



**AWARENESS RISING PACKAGE FOR CARERS
WITH MIGRANT BACKGROUNDS**

YOU CARE!

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AIM OF THE GUIDE



The aim of this document is to give ideas and suggestions for the exploitation of the Informative booklet "You care!" about who the carers with migrant backgrounds are.

The content of the booklet can be used to raise awareness on caring among citizens with migrant background as well as discussed with local stakeholders (migrant communities, associations etc.) and by social care professionals to explain who the carers with migrant backgrounds are, what are the services provided nationally and where they can turn for help.

ABOUT THE BOOKLET

The booklet is a multi-language informative tool explaining who an informal carer is and how to seek help. It was developed by University of Ljubljana, Faculty of Social Sciences with comments and suggestions from Anziani e non solo, KMOP, Associazione C'entro and Parorendealliansen.

The information presented is put in a national context, this means the information provided is adapted to specific country situations.

Beside the definition on informal carers, the booklet includes a self-identification form to help carers with migrant backgrounds understand if they are actually informal carers.

In the last section the booklet provides nationally specific information about how to access local services useful for informal carers and migrants (ex. health care, social life, job opportunities, language classes etc.)



WHERE TO USE IT?

The main purpose of the booklet is to raise awareness by offering a simple definition about who is an informal carer with migrant background, what is the national specific situation, where to seek help and what are the different services provided by partner countries.

The booklet could reach different migrant communities through distribution by:

- Cultural associations of migrant communities
- Places of worship
- Community centres
- Etc.

The booklet could reach informal carers with migrant backgrounds through distribution by:

- Health care centres
- Out-patient clinics
- Hospitals
- Associations of chronic diseases
- Social service providers
- Schools
- Etc.



HOW TO USE IT?

The booklet can be distributed at different venues suggested above to be used individually or can be used in group settings. Social professionals can go through the booklet with their users and use it as a base for explaining who informal carers with migrant backgrounds while the self-identification tool as a general identification tool.

It can also be used as a base to develop a debate about informal care and carers with migrant backgrounds.

WORKING WITH MIGRANT CARERS: SUGGESTIONS FOR PROFESSIONALS

ANALYSE THE SPECIFIC CASE:

It is important to begin with a quick analysis of the care needs related to the presence of people of different nationalities. Not all foreigners relate in the same way to the world around them, therefore the community of foreigners present in a territory ends up being characterized by different levels. The “group-community” of foreigners who share the same nationality, although sometimes organized (for example: associations on a national basis), should not be thought of as exhaustive of the relationship between the foreigner and the nation that surrounds him.

FOCUS ON THE FAMILY LEVEL:

The first level to be analyzed remains that of the family group, an issue not unlike that of the generality of the inhabitants from the foreigner’s country of residence. It is the family as an entity, conceivable in all its culturally determined variants, that is the nucleus in which the care process is developed.

One should, therefore, start from the identification of the personal needs of the members of the family nucleus, to then analyze how these needs are resolved, as in the case of foreigners with health problems who frequently access medical care, for example, in the case of chronic illnesses (e.g., diabetes) and who require the mediation of a family member or a compatriot to interface with the health authorities.

Therefore, the resolution of the problem does not necessarily occur through the mediation of compatriots, who sometimes hold a role of guidance that is not exhaustive in the response to the need for care.

CHECK HOW THE ROLE IS UNDERSTOOD:

If we were to ask people of different nationalities whether they know what is meant by care work, they would all answer in the affirmative. However, almost everyone would probably imply a different concept from one another. Indeed, culture of origin influences the consideration of care work when looking at others, but also when looking at oneself.

The concept of care in the family, widespread in the vast majority of cultures, can become for the caregiver a trap that makes the development of the person difficult, and in the case of the foreigner in particular way can make impossible a process of social inclusion that is unequivocally necessary.

EXPLORING THE STIGMA ASSOCIATED WITH DISABILITY:

Within some cultures, disability is seen as something not only negative, but anthropologically shameful. This culture, which a few decades ago was widespread even in some of the societies we would now call socially advanced, has been overcome through a regulatory apparatus aimed at lessening the impact of inequality. However, being in a country with such a defined context does not automatically mean the end of the stigma towards disability and those who deal with it.

Often, in fact, the desire to hide is a consequence of a mentality imposed or inherited from the family itself. For the foreigner who takes care of another family/community member, therefore, different issues intersect that can have a negative impact on his or her life: language difficulties often prevent an autonomous awareness of one's role; the role of care takes place mainly within the home context, which discourages contact with the reality that surrounds the foreigner.

ENHANCING THE MIGRANT CAREGIVER'S SELF-DETERMINATION

For migrant caregivers, isolation is a risk that can be overcome through an adequate knowledge of the normative apparatus of the host country, of the training possibilities and of the opportunities that derive from the skills acquired through care work.

Recognition of one's own social role and abilities is the first, indispensable step to be taken in order to prevent the sense of responsibility from turning into a culturally connoted sense of guilt or destiny.



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