



Co-funded by the Erasmus+ Programme of the European Union 2018-1-NO01-KA204-038801

ARE YOU AN INFORMAL CARER?

ind using any means, shall i it reflects only the author's view and that the National Agency the European Commission are not responsible for any use that may be made of the information it contains

Informal carers are people of all ages, who provide (usually unpaid) care to someone with a chronic illness, disability or other long lasting health or care need, outside a professional or formal employment framework (Eurocarers, 2018). According to recent research, informal carers across the EU provide over 80% of all care (Hoffmann & Rodrigues, 2010). Care usually takes place within social relationships – the majority of carers are parents, partners, children, grandchildren, siblings, friends or neighbours. Because caring activities depend on the needs of the person requiring care, there is often no limit to the amount of care provided nor to the time spent caring (Eurocarers, Family care in Europe).





ANSWER THE QUESTIONS LISTED BELLOW.

DO YOU HAVE SOMEONE IN YOUR FAMILY OR A CLOSE FRIEND WITH A HEALTH-RELATED CONDITION SUCH AS:

- Physical disabilities (for example, physical disabilities caused by frailty, accident, injury, or illness)
- Mental illness (for example, depression or anxiety)
- Cognitive impairments (for example, cognitive impairments caused by dementia or Alzheimer's, autism, learning disorders, traumatic brain injury, or Down Syndrome)
- Addiction (Drugs or alcohol)
- Other health-related conditions ?



DO YOU LOOK AFTER, HELP, OR SUPPORT ANY OF THESE FAMILY MEMBERS OR FRIENDS WITH THIS HEALTH-RELATED CONDITION?

IF YOU ANSWERED "YES" TO BOTH QUESTIONS ABOVE, THEN YOU MIGHT BE A CARER.

IF YOU THINK YOU NEED HELP OR SUPPORT, YOU MIGHT FIND IT AROUND YOU. CHECK THE NEXT SECTION TO KNOW MORE.

YES [

NO

HOW IS IT LIKE TO BE A CARER?

BEING A CARER CAN HAVE AN IMPACT ON...

PHYSICAL AND MENTAL HEALTH

the prevalence of mental health problems among informal carers is 20% higher than among noncarers, and particularly high for people who provide very intensive care (more than 20 hours per week). Depressive disorders, anxiety, anger and hostility are frequently associated with heavier caring duties (OECD, 2011).

Caregiving is connected with the development of harmful habits and lifestyles (smoking, inadequate food or sleep habits) and failure to take preventive health measures (such as medical consultations) (Eurocarers, 2018).

EMPLOYMENT

▲ difficulties in relation to balancing paid work with care responsibilities, carers often opt for part time employment, which results in lower income... According to the 3rd European Quality of Life Survey, 14% of non-working carers feel depressed all or most of the time, which is more than twice as high as the corresponding figure for working carers (Eurocarers, 2018). Carers have limited professional opportunities, lower salaries and pension entitlements – especially when they opt for part-time employment

FINANCIAL SITUATION

Interview of the second provision and provision and direct costs of care (e.g. medication, heating, special diet), medical devices, home adaptations and payments for formal care

SOCIAL LIFE

 natural socialisation processes as well as the family relationships could be affected by caregiving. Caregivers are, in comparison to non-caregivers more, more exposed to social isolation due to caregiving.

AND IF YOU ARE A MIGRANT INFORMAL CARER?

MIGRANT CARE WORKERS OCCUPY A POSITION OF POTENTIAL 'DOUBLE' DISADVANTAGE WITH THEIR RIGHTS NOT YET FULLY RECOGNIZED AS CARERS, AND WITH A HIGHER RISK OF SOCIAL EXCLUSION AS MIGRANTS.

WHAT ARE THE ISSUES?



If you are a carer and you also have a migrant background, you might experience some extra-difficulties:

■ POOR WORKING AND LIVING CONDITIONS - carers with migrant backgrounds are, in comparison with native informal carers, more prone to exploitative working conditions, excessive working hours and limited or unpaid sick leave. Carers with migrant backgrounds are also more likely to be under payed, to have a dependent status of migrant worker, and to lack access to labour rights advocates. Carers with migrant backgrounds, especially live-in workers are more likely to be exposed to inadequate housing, lack of privacy, and risks of homelessness.

▲ DISCRIMINATION on the basis of nationality and religion.

STIGMATISATION - being an informal carer with a migrant background

▲ DIFFICULTIES WITH INTEGRATION INTO SOCIETY – linguistic, cultural, economic obstacles to assimilate into society and to gain access to the educational and support opportunities available to native carers.

■ INVISIBILITY OF THEIR ROLE IN SOCIETY (Shared concerns and joint recommendations on migrant domestic and care work, 2018)

WHAT IS THE SITUATION IN NORWAY

HOW MANY MIGRANTS PER YEAR

SSB – Statistisk Sentralbyrå Norway is the one showing updated numbers on this site: https://www.ssb.no/innvandring-og-innvandrere/faktaside/innvandring

At IMDI we are able to see from what part of the world people are migrating from to Norway We see how many have parents with migrant background . 4.4 % of the Norwegian population have background as refugees.

https://www.imdi.no/om-integrering-i-norge/ innvandrere-og-integrering/innvandrerbefolkningen-inorge/ https://www.ssb.no/innvbef https://www.ssb.no/befolkning/statistikker/flyktninge Fhis picture shows the largest migrant populations in Norway:



WHY DO PEOPLE MIGRATE TO NORWAY?

Work, family-reunion and escaping from war and conflicts are the main reasons: https://www.ssb.no/befolkning/statistikker/innvgrunn/aar The largest non-European groups come from Syria, Iran/Iraq and Somalia.

Where can you find help if you are an informal caregiver with migrant background:

There are a lot of organizations, groups and networks that people find by accident or are shown to them. NGO and other volunteer groups do a lot of good work.

We will show the official public sites that migrant carers and their helpers or guides should know about: https://helsenorge.no

Is the official webplace for all citizens, and are offering more and more services digitally, like keeping track of medicines, your legal rights, appointments with health care professionals

You will be able to read in English about the health care system in Norway on this page https://helsenorge.no/other-languages/english https://helsenorge.no/foreigners-in-norway

The Government is starting to gather information about your rights, like the rigt to interpretor and where to find help.

If you have physical and/or mental illnesses, these are your rights: https://helsenorge.no/rettigheter/rett-til-helsehjelp

If you are an asylumseeker or refugee, both you and your family have the right to health care: https://helsenorge.no/utlendinger-inorge/flyktninger-og-asylsokere

In this link you will find several organizations that work for patients and informal carers rights: https://profesjon.no/brukerorganisasjoner/

The National Health Institute has a lot of relevant statistics and information on their site: https://fhi.no/cristin-prosjekter/aktiv/levekar-og-helse-blant-innvandrere-i-norge/

The competence center for Migarant Helsth is a part of the Natrional Helatrh Institute and has its own network for helath workers and organizations working with migrants: https://fhi.no/hn/migrasjonshelse/

If you need help for getting a place to live, or with translations, interpretation and language, you will find resources here: https://www.imdi.no/en/

To apply for social services and welfare and to register for work , you need to contact you local NAV office in the municipality: https://www.nav.no/en/home

For legal aid and rights as asylum seeker, you can contact NOAS – Norwegian organization for asylumseekers: https://www.noas.no/

EXTERNAL LINKS:

▼ Eurocarers. (2018). Recognizion and valorisation of informal carers – Italian members of Eurocarers network meet their MEPs (Press Release). Available at: http://www.eurocarers.org/Press-Release-Recognition-and-valorisation-of-informal-carers-Italian-members-of-the-Eurocarers-network-meet-their-MEPs-?lang

Christensen, K. and J. Manthorpe. (2016). Personalised risk: new risk encounters facing migrant care workers. Health risk and society, 18 (3-4): 137-152.

Hoffmann, F., & Rodrigues, R. (2010). Informal carers: who takes care of them? Vienna: POLICY BRIEF APRIL 2010 European Centre for Social Welfare Policy and Research.

◀ Help Wanted? Providing and Paying for Long- Term Care, OECD Health Policy Studies - OECD Publishing, Colombo, F. et al, 2011.

▼ Vilans, Centre of Expertise for Informal Care, MOVISIE, Mezzo & Eurocarers. Family care in Europe. Available at: http://www.eurocarers.org/userfiles/file/factsheets/FactsheetEurocarers.pdf

https://parorendealliansen.no/fakta-statistikk/



Univerza *v Ljubljani*







