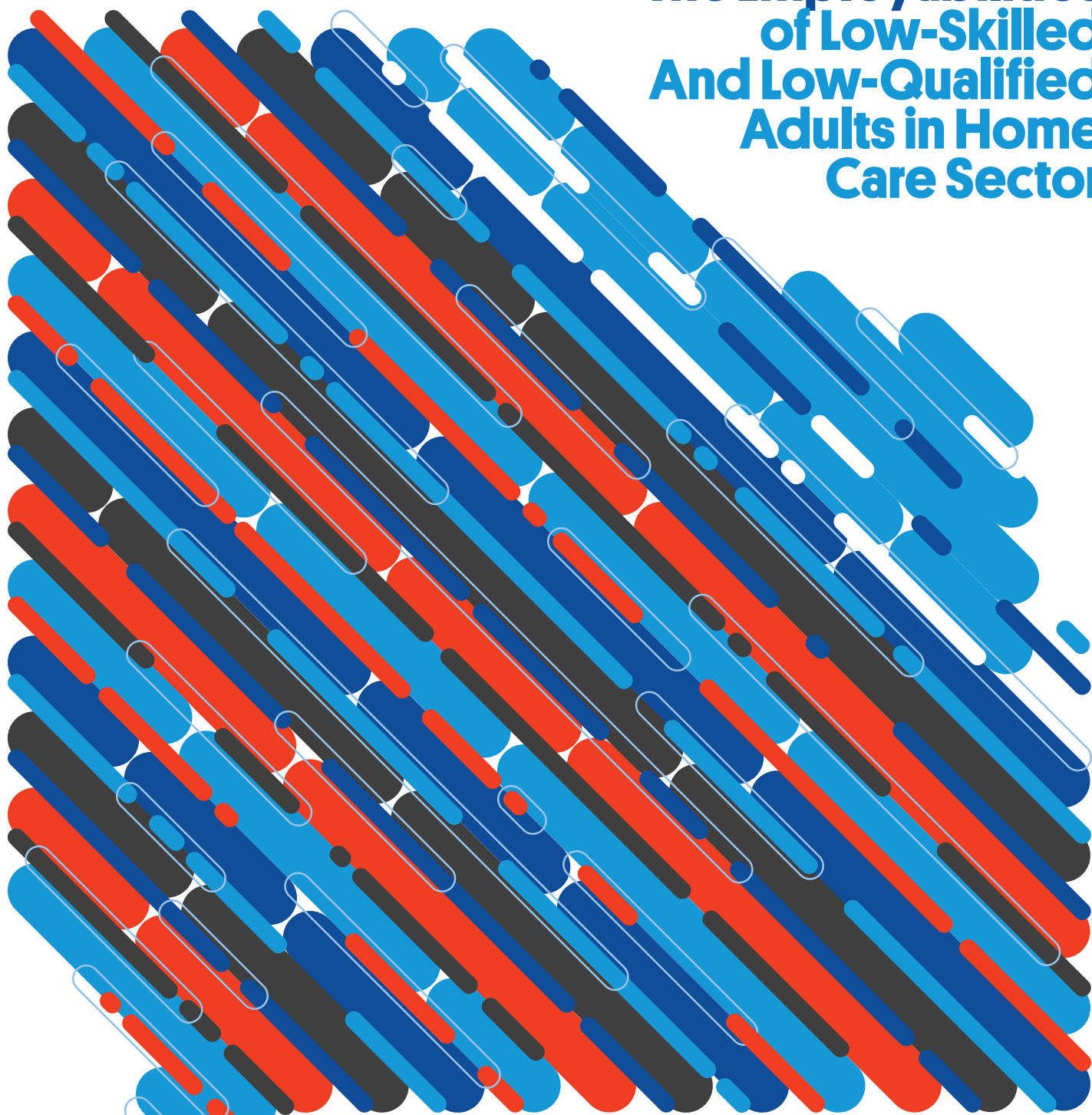




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# Empowering The Employabilities of Low-Skilled And Low-Qualified Adults in Home Care Sector



## EMPOWER4EMPLOYMENT

### Erasmus+ KA204

### Strategic Partnerships for Adult Education

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# EMPOWER<sup>4</sup> EMPLOYMENT

**EMPOWER4EMPLOYMENT**

# **Empowering The Employabilities of Low-Skilled And Low-Qualified Adults in Home Care Sector**



**EUROPEAN SOCIETIES AND ECONOMIES HAVE EXPERIENCED SIGNIFICANT CHANGES, DIGITAL AND TECHNOLOGICAL INNOVATIONS AS WELL AS LABOUR MARKET AND DEMOGRAPHIC CHANGES SINCE 2006. SOCIETY AND ECONOMY RELY HEAVILY ON HIGHLY COMPETENT PEOPLE WHILE COMPETENCE REQUIREMENTS ARE CHANGING; IN ADDITION TO GOOD BASIC SKILLS (LITERACY, NUMERACY AND BASIC DIGITAL SKILLS) AND CIVIC COMPETENCES; SKILLS SUCH AS CREATIVITY, CRITICAL THINKING, INITIATIVE TAKING AND PROBLEM SOLVING PLAY AN INCREASING ROLE IN COPING WITH COMPLEXITY AND CHANGE IN TODAY'S SOCIETY.**

European Commission declared with the report named 'Reflection Paper on Harnessing Globalisation' that the key to empowerment is lifelong learning. Equal access to high-quality education and training is a powerful way of redistributing wealth in a society. Skills play a key role in determining countries' comparative advantages in global value chains (GVCs). A lot of the opportunities and challenges brought about by GVCs are being affected by countries' skills. The OECD Skills Outlook shows how countries can make the most of global value chains, socially and economically by investing in the skills of their populations. Applying a "whole of government" approach is crucial. Adult learning improves companies' innovation performance, productivity, profitability and workforce motivation. It helps to improve a country's economic competitiveness and growth.

Competence needs are not static; they change throughout life and across generations. It is therefore important to make sure that all adults have the opportunity to acquire the required competences in continuous professional training and adult education or different forms of non-formal and informal learning. In response to the current competence gaps in society, the 'Pillar of Social Rights' underlines as its first principle that "everyone has the right to quality and inclusive education, training and life-long learning in order to maintain and acquire skills that enable them to participate fully in society and manage successfully transitions in the labour market.

The world population is rapidly aging and the rates of chronic diseases are increasing. Current demographic developments and changes in Europe have led to increased interest in home care. As a result, more people will be dependent on care in the near future. In parallel with

financial shortages, limited supplies of trained staff are seen as the cause of unmet needs in many countries in Europe. A general shortage of home-care staff existed in several countries as well as a lack of (sufficiently qualified) home-care staff.

Although these workers are considered critical to home care, there are growing concerns of a severe global shortage in the supply of home care workers. Trends indicate that in the absence of successful plans for expanding this workforce, the crisis will increase in the future.

Increasing demand for home care will need to expand formal care services and increase spending. This situation creates some positive expectations in terms of recruitment opportunities in the sector. Low-skilled workers and those employed in lowskilled occupations also tend to experience more precarious employment than their higher skilled peers. They are more likely to be self-employed than those with medium or high levels of education and are also more likely to be employed under a temporary contract. People without the right skills are highly vulnerable to labour market changes.

**Partnership Structure:** The project's partnership structure is composed of Izmir Governorship–Coordinator (Turkey), Redefine-Associação Para A Investigação, Educação E Desenvolvimento (Portugal), WSBINOZ - Wyzsza Szkoła Biznesu I Nauk O Zdrowiu (Poland), Bit Management Beratung GesmbH (Austria), Izmir Chamber of Commerce (Turkey), Menderes Municipality (Turkey).



## START OF PROJECT

11.11.2019

## END OF PROJECT

10.11.2021

## PROJECT AIM

The main aim of the project is to empower the employability of low qualified and low skilled adults. This will be achieved through defining and assessing the required skills, competences, and developing tools. Through the use of methods, handbook, portal and curriculum this will provide those with low skills and qualifications the support needed to find and match a position with the right skills and competences in the home care sector.

## MAIN INTELLECTUAL OUTPUTS

1

### The **SKILLS/COMPETENCES DETERMINATION**

**HANDBOOK**, defining the basic and transversal competences required for employment in the home care sector, with a focus on learner-centered training approaches, as well as appropriate validation methodology of job seekers skills.

2

### A **TRAINING CURRICULUM**

aimed at equipping adult trainers, career advisors, and employment agents, with the necessary material for them to be able to adequately guide and prepare job seekers for employment in the home care sector.

3

**A JOB-MATCHING PLATFORM** which will connect job seekers and prospective employers, thus facilitating employment in the area. In particular, people with a low level of education need to be supported not only in the development of skills, but in particular the entry into the labor market. This would allow professional home care organizations but also private care needers to get in touch.



*EMPOWER4EMPLOYMENT Project Kick-off Meeting (16-17 January 2020, Portugal):*

## COVID-19 Pandemic Impact On Home Care And Correlation Between The Project EMPOWER4EMPLOYMENT:

The population most affected by the COVID-19 virus is the elderly and the people with chronic diseases and disabilities. Home care for these groups is a great deal of important. Care workers are expected to meet qualifications as caring for older people with advanced illness, interprofessional collaboration, knowledge of long-term care, and end-of-life care. Empower4Employment Project's outputs also will support the home care providers and home care workers in the pandemics such as COVID-19.

The project is in the same line with the guidelines concerning home care in COVID-19 pandemic developed by World Health Organisation (WHO) and European Centre for Disease Prevention and Control (ECDC). EMPOWER4EMPLOYMENT Project will help the communities to meet the needs on public health measures related to the management of safe home care and which competences/skills care workers should possess to enable them to carry out their duties in sustaining continuous quality care during pandemics such as COVID-19.





The kick off meeting of the project EMPOWER4EMPLOYMENT was held in Setubal-Lisbon, Portugal in 16-17 January 2020. Before all project partners' brief presentations of their organisations, project coordinator made a full presentation of the project EMPOWER4EMPLOYMENT, starting by the actual scenario in the participant countries, in what refers to the main problems felt by the aging population and persons with disabilities, with special reference to the cases where they are living alone, and the impacts in society in result of the actual demographic trend. It was given an in-deep presentation to project management guides, tools, plans which was followed by intellectual outputs presentations. A specific session was dedicated for the first output, Skill/Competences Determination Handbook.





At the end of the meeting on the second day, Ambassador of The Republic of Turkey in Lisbon, Lale Ülker, honored the project team with her kind invitation. All members of the project, consisting of transnational partners visited the Ambassador and shared the details of the project.







**THERE IS A BIG  
GAP BETWEEN  
THE DEMAND OF  
HOME CARE AND  
NUMBER OF HOME  
CARE WORKERS IN  
THE WORLD.**

**First findings concerning  
the project's first output  
have been obtained from  
each partner country and  
all over the world:**

CURRENT JOB PROFILES OF HOME CARE WORKERS ARE DETERMINED IN EACH PARTNER COUNTRIES AND ALSO IN ALL AROUND THE WORLD. A DETAILED OVERVIEW OF THE DIFFERENT PROFESSIONAL PROFILES, THEIR MAIN ACTIVITIES, WORK ENVIRONMENT AND THE REQUIRED COMPETENCES AND SKILLS.





## PARTNER COUNTRIES

**1. IN POLAND,** there are 4 professional categories that can be qualified for the the project. These categories embrace: carer of the elderly, carer at the social assistance home, medical carer and the personal assistant of the disabled person. As the name implies, professional categorization definitely concerns the place of employment, its specificity and scope of duties to a greater extent but to a lesser one the skills and competences since they are similar and result from the need for care and support.

**2. IN AUSTRIA,** there are currently 4 job profiles that can be included in the the project – the 24-hours-carer, the home carer/ helper, the carer for the elderly and the care assistant. Whereas the 24-hour-carers, the home-carers and the carers for the elderly mainly work in the fields of support and assistance of people in need of care, the care assistants already have more complex and special working tasks that include real care tasks and also minor medical tasks.

**3. IN PORTUGAL,** the home care service is provided by a team which delivers care and services to families or persons who are in their homes, in a situation of physical or mental dependence and who cannot ensure, temporarily or permanently, the satisfaction of their basic needs and or to instrumental activities of daily living, nor have family support for this purpose. There are two different types of Home Care Services as Standard and Integrated Home Care Service. Standard Home

Care Service developed and implemented structure, which consists in the provision of individualized and personalized care at home to individuals and families when, due to illness, disability or other impediment, they cannot guarantee temporarily or permanently the satisfaction of basic needs and/or activities of daily living. Its services are preconized for elderly, adults with deficiency, and persons in a situation of dependency. On the other hand, Integrated Home Care Service a set of multidisciplinary, flexible, comprehensive, accessible and articulated actions and care, social and health support, to be provided at home, 24 hours a day and 7 days a week, and is preconised for persons situation of high dependency, HIV patients and their families. The categories of home care workers such as family helper, family and community support assistant, geriatric agent, family support and community support technician, geriatrics technician.

**4. IN TURKEY,** home care services have been providing by different type of organization: Home care services affiliated to the ministry of health, home care services affiliated to municipalities, private institutions providing home care, and individual home caregivers or assistants (caregiver). There are different type of categories of home care workers consisted of 24-hour-caregivers/care worker, home care/assistants, care staff and care support staff. Qualifications such as certification, home care experience, preferably high school graduate are expected for this position.



## OTHER COUNTRIES

**5. IN UNITED STATES,** home care workers include personal care aides, home health aides, and nursing assistants who work in two industries: Home Health Care Services and Services for The Elderly and People with Disabilities. So, there are currently three job profiles that can be included in the project – personal care aides, home health aides, and nursing assistants. Home care work, regardless of occupational title, typically involves assistance with daily tasks such as eating, dressing, and bathing.

**6. IN CANADA,** there are currently two job profiles that can be included in the project. These are home support workers and health care aides.

**7. IN AFRICAN COUNTRIES,** home care workers profile consist of four different categories: Care givers, qualified professionals caregiver, home based care volunteers, community health workers – volunteers. Volunteers are the great deal of importance in terms of the home care services. Home care services consists of charities that provide voluntary services in addition to private companies. While private companies provide services such as palliative care, post-hospital care; voluntary associations appear to focus on care such as compliance and support for HIV and TB treatment, health and hygiene education.

**8. IN INDIA,** 91.6 % of the home care workers are informal care givers such as family members. Unpaid family carers represent the most dominant source of care provision. Besides, private care centers are also common. Home care workers profile consist of four different categories: personal care attendant, unqualified private practitioners, trained attendant, and nursing aide.

**9. IN MIDDLE EAST COUNTRIES,** home health aid in the team performs services involving the personal care of the patient. A trained paid housekeeper can take this role of the home health aid. Most of the Middle East Countries home care has been providing as Informal care-often provided by spouses, adult children, and other family members. Some policies support families such as Facilitate Family Provision of Support Program to assist families in caring for the elderly include providing tax incentives for elder care and increasing day care.

**10. IN JAPAN,** the range of services and institutions today associated with home care is much wider, including

the assisted living/residential care facilities, adult day care services, home health care services and hospice care. Japan's Ministry of Health, Labour and Welfare uses the International Standard Classification of Occupations to establish post titles for its health professionals. Home care workers profile consist of four different categories: Personal care workers, Community health workers, Health Promotion Volunteer.

**11. IN CHINA,** the homecare service market is at an early stage of development, with very few established providers. Long term care services comprise informal care given to elders by family members and formal care provided by professional institutions or communities. As per the Chinese traditional culture of filial piety, the younger family members bear the main responsibility to care for older persons. According to the China Family Development Report, 90 percent of older persons reside at home, and their main caregivers are spouses, sons, daughters-in-law and daughters. On the other hand, most professional caregivers are laid-off workers or rural-urban migrant workers who lack much education as well as knowledge and skills for long term care.

**12. IN LATIN AMERICA,** Home-based services for older persons constitute a fourth care modality, which forms part of the National Care Strategy. This involves care and assistance for older adults according to their level of dependency, provided in their place of habitual residence. Actions range from helping with daily bathing, preparing and providing food; as well as home cleaning, medical care; as well as accompanying to medical appointments, the use of public transport, shopping or making payments, etc. There are no public services as such for older adults, but mostly mixed services along with a few private ones. Home care workers profile consist of two different categories: a caregiver and personal assistant.



## HOME CARE WORKERS

### TRAINING

Home carers has been trained by different kind of organisations an in different durations.

### PROVIDERS

In most countries there is a mixed economy of home - care provision - that is, privately owned providers (profit - making) provide home care and social home care alongside public providers.

### MOST REQUIRED SKILLS / COMPETENCES

Communication skills are in common in all countries in the World for home care workers.

### JOB TITLES

It is found that there is a massive difference in the world in terms of job titles in home care sector.

## MORE INFO

For more information about the project and outputs please regularly visit the project website at

[www.empower4employment.org](http://www.empower4employment.org)

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## PROJECT PARTNERS

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WSBINOZ

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