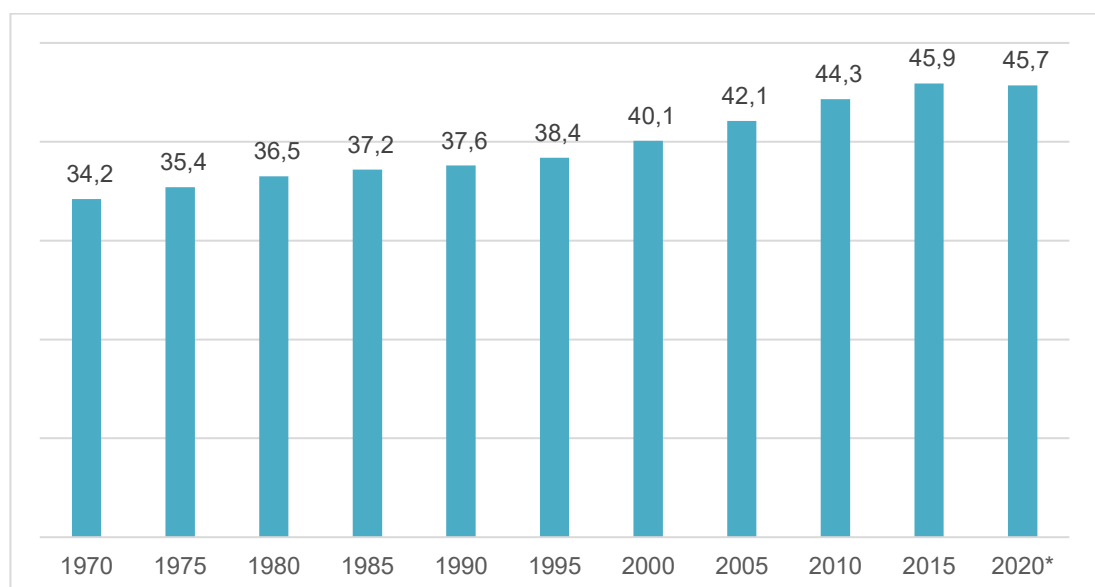


Figure 2. The median age of Germany's population 1970-2020 (Statista, 2021a).



Some of the most serious macroeconomic consequences of population ageing are growing dependency on working people and reduced labour supply.

However, in the short run, a decline in fertility rate actually has a positive effect on income per capita due to lower youth dependency and a bigger share of the working population. But if the fertility rate stays below the replacement level in the long run, the old-age dependency will outweigh youth dependency and working people will be under strong pressure to provide for and take care of the elderly (Bloom et al., 2010).

According to the European Commission's Ageing Report 2018, the total labour supply of those aged 20 to 64 in the European Union (EU) is projected to fall by 9,6% over 2016-70, of which 2% by 2030 and further 7.8% between 2030 and 2070.

In 2011, the German Federal Employment Agency published a report with projections regarding Germany's labour supply for the next 15 years. The agency's Research Institute calculated that by 2025 German labour force would drop by 6,5 million people, or 14,6% compared to 2010 (German Federal Employment Agency, 2011). This alarming prognosis was taken seriously, and the agency developed a plan to address the issue (see section 6.1 below). Five years later, in 2016, the agency's labour supply projections for 2030 were more positive: it predicted a decrease of 3,6 million people, or 7,9% compared to 2015 (German Federal Employment Agency, 2016). Despite this change, the predicted deficit is still a threat to the economy of Germany.

The elderly care service industry is affected by ageing population from two directions. Labour supply is decreasing as for any other industry. But at the same time, the number of people in need of such service is growing. While some other industries may hope that the development of new technologies or artificial intelligence could help to mitigate labour shortages in the future, this is less likely applicable to elderly care.

### 3 Labour migration to Germany from third countries 1950-2005

#### 3.1 Guest workers in West Germany

The robust economic growth in West Germany in the 1950s required more agricultural and industrial labour force than the internal market could provide. Starting from 1955, a few governmental officials expressed the idea that the recruitment of foreign workers could be a solution. The first Agreement on Worker Recruitment was signed between Italy and Germany at the end of the same year. Approximately 167 000 “guest workers” (Gastarbeiter) entered West Germany between 1955 and 1959 (Triadafilopoulos and Schönwälder, 2006). As West Germany needed more labour force, similar agreements were signed with Greece (1960), Spain (1960), Turkey (1961), Morocco (1963), Portugal (1964), Tunisia (1965), and Yugoslavia (1968) (German Federal Ministry of the Interior, Building and Community, n.d.). Most guest workers were employed as low-skilled workers in agriculture, construction, mining, and manufacturing (Jurgens, 2010). In late 1973, due to economic recession and the oil crisis, the German government ordered to stop the recruitment from abroad. By that time, the number of foreign workers grew to 2,6 million people (German Federal Office for Migration and Refugees, 2005). During the 18 years of active recruitment, the turnover of guest workers reached 14 million people (Ellermann, 2015).

As the name implies, migration and employment of guest workers were supposed to be a temporary measure. However, West Germany’s government tried but failed to implement any rotation mechanism to prevent guest workers from settling in the country. At the same time, the republic could not force the workers to leave, as it would severely damage its efforts to establish a reputation as a liberal democratic country (Triadafilopoulos and Schönwälder, 2006).

#### 3.2 Contract workers in East Germany

East Germany also recruited a foreign labour force, even though to a lesser extent compared to West Germany. The country signed bilateral labour agreements with nine fellow communist countries: Hungary (1967), Poland (1971), Algeria (1974), Cuba

(1978), Mozambique (1979), Vietnam (1980), Angola (1985), North Korea (1986), and China (1986). At least 210 000 foreign “contract workers” (Vetragsarbeiter) were employed in GDR's factories from 1967 to 1989 (Mac Con Uladh, 2005).

### 3.3 Project-tied recruitment and seasonal workers in the 1990s

In 1990, the German government passed a decree about exemptions from the recruitment stop (Anwerbestoppausnahmeverordnung), which allowed project-tied workers in construction, seasonal staff in agriculture and hospitality, and certain high-skilled professionals to work in Germany for a limited amount of time. Between 1991 and 2000, Germany issued on average 50 000 project-tied permits and 250 000 seasonal work permits annually. (Ellermann, 2015).

### 3.4 The Green Card programme 2000-2004

At the end of the 1990s, Germany started to face another labour shortage, but this time of high-skilled professionals in the Information Technology (IT) industry. In February 2000, the German government reacted with the introduction of the Green Card programme. The programme enabled IT companies to hire up to 20 000 IT professionals from outside the EU. In order to be eligible, foreign specialists needed to have a university degree in an IT-related field or prove that they would receive an annual salary of at least DM 100 000 (later 51,000 Euro). The Card holders were allowed to work in Germany for up to 5 years. As a result, about 18 000 third country professionals moved to Germany between August 2000 and December 2004 (Jurgens, 2010).

## 4 Elderly care in Germany

The need for care usually rises sharply beyond a certain age. In Germany, 10% of people aged between 75 and 79 need care, while in the 80 to 85 age group this number is 20%.

In the 90 and over age group, the proportion increases to approximately 67%, with half of people being cared for in nursing homes. (German Federal Statistical Office, 2016).

#### 4.1 Recipients of LTCI

The number of people in need of a care can be estimated based on the number of long-term care insurance (LTCI) recipients. Universal LTCI was introduced in Germany in 1995. It covers everyone living in the country in the same way as health insurance and can be either public or private. The benefits are available for both home and institutional assistance. The number of Social LTCI beneficiaries grew from 1,6 million in 1995 to almost 4 million in 2019 (Figure 3), showing a tremendous increase of ~277%. The total number of both social and private LTCI beneficiaries was 4,25 million people in 2019 (German Federal Ministry of Health, 2021).

##### V. Zahl der Leistungsbezieher der sozialen Pflegeversicherung am Jahresende

	ambulant	stationär	Insgesamt
1995	1.061.418	-----	1.061.418
1996	1.162.184	384.562	1.546.746
1997	1.197.677	462.271	1.659.948
1998	1.226.715	511.403	1.738.118
1999	1.280.379	545.983	1.826.362
2000	1.260.825	561.344	1.822.169
2001	1.261.667	577.935	1.839.602
2002	1.289.152	599.817	1.888.969
2003	1.281.398	614.019	1.895.417
2004	1.296.811	628.892	1.925.703
2005	1.309.506	642.447	1.951.953
2006	1.310.473	658.919	1.969.392
2007	1.358.201	671.084	2.029.285
2008	1.432.534	680.951	2.113.485
2009	1.537.574	697.647	2.235.221
2010	1.577.844	709.955	2.287.799
2011	1.600.554	714.882	2.315.436
2012	1.667.108	729.546	2.396.654
2013	1.739.337	740.253	2.479.590
2014	1.818.052	750.884	2.568.936
2015	1.907.095	758.014	2.665.109
2016	1.974.197	775.004	2.749.201
2017	2.560.979	778.200	3.339.179
2018	2.905.325	780.064	3.685.389
2019	3.141.471	858.284	3.999.755

Figure 3. The total number of beneficiaries of the Social LTCI in 1995-2019, including home and institutional care (German Federal Ministry of Health, 2021).

The graphical interpretation of the data shows that the growth rate especially accelerated in recent years (Figure 4). One of the reasons behind it is the adjusted definition of “in need of care”, which came into force on 1 January 2017. Previously, only physical limitations were taken into consideration. The updated definition also included mental and psychological disabilities (European Social Policy Network, 2016).

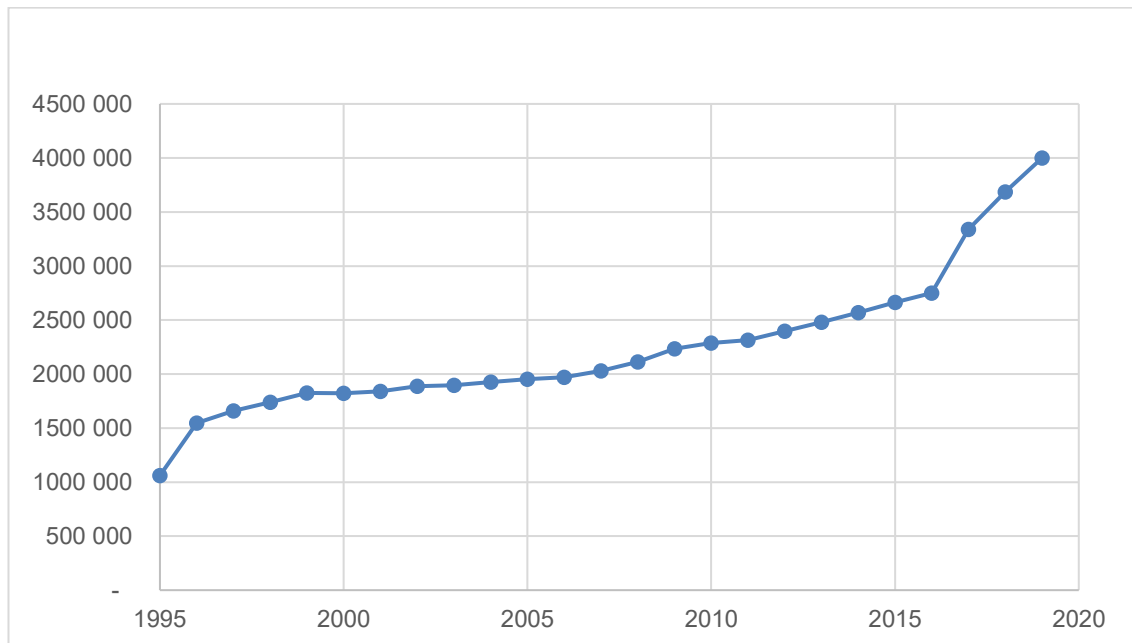


Figure 4. The graphical interpretation of the overall number of beneficiaries of the Social LTCI in 1995-2019.

In 2019, about 79% of the LTCI beneficiaries spent this money on home care. As seen in Figure 5, the number of those preferring home care has been growing much faster compared to institutional care. One of the reasons might be that the German system of elderly care facilities simply struggles to keep up with the growing amount of people in need.

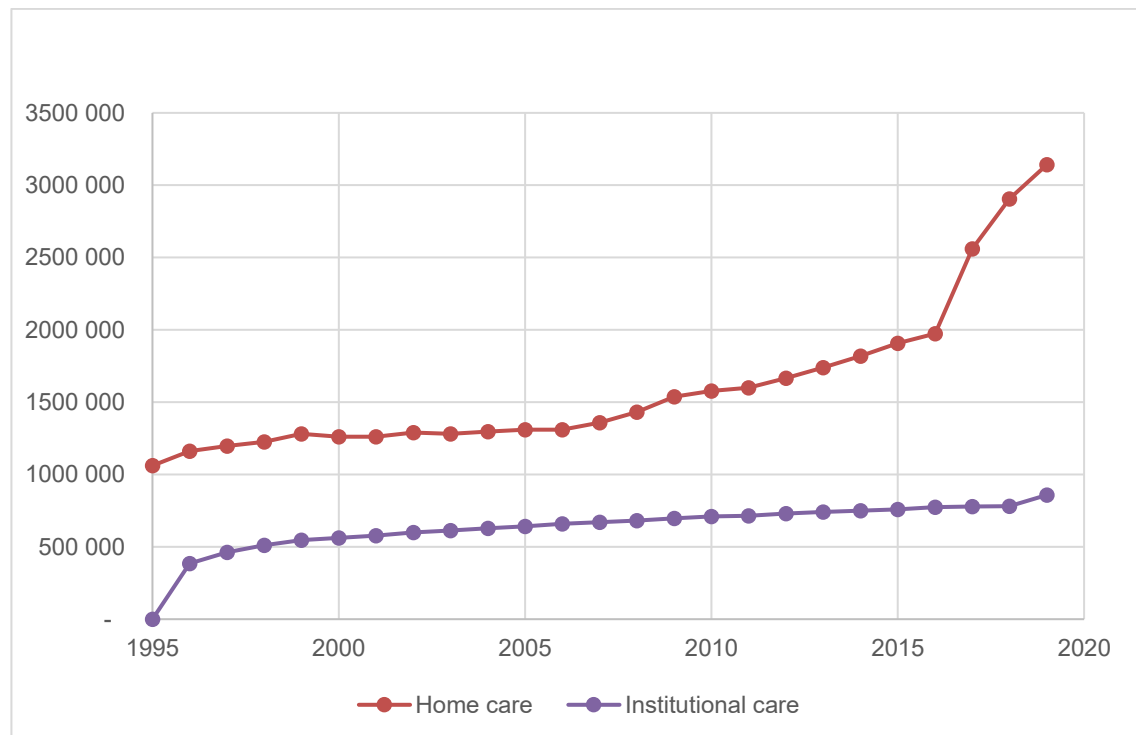


Figure 5. The graphical interpretation of distribution between home and institutional care recipients.

A study conducted by the German Institute of Applied Nursing Research (DIP) at the end of 2017 showed that 71% of the interviewed elderly care facilities had waiting lists. 83% of them had received new requests for admission in the period of three months before the interview and had to turn them down due to capacity limitations. (German Institute of Applied Nursing Research, 2018)

#### 4.2 Shortage of caregivers

Germany has a severe shortage of employees in the elderly care sector. 81% of nursing homes interviewed by DIP reported insufficient number of applicants for caregiver positions. 83% also observed decline in the quality of applications. 84% noted that it is extremely difficult to fill these positions in timely manner. 30% of facility managers even said that they no longer report job vacancies to employment agencies.

25% of the managers stated that due to the shortage of staff, they would not be able to achieve their operational goals in 2017. 34% thought they could not undertake strategic

developments. 28% observed an increase in overtime hours compared to a year before. 22% of the managers had imposed a temporary admission freeze for the same reason. (German Institute of Applied Nursing Research, 2018)

At the beginning of 2020, there were 320,000 caregivers working in Germany. According to the study performed by scholars from the University of Bremen at nursing homes, at least 120,000 additional caregivers would be needed in order to provide adequate amount of care to all inhabitants (Deutsche Welle, 2020a).

### 4.3 LTCI benefits

When a recipient of LTCI benefits receives care in a nursing facility or at home from a professional, the benefits are paid directly to a provider of care. If care activities are carried out by relatives, friends, or other non-professional acquaintances, the benefits are paid to the recipient directly. For the latter case, the current amount of the allowance varies from 316 to 901 euros per month, depending on the assigned care level (see Figure 6).

Pflegebedürftigkeit in Graden	max. Leistungen (pro Monat in Euro)
Pflegegrad 1	-
Pflegegrad 2	316
Pflegegrad 3	545
Pflegegrad 4	728
Pflegegrad 5	901

Figure 6. Levels of monthly payments of LTCI benefits for non-professional home care. (German Federal Ministry of Health, 2019a)

#### 4.4 Causes for emergence of grey care market

Considering the shortage of professional caregivers and waiting lists in nursing homes, discussed in section 4.2, it is likely that many people in need of care and their families face the situation where they must organise care without relying on professional services, at least for a few months.

The minimum wage in Germany is 9,50 euro per hour, or 1662,72 euro per month for full-time employment (40h/week) (German Federal Statistical Office, 2021a). Evidently, from a remuneration point of view, providing care full-time cannot compete with any official employment elsewhere if paid by LTCl benefits only. Hence, additional financial resources would be necessary to cover the difference. Also, with a high degree of certainty, there are people in need of assistance who are yet not recognized as such by the state and thus do not receive any financial support. An example of it used to be people with dementia, who became eligible for the LTCl benefits only in 2017 (European Social Policy Network, 2016). Naturally to assume that some might seek ways to minimise personal expenses by employing a caregiver unofficially.

Even if the financial burden of care is of little importance, the severe shortage of caregivers itself might force families to consider all the possible care arrangements, including the grey labour market.

## 5 Literature review

The stream of literature covering the German ageing population, migration, and the elderly care industry simultaneously is rather limited. However, there are studies containing two of the three elements or focusing on different geography.

Spencer et al. (2010) studied the role and demand for migrant care workers in ageing societies. The paper is based on the original research carried out by 4 different teams in the United Kingdom, Ireland, Canada, and the United States from 2007 to 2009. After



analysing primary data from 1700 care workers and 200 employers and secondary data from the national databases, the authors came to the following conclusions. The sector fails to attract native-born workers and thus relies on migrants due to being insufficiently funded and underpaid. Unless these issues are addressed, the demand for migrant labour will continue growing together with the degree of population ageing.

Analysis performed by Fine and Mitchell (2007) shows that Australia is rapidly ageing as well and will need a significant number of care workers in the upcoming decades. Throughout its history, the country has been dependent on labour migration to a large extent. In 2003, about a quarter of Australia's overall workforce was foreign-born, which is also true for elderly care. More often, migrants occupy lower-paid positions in the metropolitan areas.

Even in an extremely closed society like Japan, the rapidly ageing population stimulated a slight liberalisation of immigration policies. The following noteworthy initiatives have been taken in recent years: new "Guidelines about Permanent Residence" have been issued; the Economic Partnership Agreement has been ratified, which provided grounds for the acceptance of foreign nurses and care workers; and a point system for highly skilled foreign workers was introduced (Akashi, 2014).

However, the UK did not follow the Japanese example. Shutes (2011) researched how citizenship and immigration status influence the professional experience of migrant care workers in the country. Foreign-born workers constituted about 18% of all the British care labour force in 2009. Of these approximately 53% were non-EEA citizens, the main nationalities including the Philippines, India, Nigeria, Zimbabwe, and South Africa. As in many other European countries, immigration legislation has been in favour of skilled migrants and restrictive towards workers in low-waged jobs. Despite a decline in the number of EEA nationals coming to the UK and entering care work, immigration policies have only been tightened for the rest. This situation gives enormous bargaining power to employers. Caregivers tied to an employer due to their visa status have less freedom to leave or raise their voices in the case of even serious misconduct. Caregivers on the grey market are even more vulnerable.

The high death rate from COVID-19 among foreign professionals in the UK suggests that the country's health care system still relies heavily on migrant labour (Ford, 2020).

Anderson (2012) examined how elderly care has been transforming in the EU and how it resulted in increased demand for migrant labour. A growing number of people aged over 80 years old has led to the increased demand for care services. At the same time, as a result of the rising female employment and changing family model, the elderly are less likely to be cared for solely by the family without any external party involved, as it used to be the case traditionally. According to a survey carried out in the EU in 2007, about 65% of people in need of care prefer to receive it at home. Compared to formal care facilities, home care requires more human resources, if we consider all recipients together. And the local workforce is unable to meet the demand alone. The situation has also led to the emergence of a grey market for elderly care. The article does not go into detail regarding migrants' nationality. It features only one migration stream, from Eastern to Western Europe, and notes a significant share of non-EU nationals at the grey care market.

Cangiano (2014) studied the demand for migrant labour in elderly care services as a determinant of labour migration, also addressing all EU member states. A review of statistical data showed a significant share of foreign-born care professionals, varying across the Union from approximately 48% in Italy to 15% in Denmark and Portugal (based on data from 2009). The author also notes that after 2020, when the baby boom generations will enter the 75+ age range, the gap between demand and supply will likely widen.

Di Rosa et al. (2012) researched the employment of migrants as caregivers for the elderly in Italy. Italy is one of those countries with an acute problem of its ageing population. From a cultural point of view, care for the elderly is considered a family matter. At the same time, Italy follows the European trend of more and more women entering the workforce. On the other hand, the formal elderly care system is rather underdeveloped. All three factors stimulated the emergence of informal employment of migrant caregivers.

The COVID-19 pandemic highlighted the heavy dependence on migrant caregivers in Austria. About 80% of the country's 62 000 registered live-in care workers come from Romania and Slovakia. They typically work in 2-4-weeks long shifts and commute between Austria and their country of origin. The closure of national borders in spring

2020 disrupted this care model for a few months and showed its fragility (Leiblfinger et al., 2021).

The academic discussion on German long-term care focuses mostly on long-term care insurance (LTCI) and expenditure. For example, Rothgang (2010) has evaluated the achievements and weaknesses of the German LTCI model based on its 15-year history at the time of publication. The LTCI Act (Pflegeversicherungsgesetz) was introduced in 1994, making this type of insurance mandatory for almost the entire population. Three levels of dependency were defined based on the amount of care needed. Beneficiaries could choose between home care, day and night care, and nursing home care. They also were provided with an option to receive cash benefits for the home care and then decide how to use it themselves. The public LTCI is financed by income-related contributions, while prices for private LTCIs are risk-related.

Rothgang considered the following effects of the LTCI Act successful. The whole issue of long-term care now was treated differently. It has been legally defined as a societal duty (gesamtgesellschaftliche Aufgabe) while being a purely family concern before. The pay-as-you-go principle ensured that people in need could start receiving benefits immediately. As public spending increased, the capacities for formal caregiving have been growing ever since then. Informal caregivers now became able to make contributions to the pension system, which in Rothgang's opinion might help them to avoid old-age poverty. The quality of caregiving became a widely discussed issue, which led to the introduction of the LTC Quality Assurance Act (Pflege-Qualitätssicherungsgesetz) in 2001.

Also, Rothgang identified a few weaknesses. The definition of the need for long-term care was widely criticized, as it did not take into consideration some specific needs, such as of people with dementia. As a result, the new additional benefit for this case was introduced in 2001. However, it subsequently proved to be still insufficient to cover all necessary care services. Until 2008, benefits were not adjusted, gradually losing their purchasing power. At the same time, the price of care services has been increasing. Between 1998 and 2005 the Social LTCI budget was in deficit, indicating that the existing financing scheme had to be corrected.

The Long-term Care Further Development Act (Pflege-Weiterentwicklungsgesetz) of 2008 focused on the improvement of the delivery side of caregiving, adjustment of benefits, and the financing question. Rothgang argues that the reform still failed to address two crucial issues properly. First, the definition of dependency still did not cover all categories of people in need of care. Second, the raising of the contribution rate by 0.25 percentage points would not ensure sustainable financing in the long-term.

A study by Fuchs, Kubis, and Schneider (2016) aimed to estimate, to what extent migration is able to mitigate the labour market effects of the ageing population in Germany. The authors considered the whole market based on statistical data, without differentiating between industries. Without migration, the potential labour force is predicted in a realistic scenario to decrease by approximately 17% by 2035 and by 30% by 2050, compared to 2014. In the moderate scenario, immigration from the third countries and EU-countries can compensate for the population ageing until 2030. In a more extreme scenario with high migrations flows from non-EU countries, the predicted potential labour force in 2050 is close to the number of currently employed in Germany (2015). The researchers concluded that while migration may slightly dampen the trend, it cannot fully compensate for it.

Lutz and Palenga-Möllenbeck (2010) researched German policies on migration and domestic care work. They came to an interesting conclusion that the German government intentionally ignores migrants' presence in private care. It helps to solve the care-deficit problem; at the same time, it avoids potential social conflicts of a liberal care-migration policy.

According to Eichler and Pfau-Effinger (2009), elderly care was still mostly provided within the family in Germany a decade after the introduction of the Long-Term Care Insurance Act. 71,5% of people in need of care preferred to receive it from a family member. The decision is in many cases taken in a complex family context and not by the person in need alone. Financial considerations cannot play a crucial role, as remuneration for a family member can barely compete with any other full-time job. The authors argue that cultural factors are the main reason for this state of affairs. Based on the results of a conducted qualitative study, Eichler and Pfau-Effinger concluded that 2 factors specifically influence the decision-making process. First, family care is seen as the best possible option, due to the traditional family values still being strong in Germany.

Many family members feel a “moral obligation” to provide care themselves. Second, families and care providers have different notions about “good care”. From the families’ point of view, the “good care” involves a stable, continuous relationship with a caregiver, based on trust. Quality of the German ambulant and facility care, however, is evaluated with different criteria by its providers. Emphasis is placed on efficiency and standardisation. The frequent change of staff, the predetermined time of day for daily care, and the high speed with which care is carried out particularly make care services unattractive for people in need and their families.

Theobald (2017) focused on disparities in working conditions for caregivers from the native population and with a migration background, all legally employed in Germany’s elder care industry. Even though the research question and the findings do not have a direct connection to labour migration, the collected data provides an insight into ethnic diversity among the interviewed care workers. The survey’s results (2010) showed that 10.2% of participants in home care, and 14% of participants in residential care, had a migration background. About 79% of care workers with migration backgrounds were foreign-born, and 21% were second-generation migrants. From workers with migration backgrounds, 59.5% came from Russia, Poland, and Kazakhstan, 6.3% from other Eastern European countries, 17.7% from the rest of Europe, 16.5% from countries outside Europe. The share of foreigners would have likely been more significant if the study covered the grey care market.

A similar study was carried out by Jönson and Giertz for Sweden (2013). The researchers analysed the results of the survey, conducted among care professionals in Nordic countries (Denmark, Finland, Norway, Sweden) in 2005. The share of foreign-born respondents varied significantly, from 1% in Finland to 13% in Sweden. In Sweden, immigrants from other Nordic countries constituted 36%, from other European countries 21%, from Asian countries 24%, from African countries 10% and from North and South America 9%. Finland dominated as a workforce supplier – 22% of foreign care workers moved from there. The same way as Theobald’s study, these statistics provide insight into the Swedish elderly care industry. However, they have limitations and are likely to be outdated in 2021. The authors admit that due to the survey’s methodology, not all foreign-born workers have been reached and their share was in fact bigger. The survey was distributed at the beginning of 2005, less than a year after the Fifth enlargement of the EU, when Malta, Cyprus, Estonia, Latvia, Lithuania, Poland, Czech Republic,

Slovakia, Slovenia, Hungary became member states. And almost two years before Bulgaria and Romania joined the Union as well. In the following years, the EU experienced a remarkable labour migration from these countries to the developed member states. However, in contrast to Germany, the grey care market is not statistically significant in Sweden. Elderly care is distributed as a service (or vouchers in some cases) by the municipalities and not as cash for care (Jönson & Giertz, 2013). Illegal care services are highly unlikely to emerge in such an environment.

## **6 Research question and methodology**

The purpose of this research is to answer the question of whether the ageing of Germany's population and the situation in the elderly care industry stimulated labour migration from third countries in the past decade (2011-2021).

The research consists of two parts. The first part is the examination of the German government's initiatives, such as amendments to immigration legislation and the recruitment of nursing professionals outside the EU. This data was sourced from the official reports and the websites of the German federal governmental bodies and their partners, e.g., Federal Government, Ministry of Health, Ministry of Education and Research, Federal Employment Agency, and German Corporation for International Cooperation. The second part is an investigation of the potential labour migration of Russian-speaking caregivers from the former USSR countries. It is based on the analysis of the advertisements from two types of actors: those seeking a caregiver and caregivers seeking employment. The advertisements were sourced from the online platforms popular among the Russian-speaking population in Germany.

## 7 Research findings

### 7.1 German government initiatives

At the beginning of 2011, the German Federal Employment Agency identified 10 measures that could potentially address the future labour shortage, which are listed below.

- 1) Reduce the number of school dropouts.
- 2) Reduce the number of apprenticeship dropouts.
- 3) Reduce the number of university dropouts.
- 4) Increase labour participation of people over 55 years old.
- 5) Increase women's labour participation.
- 6) Increase immigration of skilled workers from abroad.
- 7) Increase the number of working hours.
- 8) Promote qualification and further training.
- 9) Increase labour market transparency.
- 10) Examine potential measures in the area of taxes and charges.

(German Federal Employment Agency, 2011)

As we can see, labour migration was once again acknowledged by a federal governmental body as one of the ways to mitigate the predicted future shortage of labour supply. In the years following the report's publication, the German government indeed did take a number of steps to liberalise the immigration policy with the purpose to attract skilled non-EU nationals. It also initiated a few projects aimed to bring foreign nurses and caregivers to the country.

## 7.1.1 Development of the immigration policy

### 7.1.1.1 Abolition of a labour market test for certain professions

Labour market testing refers to a mechanism that aims to ensure that migrant workers are only considered after employers have unsuccessfully searched for national workers, citizens of the European Economic Area (EEA), or legally residing third-country nationals with access to the labour market according to national legislation (European Commission, 2021a).

In June 2011, the amendment of the German Residence Act (Aufenthaltsgesetz) allowed physicians and mechanical, automotive, and electrical engineers to be exempt from the labour market test. Supply and disposal engineers, steel and metal construction engineers, and software development/programming experts were added to this list in February 2012 (Mayer, 2013).

### 7.1.1.2 Recognition Act 2012

Prior to April 2012, Germany did not have standardised criteria and a recognition procedure for professional training obtained outside the country. The Federal Recognition Act of 2012 (Anerkennungsgesetz) provided the basis for establishing the equivalence of a foreign qualification with a corresponding German qualification (German Federal Ministry of Education and Research, 2021a). It applies to more than 600 occupations under federal jurisdiction, however, does not cover those regulated by Germany's federated states (German Federal Ministry of Education and Research, 2021b). Under the Qualification Initiative, the states agreed to create local recognition regulations for occupations they were responsible for (German Federal Institute for Vocational Education and Training, 2012). The city of Hamburg was the first state to pass its professional qualification assessment law (Berufsqualifikationsfeststellungsgesetz) in June 2012. The remaining 15 states established their recognition procedures by July 2014.

The Federal government received overall 140 700 recognition applications between the 1<sup>st</sup> of April 2012 and the 31<sup>st</sup> of December 2018. As shown in Figure 7, the number of



applications grew every year. Poland, Romania, Bosnia and Herzegovina, Syria, Serbia, and Russian Federation are the most common countries where applicants received their training (German Federal Ministry of Education and Research, 2019).

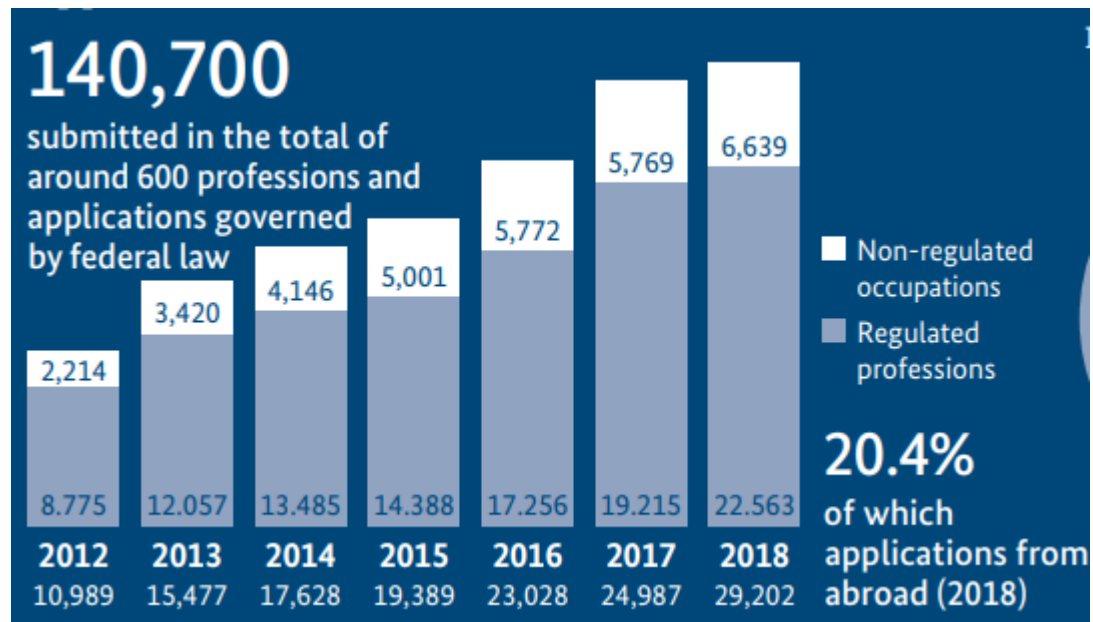


Figure 7. The number of recognition applications 2012-2018.

(German Federal Ministry of Education and Research, 2019)

### 7.1.1.3 Introduction of the Blue Card and further updates of the Residence Act

In August 2012, Germany has implemented the EU Directive 2009/50/EC or the so-called Blue Card directive. A Blue Card gives highly qualified workers from outside the EU the right to live and work in any EU country except for Ireland and Denmark. In this case, a professional is considered highly qualified when he or she has a university degree and possesses a binding job offer with an annual gross salary of at least one and a half times the average national salary (European Commission, 2021b).

To make the implementation possible from a legal perspective, the German government needed to make changes to its Residence Act. The same legislative procedure was used for further relaxation of immigration rules for non-EU nationals. Skilled workers now could apply for a temporary residence permit to seek employment. Graduates of German universities could stay up to 18 months in the country after the graduation date to find a

job in Germany (previously – 12 months). They were also allowed to work 30 days more per year during their studies. People undergoing professional training now could work ten hours per week and could stay in Germany for 1 year after graduation to search for employment. It became easier for scientists and German universities graduates to switch to self-employment (Mayer, 2013).

#### 7.1.1.4 Skilled Immigration Act 2020

The new Skilled Immigration Act came into force on 1st March 2020. It made it easier for skilled workers with vocational, non-academic training from non-EU countries to migrate to Germany for work (German Federal Government, 2020). It is now enough to have vocational training to be qualified as a skilled worker. The requirements for the training are to be at least two years in length and be officially recognised in Germany. Labour market test by the Federal Employment Agency has been abolished (German Federal Government, 2020). Those with vocational education wishing to search for a job are now also allowed to enter the country for up to six months, if they speak German and have financial resources to support themselves during this period. Under the same conditions, high-school graduates younger than 25 years old are now permitted to come to Germany to look for vocational training. In sectors with an acute shortage of skilled professionals, the bar for emigrating to Germany has been lowered as well. Medical doctors, IT specialists or registered certified nurses, for example, do not need to have their qualifications recognised by German authorities as long as they can prove a minimum of five years of the relevant work experience (Deutsche Welle, 2020b).

The new immigration law has the potential to address workforce shortages also in the long-term care industry.

#### 7.1.2 Concerted Action on Nursing

In the summer of 2018, the German Government introduced the Concerted Action on Nursing scheme (Konziertre Aktion Pflege), which aims to solve the shortage of labour. The Action identifies 5 areas for improvement:

- More trainee nurses.

- Higher pay for nursing staff.
- Needs-driven staffing levels in care facilities.
- Recruitment from outside Germany.
- Health promotion and digitalization.

(German Federal Government, 2019a).

Recruiting from outside Germany means, first of all, from other EU countries, as the single market area makes the hiring process the same as for the locals. However, fellow member states face the same challenge of an ageing population. Even before the scheme's introduction, the German government started to look for the care labour force elsewhere.

### 7.1.3 Nurses from Vietnam

In 2012, the German Federal Ministry of Economics and Energy commissioned the project aimed at training of nurses from Vietnam in order to become geriatric nurses in Germany. Applicants were obliged to possess either a College or a Bachelor's degree in Nursing.

The first group of 100 young people joined the program in 2013 by starting a 6-month German language course at the Goethe-Institut in Hanoi, Vietnam. They then continued with training in care homes in the German states of Baden-Württemberg, Bavaria, Berlin, and Lower Saxony. The project was financed by the German government and executed by the Ministry of Labour, Invalids and Social Affairs. The second group of 100 nurses started their training in 2014 (German Corporation for International Cooperation, 2014). During their first year in Germany, the nurses continued studying the language and receiving support from organisers.

According to the source, the population of Vietnam is very young and struggles to find employment at home. Indeed, the median age of Vietnam's population is 31,9 years and

approximately 61% of it is between 15 and 54 years old (Central Intelligence Agency, 2020). However, in recent years the youth unemployment rate in Vietnam has been comparable to Germany's (See Figure 8 and Figure 9).

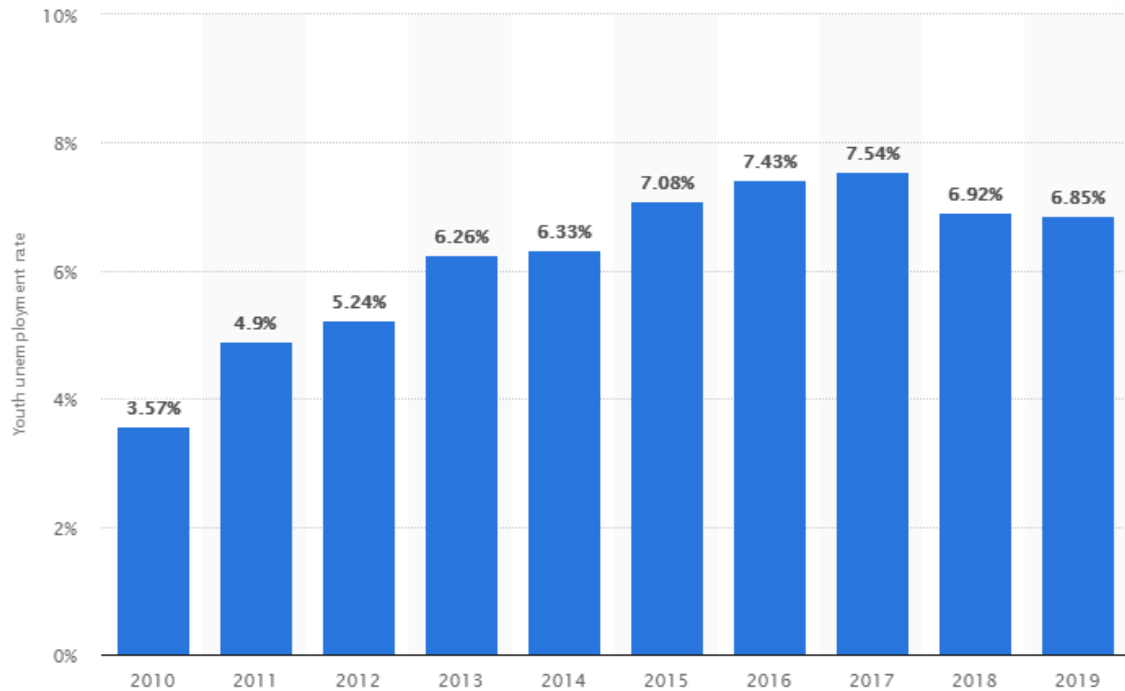


Figure 8. Vietnam's youth unemployment rate from 2010 to 2019 (Statista, 2021b).

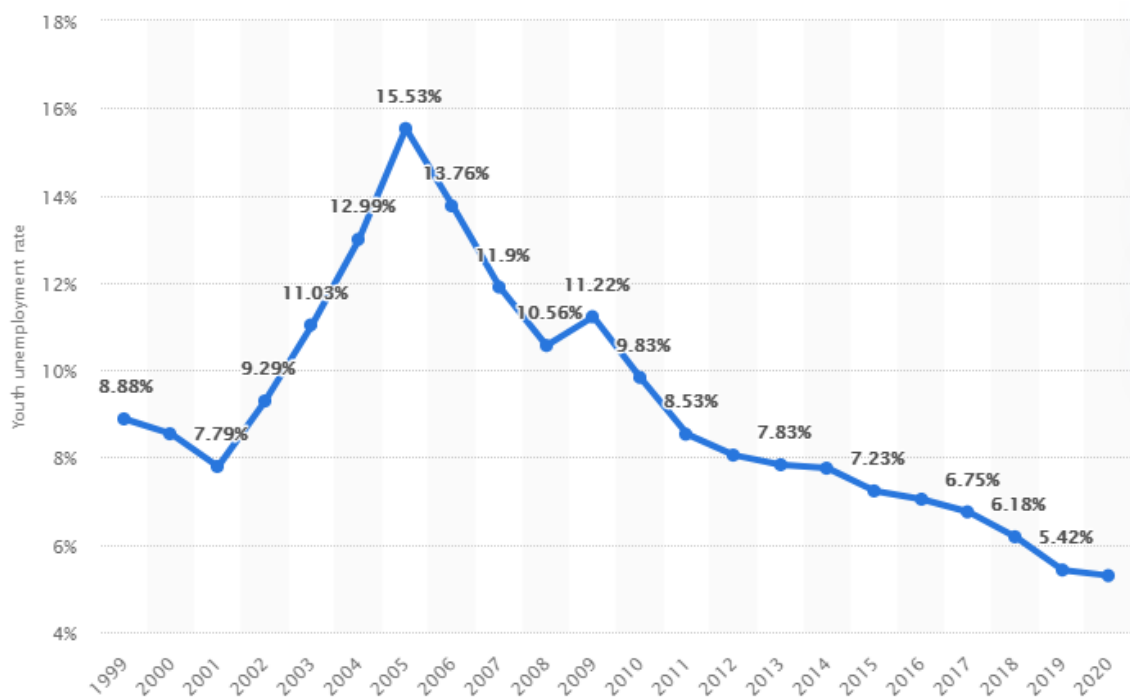


Figure 9. Germany's youth unemployment rate from 1999 to 2020 (Statista, 2021c).

Apparently, the project was considered a successful one by parties involved in both countries, as it was extended until 2019, but now with all types of nurses being recruited. (German Corporation for International Cooperation, 2019a).

#### 7.1.4 Triple Win Project

Another similar project, called Triple Win, has the same goal – to recruit nurses from non-EU countries. The current participants come from Serbia, Bosnia and Herzegovina, the Philippines, and Tunisia.

The project is executed differently than that described in section 3.1.2 above. Applicants from the Philippines are required to possess a Bachelor's degree in Nursing, a local nursing license, two years of professional experience, and initial knowledge of German language (Philippine Overseas Employment Administration, 2019). The nurses are not trained in Germany and therefore need to obtain a recognition of their qualifications in Germany during the first year of employment. The minimal duration of the contract is 1 year.

After 2 years from the arrival of the first participants to Germany, 81,5% of nurses still stayed with their employer (German Corporation for International Cooperation, n.d.). The number of nurses placed to German clinics, geriatric care homes, and out-patient services as a result of the project is rather impressive – 2100 people in the period between 2012 and 2019 (German Corporation for International Cooperation, 2019b).

#### 7.1.5 The German Agency for Health and Nursing Professions (DeFa)

In October 2019, the German Ministry of Health announced the establishment of the German Agency for Health and Nursing Professions (Deutsche Fachkräfteagentur für Gesundheits- und Pflegeberufe (DeFa)). The primary function of this organisation is to take care of work permit-related paperwork and degree recognition for nursing and care professionals from outside the EU. The service is intended for German hospitals, nursing homes and other facilities, and recruiting agencies, based both in and outside Germany. By request, DeFa can also help with the selection of applicants or organising language courses abroad.

The agency was created to speed up and simplify the complex administrative procedures associated with bringing personnel from non-EU countries to Germany. Right now, it can take up to two years for nursing or care professionals to start employment. DeFa aims to decrease this time to 6 months.

The Ministry of Health emphasizes that only professionals from countries with a very young population will be recruited. Currently, the Philippines and Mexico are of particular interest due to high qualifications and cultural proximity. (German Federal Ministry of Health, 2019b)

## 7.2 Potential migration of caregivers from Russian-speaking countries

### 7.2.1 Russian-speaking community in Germany

Germany has a substantial Russian-speaking population, which consists primarily of ethnic Germans and Jews, who have been moving to the country from the territories of collapsed Soviet Union since the 1990s. It is complemented by Russian-speaking expatriates, students, and migrants from other EU member states, especially Baltic countries (Latvia, Estonia, Lithuania).

While challenging to determine precisely, different sources estimate the number of Russian speakers being between 2,5 and 6 million people, which is 3% to 7,2% of the current population of Germany (83,19 million people – German Federal Statistical Office, 2021b). Quite many members of this community use and provide services such as cleaning, babysitting, care, etc. without officially declaring them to the state.

### 7.2.2 Illegal workers from Ukraine, Moldova, and Georgia

Starting from summer 2017, citizens of Ukraine do not need a visa to visit Schengen countries, meaning that they are allowed to stay in 26 EU countries for 90 days every 180 days. The abolition of the Visa regime was meant to support tourism; however, it also opened a door for illegal labour migration. A strong economy, geographical proximity and a big number of Russian speakers makes Germany a quite attractive destination. Migrants do not necessarily have to speak foreign languages to get jobs as cleaners,

nannies, or caregivers. The wages they are ready to work for are considerably lower compared to the country's standards. Also, being in the country increases the chances to find a way to stay in Germany legally. These migrants of course cannot work in formal elderly care.

Citizens of Georgia and Moldova have also received a right for visa-free travel in 2017 and 2014, respectively. However, the potential contribution of these countries to the illegal job market in Germany is minor compared to Ukraine, due to significant differences in population size.

### 7.2.3 Elderly care related informal advertisements online

Germany in Russian (Германия по-русски), Flagma.de and Jooble.org are the top 3 websites displayed by the Google search engine in response to inquiry “work as a caregiver in Germany” in Russian language (работа сиделкой в Германии). Flagma and Jooble are also in the top-3 results in the Yandex search engine for the same inquiry.

#### 7.2.3.1 Germany in Russian

Germany in Russian is the biggest online platform for the Russian-speaking community in Germany. As of the 5<sup>th</sup> of March 2021, the website claimed to have 808,980 registered users (Germany in Russian, 2021a). However, a wide range of information is accessible without registration. The registered users have the possibility to post an advertisement for free under the section Advertisements. This section contains, among others, a category Services, where a user can find elderly care related ads (Figure 10).

<b>Услуги</b>	Services
Строительство и ремонт (1075)	House renovation
Сиделки (Altenpflege) (662)	Caregivers for elderly
Уборка (535)	Cleaners
Няни (455)	Nannies
IT-услуги, вебсайты (231)	IT-services, websites
Переезд (227)	Moving
Ритуальные услуги (35)	Funeral services
Другое (254)	Other

Figure 10. Advertisements under the category Services (Germany in Russian, 2021b)

Overall, at least 3474 advertisements were published in the category Services between July 2017 and March 2021. 660 (~19%) of them belong to the sub-category Caregivers for the elderly, which is also the second most popular sub-category in terms of number of ads. These advertisements are posted by people seeking employment, people seeking caregivers privately, and agencies. The analysis of these advertisements published in the past 6 months (between 5<sup>th</sup> of September 2020 and 5<sup>th</sup> of March 2021) showed the following: approximately 52,6% of them are from people seeking employment and ~45,1% are from those seeking a caregiver. ~87% of caregiver seekers appear to be natural persons, while the rest of the advertisements come from employment agencies. About 68% of caregiver seekers did not mention a work permit requirement, which can be interpreted as a potential for unofficial employment. The breakdown of job seekers' origins can be found in Table 1.

<b>Territory</b>	<b>Amount</b>	<b>Share</b>
Ukraine	31	44,29%
- legal right to work mentioned	4	-
Not specified	15	21,43%
EU Passport/Residence permit holders	12	17,14%
Moldova	11	15,71%
- legal right to work mentioned	0	-
Other	1	1,43%
Overall	70	100,00%

Table 1. The origins of caregiving job seekers at the “Germany in Russian” website.

As seen from Table 1, about 44% of job seekers came from Ukraine. Most of them did not disclose information about their legal status in Germany, which most likely means that they were not allowed to work in the country. The same conclusion can be made about job seekers from Moldova, which published about 16% of advertisements. The EU passport holders came mostly from Latvia, Lithuania, Romania, and Estonia. Around 21% of job seekers did not specify their origin or legal status.



### 7.2.3.2 Flagma.de - Business-related advertisements for free

Flagma is an originally Ukrainian online platform, which is available in 54 countries, including Germany. One can find all sorts of business advertisements there, also vacancies and curricula vitae. As of the 14<sup>th</sup> of April 2021, Flagma had 38 861 advertised vacancies. A search by a keyword ‘caregiver for elderly’ (сиделка) returned 1139 vacancies published since December 2018. The 67 unique vacancies, published between the 14<sup>th</sup> of October 2020 and the 14<sup>th</sup> of April 2021, have been analysed for this research paper.

Almost 70% of vacancies were published by Ukrainian sole proprietors, about 20% by Ukrainian private limited companies, and ~5% by Polish private limited companies. All these companies appear to be employment agencies. Most of them published, on average, more than a hundred other vacancies of different types of low-skilled work.

Almost half of the sample sought caregivers for German clients and thus required basic language skills. Around a quarter claimed to have vacancies in both German- and Russian-speaking families. Less than 10% sought workers for Russian speakers only (Table 2).

Language skills requirement	Amount	Share
At least basic German	33	49,25%
Either German or Russian	17	25,37%
German not required	6	8,96%
Not specified	11	16,42%
Overall	67	100,00%

Table 2. Language skills requirement for caregiver vacancies on Flagma.

Close to 50% of the advertisers did not mention which documents applicants should have to be eligible for the job. For approximately 20% of them, a biometric passport was enough. About 12% asked for documents allowing to work in Poland (a Polish work visa; a “Polish visa”, which most likely refers to either a Polish work visa or a Polish residence permit; a Pole’s Card). Table 3 provides a more detailed overview of requirements for documents in the analysed advertisements.

<b>Documents minimum requirement</b>	<b>Amount</b>	<b>Share</b>
[Ukrainian] Biometric passport	13	19,40%
Polish work visa	4	5,97%
"Polish visa"	3	4,48%
None - the agency will take care of it	3	4,48%
"Any documents"	3	4,48%
EU Passport	3	4,48%
EU Residence permit	1	1,49%
Pole's Card (Karta Polaka)*	1	1,49%
Not specified	33	49,25%
Other	3	4,48%
Overall	67	100,00%

Table 3. Documents requirement for caregiver vacancies on Flagma.

\*Pole's Card (Karta Polaka) is an official document that gives a wide range of privileges to people of Polish origin who reside outside of Poland, such as a right to work and to set up a company in Poland (Council of the European Union, n.d.). For historical reasons, there is a significant number of people with Polish ancestors living in some former USSR countries, especially in western Ukraine and western Belarus.

As of April 21<sup>st</sup> 2021, the website had 4035 curricula vitae (CV). A search by a keyword "caregiver for elderly" (сиделка) returned 126 CVs published since March 2016. The 70 the most recently posted have been analysed. Predictably, the majority of job seekers came from Ukraine (~64%); approximately 31% came from other former USSR countries, such as Belarus, Moldova, Russia, Tajikistan, Uzbekistan, Kyrgyzstan, Turkmenistan, Kazakhstan, and Estonia (Table 4).

Country of origin	Amount	Share
Ukraine	45	64,29%
Belarus	9	12,86%
Moldova	4	5,71%
Russia	3	4,29%
Tajikistan	2	2,86%
Other CIS countries	4	5,71%
EU	1	1,43%
Not specified	2	2,86%
Overall	70	100,0%

Table 4. The origin of caregiving job seekers on Flagma.

About 15,7% of job seekers had previous work experience as a caregiver in Germany. 4,3% have worked as a caregiver in other EU countries (Austria, Italy, France, Poland). 5,7% have worked in the EU (Germany, Bulgaria, Croatia) in occupations typical for grey labour market – as nannies, cleaners, household helpers, and cooks.

~34% of job seekers were located in Germany at the time of publication. Only about 7% mentioned their legal status (EU Passport, German residence permit, Polish work visa, and Ukrainian biometric passport). Most likely the remaining 93% did not have a right to work in Germany. Considering the high demand for caregivers, a job seeker with a legal right to work would not have a need to use informal sources for job hunting.

One might think that the COVID-19 pandemic would stop non-EU caregivers from seeking a job in Germany. In this case, the number of resumes posted between March 2020 and February 2021 would be significantly lower than during the same time intervals in the previous years. However, the data from Flagma cannot be considered a piece of solid evidence for this assumption (Table 5).

<b>Date of publishing</b>	<b>Number of resumes</b>
March 2016 - February 2017	7
March 2017 - February 2018	46
March 2018 - February 2019	19
March 2019 - February 2020	27
March 2020 - February 2021	21
Since March 2021	6
Overall	126

Table 5. The number of caregivers' resumes categorised by date of publishing on Flagma.

### 7.2.3.3 Jobble

Jobble.org is a job aggregator. The website contains vacancies from different locations with a possibility to select Germany. As of April 25<sup>th</sup>, 2021, Jobble had 48 unique vacancies for caregivers, published not later than “a month ago” by 44 advertisers. Approximately 55% of advertisers declared to be agencies or direct employers; ~11% appeared to be natural persons, while the rest did not disclose this information.

Similar to Flagma, the majority of jobs (~69%) were for German clients and, thus, applicants were required to speak the local language. In 12,5% of advertisements, language requirement was not mentioned, which can be interpreted as no need for foreign languages skills. If this is the case, overall ~27% of vacancies were intended for the Russian-speaking elderly (Table 6).

<b>Language skills requirement</b>	<b>Amount</b>	<b>Share</b>
At least basic German	33	68,75%
German not required	5	10,42%
Not specified	6	12,50%
Either German or Russian	2	4,17%
At least basic English	2	4,17%
Overall	48	100,00%

Table 6. Language skills requirement for caregiver vacancies on Jobble.

Compared to Germany in Russian and Flagma, for a quite significant share of vacancies, applicants were required to possess an EU passport (~31%) or a legal right to work in Germany (~15%). Although, similarly, a lot of vacancies did not contain mentions of the documents (~35%). Overall, more than half of advertisers provide legal employment, while the rest seems to be on a grey side of the labour market (See Table 7).

<b>Documents minimum requirement</b>	<b>Amount</b>	<b>Share</b>
Not specified	17	35,42%
EU Passport	15	31,25%
A legal right to work in Germany	7	14,58%
None - the employer will take care of it	4	8,33%
Ukrainian Biometric passport	2	4,17%
Biometric passport/ "any visa"	2	4,17%
Polish work visa/Polish residence permit/ Pole's Card	1	2,08%
Overall	48	100,00%

Table 7. Documents requirement for caregiver vacancies on Jobble.

#### 7.2.3.4 Joint analysis of all advertisements

Overall, 175 job advertisements and 140 job seekers' profiles have been analysed. All of them were published between the 5<sup>th</sup> of September 2020 and the 25<sup>th</sup> of April 2021. The analysis was performed under the assumption that the advertisements and the profiles are not fraudulent.

Only about 23% of employers required the applicants to be eligible to work in Germany, e.g., to have an EU passport, a German residence permit, or a German work visa. 4% promised to take care of permission themselves. Close to 20% of employers openly expressed that work can be performed unofficially. Finally, more than half (52%) of job advertisements did not contain any information about a required legal status (Table 8).

Approximately 13% of job seekers mentioned a legal status that would allow them to work in Germany. The 15% were clear about the lack of thereof. Close to 72% of job seekers omitted this information (see Table 8). As permission to work in the country is usually a competitive advantage worth mentioning, it is likely that the majority of this last group did not have this legal status too.

A legal right to work in Germany	Source						Overall	
	Germany in Russian		Flagma		Jobble			
	Amount	Share	Amount	Share	Amount	Share	Amount	Share
<b>Required by employers</b>								
Yes	14	23,33%	4	5,97%	22	45,83%	40	22,86%
No	5	8,33%	24	35,82%	5	10,42%	34	19,43%
Not specified	41	68,33%	33	49,25%	17	35,42%	91	52,00%
Employer will take care of it	0	0,00%	3	4,48%	4	8,33%	7	4,00%
Not clear	0	0,00%	3	4,48%	0	0,00%	3	1,71%
Overall	60	100,00%	67	100,00%	48	100,00%	175	100,00%
<b>Possessed by job seekers</b>								
Yes	16	22,86%	2	2,86%	-	-	18	12,86%
No	18	25,71%	3	4,29%	-	-	21	15,00%
Not specified	36	51,43%	65	92,86%	-	-	101	72,14%
Overall	70	100,00%	70	100,00%	-	-	140	100,00%

Table 8. Mentioning of a right to work in Germany in the advertisements.

We can conclude, that approximately 87% of job seekers that advertised their services in the past 7 months could not legally be employed in Germany. About 71% of vacancies did not require a legal right to work.

Approximately 54% of job seekers were Ukrainians; about 27% came from various CIS countries; and only close to 6,5% were citizens of the EU (See Table 9).

Job seekers' country of origin	Source				Overall	
	Germany in Russian		Flagma			
	Amount	Share	Amount	Share	Amount	Share
Ukraine	31	44,29%	45	64,29%	76	54,29%
Moldova	11	15,71%	4	5,71%	15	10,71%
Belarus	1	1,43%	9	12,86%	10	7,14%
Other CIS countries	4	5,71%	9	12,86%	13	9,29%
EU (Latvia, Lithuania, Romania, Estonia)	8	11,43%	1	1,43%	9	6,43%
Not specified	15	21,43%	2	2,86%	17	12,14%
Overall	70	100,00%	70	100,00%	140	100,00%

Table 9. Job seekers' countries of origin.

## 8 Discussion of the research findings

The research findings show that Germany has been consistently liberalising its immigration policy in the past 10 years, following the needs of the labour market. At first, the changes were aimed at highly skilled specialists with a university degree. The Skilled Immigration Act of 2020 opened the door for professionals with vocational qualifications and those wishing to get such qualifications in Germany. We can also observe the change of the approach to labour migration. In the second half of the 20<sup>th</sup> century, it was either regulated by the bilateral agreements with the sending countries or had a limited duration of employment. Current labour migrants do not have to originate from specific countries, and they may count on staying in Germany for an unlimited amount of time as long as they can secure a job.

At the same time, targeting specific countries for the recruitment of workers is not entirely a thing of the past, at least not in elderly care. No less than a few thousand nurses from Vietnam, Serbia, Bosnia and Herzegovina, the Philippines, and Tunisia have migrated to Germany between 2012 and 2019 through programmes supported by the German government.

The data from online resources of the Russian-speaking community shows a huge interest in cooperation from both caregiver seekers located in Germany and caregivers in the former USSR countries. The lack of the right to work and, therefore, the illegal nature of employment does not seem to be a restraining factor for both parties. Due to differences in visa regimes and sizes of the population, more than half of job seekers are of Ukrainian origin. We can also observe that not only the Russian-speaking elderly population is interested in these caregivers, but also their German-speaking peers. Clearly, the shortage of caregivers in Germany has stimulated the growth of the grey care market and illegal labour migration from proximate non-EU countries.

## 9 Conclusion

The continuous ageing of Germany's population has been influencing its society in many ways; decreasing labour supply being one example. It places working people in a position when they need to provide for many dependents. Migration has been recognised as one of the ways to mitigate this consequence. And Germany has a long history of using migrant labour to address the needs of its economy.

Elderly care is one of the most affected industries by the phenomenon, as demand for its services grows faster than the system is able to adapt. Typically for developed countries, Germany's elderly care system employs a big number of people with a migration background. For some time, less developed states of the EU served as a source of caregivers; however, this arrangement is not sufficient anymore.

The findings of this paper demonstrate that the shortage of staff in the elderly care industry led to an increase in labour migration from third countries. Firstly, the recent liberalisation of Germany's immigration policy also applies to nursing professionals and those who would like to receive such training. Secondly, the government initiated a few recruitment projects outside the EEA with the purpose to bring more staff to care facilities. Thirdly, the Russian-speaking community seems to be solving the insufficient supply of caregivers by inviting fellow speakers from former USSR countries, who are more than willing to provide care in exchange for local compensation.

This research aimed to answer a dichotomous question of whether labour migration has increased or not. Researchers interested in the topic could go further and try to estimate the actual size of this migration. Grey care labour migration could be of particular interest, as it will never be reflected in any official statistics. This paper, to some extent, shed a light on the part created by the Russian-speaking community. Other prominent diasporas, for example, Turkish and Arabic, are also likely to engage in similar practices.

The online resources of the Russian-speaking community in Germany contain a lot of different information about the economic activities of its users and could provide insight into the informal economy created by this share of the population.



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