



## PRESS RELEASE

### **A Crucial Component. The Contribution of Migrants to the German Healthcare System.**

**A well-functioning healthcare system is essential for a well-functioning society. In its 2022 Annual Report, the Expert Council on Integration and Migration (SVR) concludes that migrants are crucial to the German healthcare system. To ensure that healthcare is equally available to all, irrespective of background or migration history, the sector as a whole must become more responsive to diversity.**

**Berlin, 13 May 2022.** Skilled workers with a migration background are crucial to the German healthcare system. Already today, one in six people working in health and social care was born abroad, while over a quarter of all practising doctors has a migration background – a trend that is set to continue. “Migrants work at all levels of the healthcare system, whether as doctors, carers for the elderly or as nurses. Without migrants, the German healthcare system would collapse – and if we didn’t know this before, the coronavirus pandemic has proved it beyond a doubt,” says Chairperson of the SVR, Professor Petra Bendel. “In view of the ongoing demographic change in German society, the need for skilled workers in the sector will only continue to grow. This means it is essential to ensure that access for those wishing to work in the sector is simplified and improved in a way that is sustainable in the long term.”

#### **Accelerate procedures for recognising qualifications; simplify compensation measures; make recruitment fair**

Skilled workers from abroad who want to work in a regulated profession in Germany must show that their qualifications meet German standards. “Migrants must provide proof of equivalence if they wish to work here. When it comes to health and social care, this is of immense importance to ensure patient safety,” says Professor Daniel Thym, Deputy Chairperson of the SVR. “The success of any recruitment strategy aimed at attracting skilled workers from abroad therefore depends on how recognition procedures are implemented in practice. Migration must be understood as a holistic process in which each individual step is dependent for its success on all the others. We believe that the procedures could be significantly improved. Currently, they are often lengthy, and for migrants going through the process, it is difficult to understand who is responsible for what. Accelerating and simplifying processes further, along with ensuring that they are better aligned, is essential. The authorities involved – such as German consular services abroad, immigration and recognition authorities and the Federal Employment Agency – must improve how they work together,” Thym argues.

The SVR also recommends pooling competences in each federal state and making full use of the opportunities offered by a more digitalised administration. Migrants must be able to complete the required compensation measures without unnecessary delays. For this to happen, module-based courses must be expanded in combination with a greater emphasis on (specialist) language training, while recruitment processes should be made as transparent as possible. “This means that potential recruits to the sector must be provided with comprehensive information before they apply. They also need support in dealing with the authorities, as well as support from their employer,” explains Professor Thym. In this sector, it is especially important that recruitment abroad does not impact negatively on healthcare in the relevant countries of origin. “Bilateral agreements could ensure that both sides benefit from this form of migration. We see skills partnerships that promote capacity-building in the country of origin, as well as the destination country, as particularly valuable,” says SVR Chairperson Petra Bendel.



### **Promote migration for educational purposes and pay greater attention to integration in the workplace**

To address the skills shortage in the healthcare system in the long term, the SVR recommends stepping up recruitment abroad for training in Germany. "This has many advantages. It means that fully-trained workers are not recruited away from their country of origin, while migrants who do the whole of their training in Germany avoid lengthy recognition procedures. This can also avoid the transfer problems that can arise with different job profiles and training, while contact to other students makes it easier for foreign students to learn German. This, in turn, facilitates social integration, and thus also integration in the workplace. After all, we don't just want to attract skilled workers from abroad – we also want them to stay once they've arrived," explains Professor Bendel. Health and social care providers recruiting staff from abroad should develop an integration concept and identify staff members who can support the newly-arrived workers.

To retain skilled workers over time, the SVR believes it is essential to improve working conditions in the health and social care sector, particularly in social care. "Migration alone cannot solve the structural shortage of skilled workers in this area," notes Professor Bendel. "We must do more to explore the potential we have here at home in order to attract more people to train for health and social care work – including people who have migrated to Germany themselves or who come from families with a history of migration. But for this to happen, working conditions must improve. We also need a healthcare system that is more responsive to diversity. This would benefit everyone in Germany."

### **Diversity-responsive healthcare is good for everyone**

Individual health is mainly influenced by socio-economic factors. Nonetheless, having a 'migration background' can have a negative impact. A history of migration can play a role in health inequality insofar as even today, having a migration background is statistically more likely to be associated with socio-economic disadvantage. The SVR Annual Report identifies other barriers that can prevent equal access to health and social care services, such as language, difficulties in navigating the healthcare system and discrimination. Framework conditions need to be restructured so that healthcare can become more responsive to diversity. In addition, some migrants have only limited access to publicly-funded healthcare. "It's true that the vast majority of people in Germany have health insurance," says Professor Thym. "But there are still some exceptions, such as EU citizens whose jobs are precarious. Here it could be useful to expand the availability of advice and support centres ('Clearingstellen'). For asylum seekers and people who are subject to an obligation to leave the country, health insurance cards offer many advantages. They are relatively unbureaucratic, but using them doesn't affect the level of benefits available under the Asylum Seekers' Benefits Act."

The same law also entitles migrants living in Germany without a legal residence status to certain healthcare services. In practice, however, migrants often avoid accessing these for fear of deportation. An amendment to Article 87.1 of the Residence Act could be used to exempt the healthcare sector – including but not limited to emergency care – from the duty to inform immigration authorities of relevant information.

### **More topics in the SVR Annual Report 2022**

- A grey area: Foreign workers providing care in the home

- Collective accommodation - a risk factor? Medical care in migrant housing and reception centres
- Flight and trauma: Psychosocial care for asylum seekers

The annual report can be downloaded from the Council's website at: <https://www.svr-migration.de/en/publications/annual-report-2022/>

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### **About the Expert Council**

The Expert Council on Integration and Migration is an independent and interdisciplinary body providing research-based policy advice. Its reports aim to assist those bodies responsible for integration and migration policy, as well as the general public, in their opinion-forming processes. The interdisciplinary Expert Council comprises a total of nine Researchers: Prof. Dr Petra Bendel (Chairperson), Prof. Dr Daniel Thym (Deputy Chairperson), Prof. Dr Viola B. Georgi, Prof. Dr Marc Helbling, Prof. Dr Birgit Leyendecker, Prof. Dr Steffen Mau, Prof. Panu Poutvaara, Ph.D., Prof. Dr Sieglinde Rosenberger and Prof. Dr Hans Vorländer.

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