

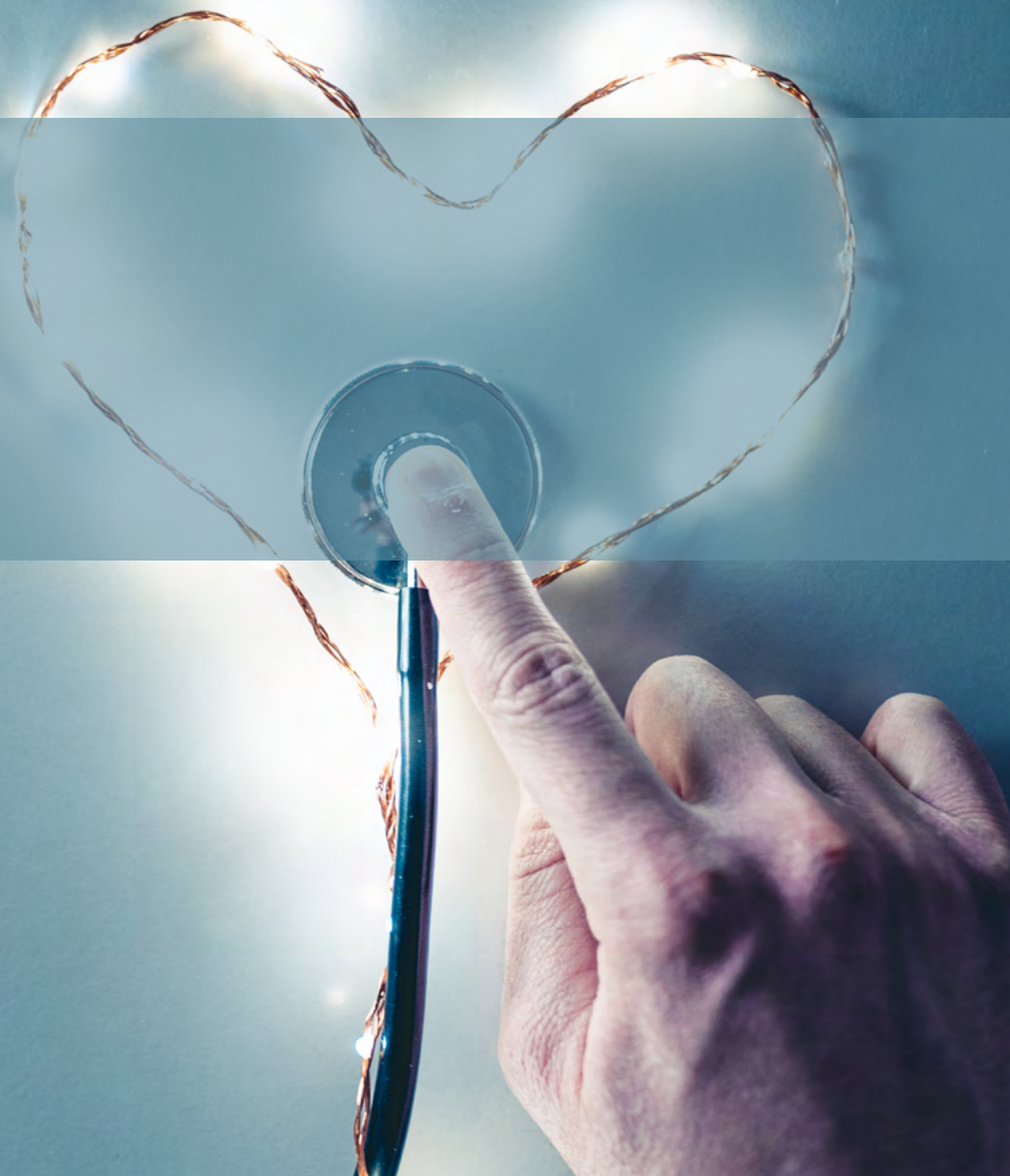


CEDEFOP

# Handling change with care

Skills for the EU care sector

**POLICY BRIEF**

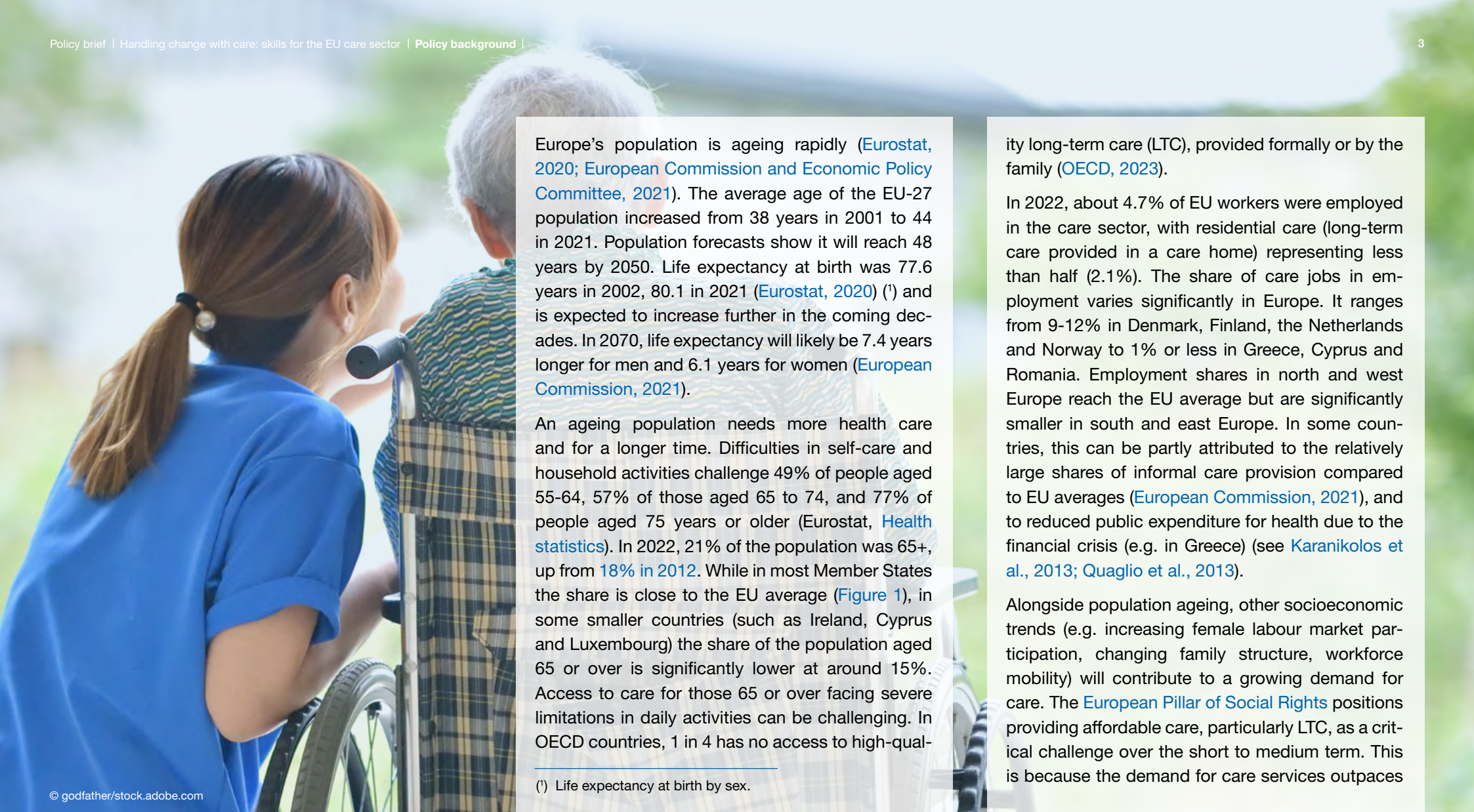




# POLICY BACKGROUND







Europe's population is ageing rapidly (Eurostat, 2020; European Commission and Economic Policy Committee, 2021). The average age of the EU-27 population increased from 38 years in 2001 to 44 in 2021. Population forecasts show it will reach 48 years by 2050. Life expectancy at birth was 77.6 years in 2002, 80.1 in 2021 (Eurostat, 2020) (1) and is expected to increase further in the coming decades. In 2070, life expectancy will likely be 7.4 years longer for men and 6.1 years for women (European Commission, 2021).

An ageing population needs more health care and for a longer time. Difficulties in self-care and household activities challenge 49% of people aged 55-64, 57% of those aged 65 to 74, and 77% of people aged 75 years or older (Eurostat, Health statistics). In 2022, 21% of the population was 65+, up from 18% in 2012. While in most Member States the share is close to the EU average (Figure 1), in some smaller countries (such as Ireland, Cyprus and Luxembourg) the share of the population aged 65 or over is significantly lower at around 15%. Access to care for those 65 or over facing severe limitations in daily activities can be challenging. In OECD countries, 1 in 4 has no access to high-quality

(1) Life expectancy at birth by sex.

ity long-term care (LTC), provided formally or by the family (OECD, 2023).

In 2022, about 4.7% of EU workers were employed in the care sector, with residential care (long-term care provided in a care home) representing less than half (2.1%). The share of care jobs in employment varies significantly in Europe. It ranges from 9-12% in Denmark, Finland, the Netherlands and Norway to 1% or less in Greece, Cyprus and Romania. Employment shares in north and west Europe reach the EU average but are significantly smaller in south and east Europe. In some countries, this can be partly attributed to the relatively large shares of informal care provision compared to EU averages (European Commission, 2021), and to reduced public expenditure for health due to the financial crisis (e.g. in Greece) (see Karanikolos et al., 2013; Quaglio et al., 2013).

Alongside population ageing, other socioeconomic trends (e.g. increasing female labour market participation, changing family structure, workforce mobility) will contribute to a growing demand for care. The European Pillar of Social Rights positions providing affordable care, particularly LTC, as a critical challenge over the short to medium term. This is because the demand for care services outpaces



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...in **some Member States**, there are **relatively large shares of informal care provision** compared to EU averages...



...**population ageing**, increasing **female labour market participation**, changing **family structure**, and **workforce mobility** will contribute to a **growing demand for care...**





the growth of the care workforce. EU funding, such as the [Recovery and Resilience Facility](#) and the [European Regional Development Fund](#), support Member State investments in their health and care sectors. The 2022 [European care strategy](#) recognises the socioeconomic challenges the care sector faces and proposes actions to ‘support Member States in increasing access to high-quality and affordable care services, while improving working conditions and work-life balance for carers’ ([European Commission, 2022](#)).

The capacity of the residential care sector, and of social work without accommodation, differ substantially across Europe. Culture, tradition and the organisation of healthcare systems make the provision of care outside of residential care facilities and in people’s homes more common in some countries than in others.

Employment in the care sector has grown steadily in recent years and is forecast to continue doing so. Between 2011 and 2022, it grew by 20% and matched the growth of population aged 65+, the most vulnerable age group. In south and east European countries with relatively weaker care sectors, employment in care grew at rates of 30% or higher, narrowing in the last decade the gap between care capacity and needs of the rapidly ageing population.

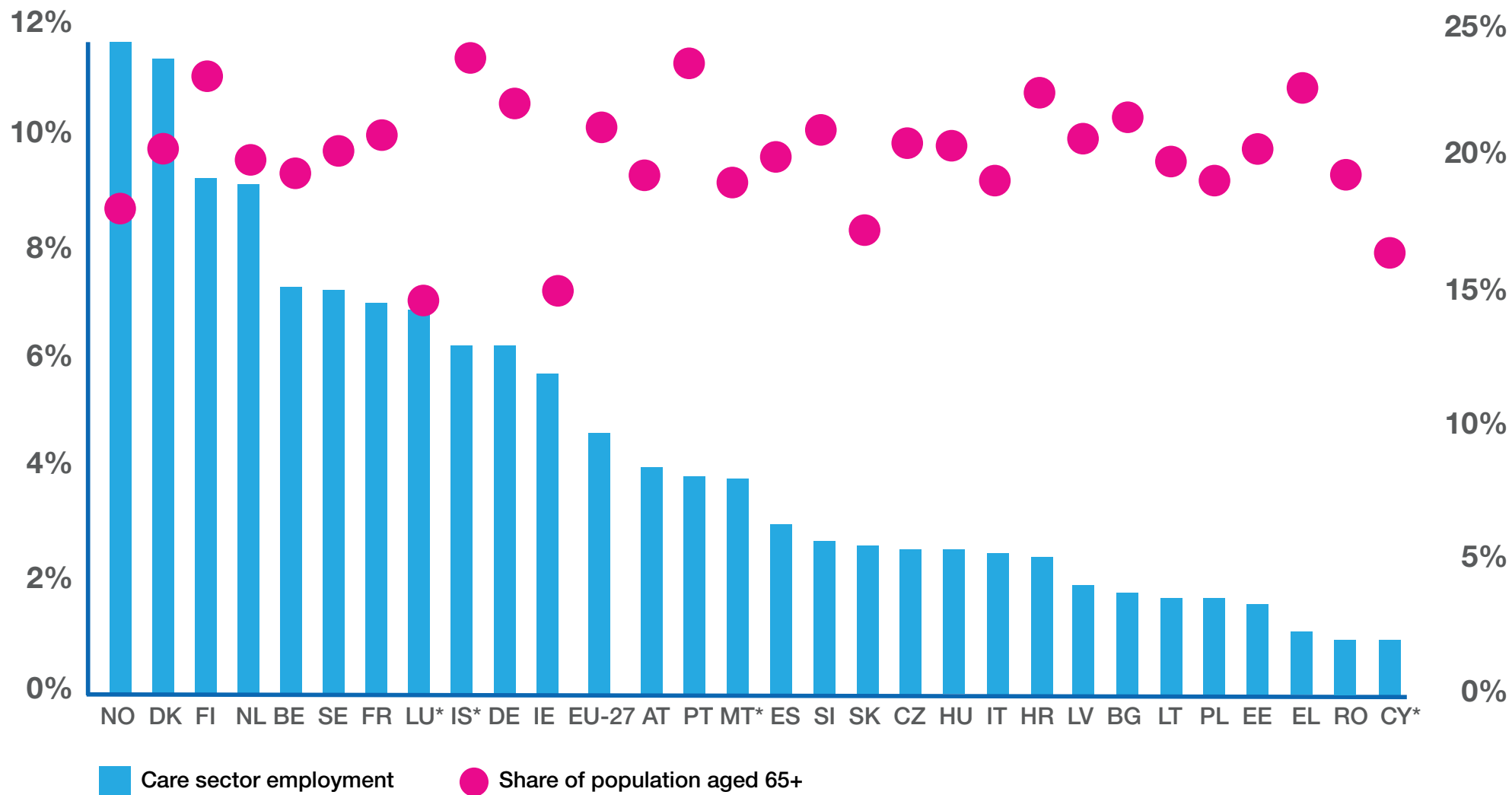
However, the drivers of employment growth in the care sector in Europe are now fading. With the EU unemployment rate almost halving between 2013 and 2022 (6.2%), the pool of available labour has shrunk significantly: this challenge affects care more than other sectors, because shortage jobs cannot be automated or outsourced. Population ageing challenges the care sector in several ways: alongside increased demand for care services, care workers themselves going into retirement and the

shrinking of youth cohorts make it increasingly difficult to match the demand for care services to the supply of care workers. The sector’s perceived unattractiveness, resulting from its poor employment terms and conditions compared to other sectors, contributes to the challenges of matching.

As [most paid care workers are women](#), increasing female labour market participation will reduce informal care provision. Trends impacting family structures, workforce mobility, and emigration will also increase the pressure on the sector. The same holds true for new target groups emerging, such as migrant and refugee children requiring specialised care.

Structural differences in the pace of ageing, the prevalence of particular health conditions, demand and supply (e.g. in terms of the types of LTC services offered), competition for staff from other sectors, and differences in retirement regulations create different contexts in European countries ([Eurofound, 2020](#)). The growing need for care, coupled with poor working conditions (often involving irregular work and low pay), accentuates shortages in the sector. COVID-19 further exposed long-standing weaknesses and structural problems, because restrictions made care difficult to provide when it was most needed ([ISSA, 2021](#) and [Achou et al., 2022](#)). The pandemic put the importance of care work in an ageing society in the spotlight and helped uncover the potential of using technology to assist (rather than substitute) care providers. It also accelerated the trend towards home-based rather than residential care.

Figure 1. **Employment share of the care sector (left axis) and share of population aged 65+ in EU+ (right axis) in 2022**



Source: European labour force survey (code: LFSA\_EGAN2) and European main population indicators (code: TPS00010). Cedefop own calculations.

NB: \* Indicates small sample size, data should be treated with caution.



## EVIDENCE

### In this section

**Care jobs are demanding, recruiting will remain challenging**

**Working conditions limit care sector attractiveness**

**Care workers need a wide range of job-specific, transversal and soft skills**

**Trends in the care sector transforming skill needs**





# POPULATION AGED 65 OR OVER WILL GROW BY 23% UNTIL 2035

PROJECTED  
EMPLOYMENT GROWTH  
IN THE CARE SECTOR  
**IS JUST 7%**

While the population aged 65 or over will grow by 23% until 2035, projected employment growth in the care sector is just 7%. In only eight European countries – including Greece, Romania, and Sweden – is employment growth in the care sector expected to exceed growth in the old-age (65+) population. Most Member States will face significant challenges in expanding care employment: these will be particularly pronounced in Spain, Austria and Slovenia.



Trends in employment and the age structure of the population do not provide the whole picture. Working conditions and other job quality indicators, skill shortages, and evolving skill needs are equally important in understanding how vocational education and training (VET) and other policies can contribute to matching skills and jobs in the care sector.

# Care jobs are demanding, recruiting will remain challenging

Social care activities are delivered by several types of professionals, with distinct job profiles such as child carers, personal care workers, and nurses. Personal care workers help with essential (e.g. eating, washing) or instrumental (e.g. cooking, shopping) activities of daily life, communicate with care recipients and their families, monitor health conditions and give psychological support. Nurses administer medication, perform administrative tasks, monitor patients, coordinate different aspects of care and communicate with families (OECD, 2020). Doctors in the care sector usually work in nursing homes; they typically respond to medical emergencies, oversee care plans, and prescribe medications.

Access to care professions is regulated by law and/or by professional associations, with entry requirements varying within countries across occupations (e.g. nurses as opposed to personal care workers) and between countries. To practise as a nurse, normally a higher qualification is required (OECD, 2020). Nurses need a bachelor degree in most countries, or a technical degree or medium-level vocational qualification in some others. With population ageing progressing, concerns that general nursing programmes are not sufficiently

adapted to responding to the care needs of the elderly have surfaced (Gjylsheni, 2023), leading some countries to start offering specialised add-on training.

Training and qualification requirements for personal care workers vary more across countries. In many EU Member States, most hold high school diplomas or vocational EQF level 3 or 4 qualifications. Other countries require no specific training or a technical degree programme after high school and some no minimum education level at all. Similarly, regulations governing continuing professional development vary. Only in a few countries are care employers obliged to organise or finance a minimum yearly number of training hours for care workers (Germany, Spain, France, Netherlands, Finland) (Turlan, 2019).

The tasks carers typically perform are physically and emotionally strenuous. Among the personal care workers, health professionals and health associated professionals employed in the care sector, and responding to Cedefop's second European skills and jobs survey, 60% (almost twice the average for all EU working adults) reported their work is physically demanding. Care workers need to follow fixed procedures and instructions much

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# RECRUITMENT CHALLENGES ARE ALREADY SEVERE

more often than workers in many other occupations, and reported a notable increase in dealing with unexpected situations following the COVID-19 pandemic. The movement restrictions put in place to contain the spread of COVID-19 made it more difficult to apply for and obtain work permits and contributed to labour shortages (Eurofound, 2021).

The recruitment challenges faced by the public and private care sectors in the EU are already severe. They are most pronounced for highly skilled care professionals such as nurses and therapists (e.g. physiotherapists, speech therapists and activity therapists) (Eurofound, 2020). Care workers are on the shortage occupations lists in Austria, Belgium, Cyprus, Czechia, Denmark, France, Germany, Poland and Slovakia.

Shortages are mirrored in vacancy rates (Eurostat, Job vacancy statistics by NACE Rev. 2 activity – quarterly data (from 2001 onwards)), which spiked between 2019 and 2021 when around 421 000 residential care workers across EU-27 left the sector (FORESEE, 2022).

Cedefop's 2023 skills forecast suggests shortages will continue to be a major challenge, with significant pressure expected for health professionals, health associate professionals, and personal care workers. These three occupation groups jointly represented almost two thirds (62%) of employment in the care sector in 2021 (Figure 2).

While employment for health professionals will grow in the years up to 2035, the total number of jobs for health associate professionals and personal care workers is expected to decline slightly. Job openings will predominantly reflect replacement demand driven by the retirement of health and care workers rather than employment growth (Cedefop skills forecast). In contrast, employment for legal, social, and cultural professionals (social work and counselling professionals, psychologists, social care workers and social care assistants), which often support the work of health and care workers, will grow by 35%.

The joint employment share of the three health and care occupations in the care sector is set to decrease slightly. However, with foreseen job openings in 2021-35 amounting to 2/3 of their current employment in the sector, the renewal of the workforce will be a key challenge for care employers and vocational education and training (VET) in the coming years.

## PRESSURE FOR

- HEALTH PROFESSIONALS
- HEALTH ASSOCIATE PROFESSIONALS
- PERSONAL CARE WORKERS





Recent trends in online job advertisements for the care sector occupations above already reflect that the care labour market is tightening (Figure 3). Between 2020-22, online job advertisements (OJAs) for social care workers and social care assistants and health associate professionals grew substantially.

The distribution of OJAs by occupational profile advertised by care employers differs from the occupational employment distribution in the sector (Figure 2). Given their nature, OJAs cover vacancies for higher-skilled roles (such as managers, business and administration specialists or ICT professionals) more comprehensively than lower-skilled roles; these are often advertised using other recruitment channels or filled informally (Cedefop; European Commission; ETF et al., 2021). Nonetheless, the expansion of OJAs at a rate exceeding by far sectoral employment growth, signals increasing recruitment difficulties. While demographics plays a big role here, the trends can also be explained by rising turnover rates driven by relatively poor employment terms and conditions in the care sector.

**OJAS COVER  
VACANCIES FOR  
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ROLES**



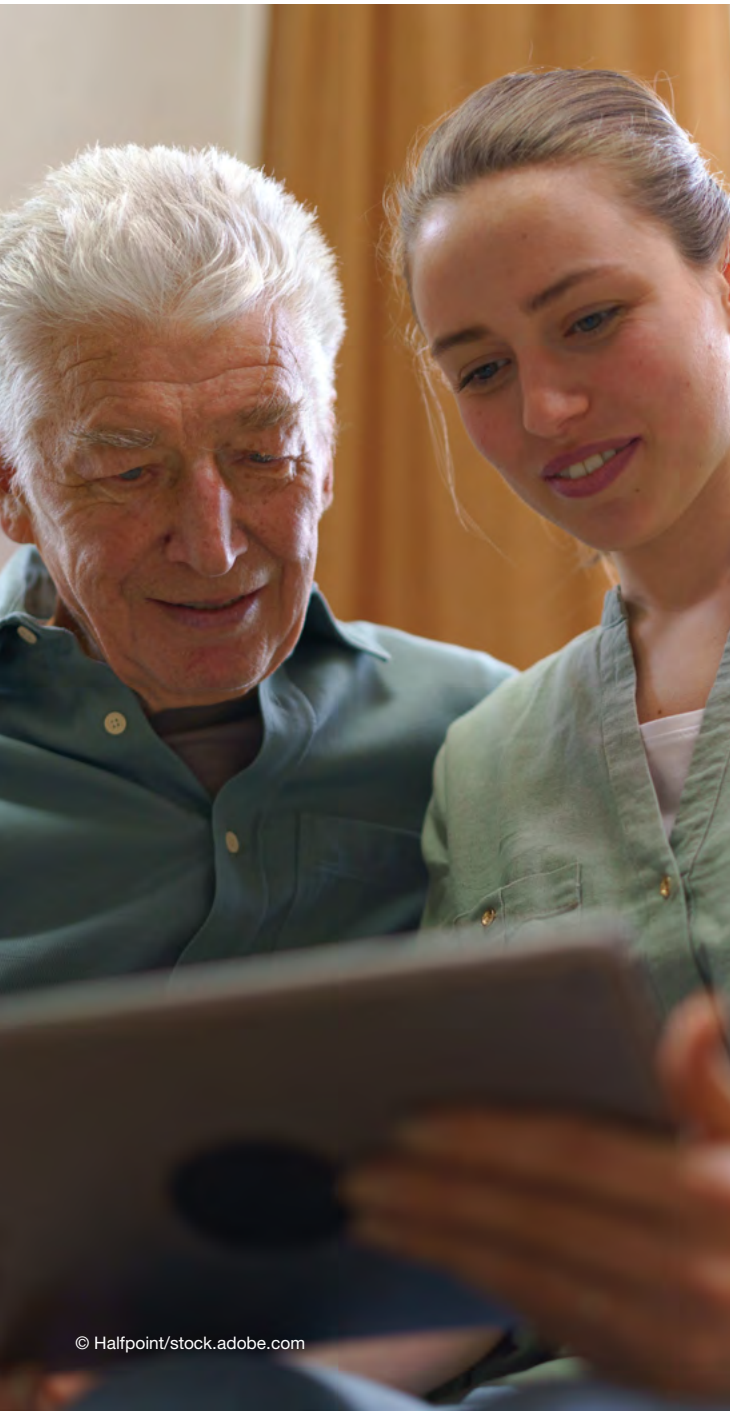
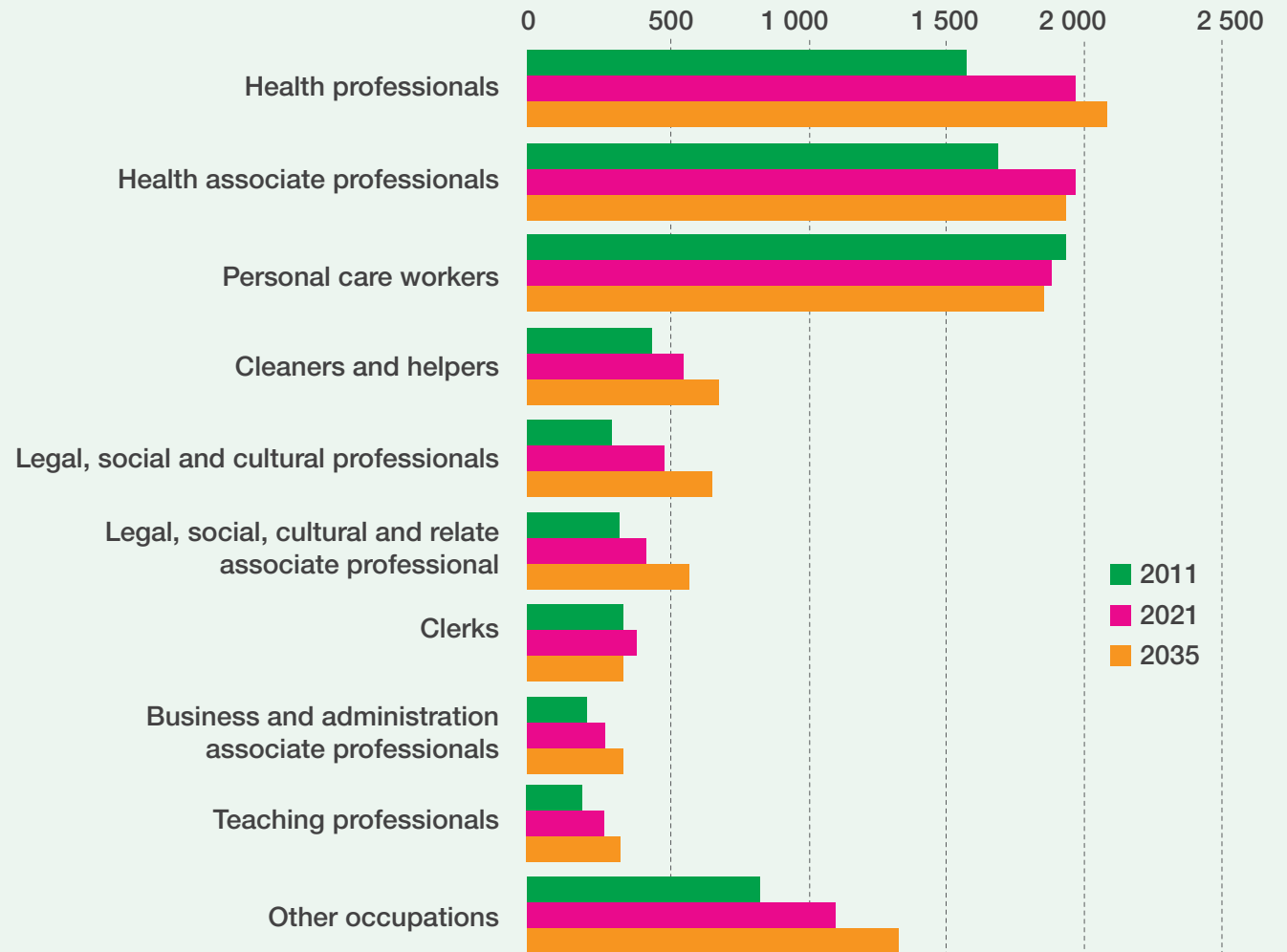


Figure 2. **Employment in the care sector by occupation** (in thousands)



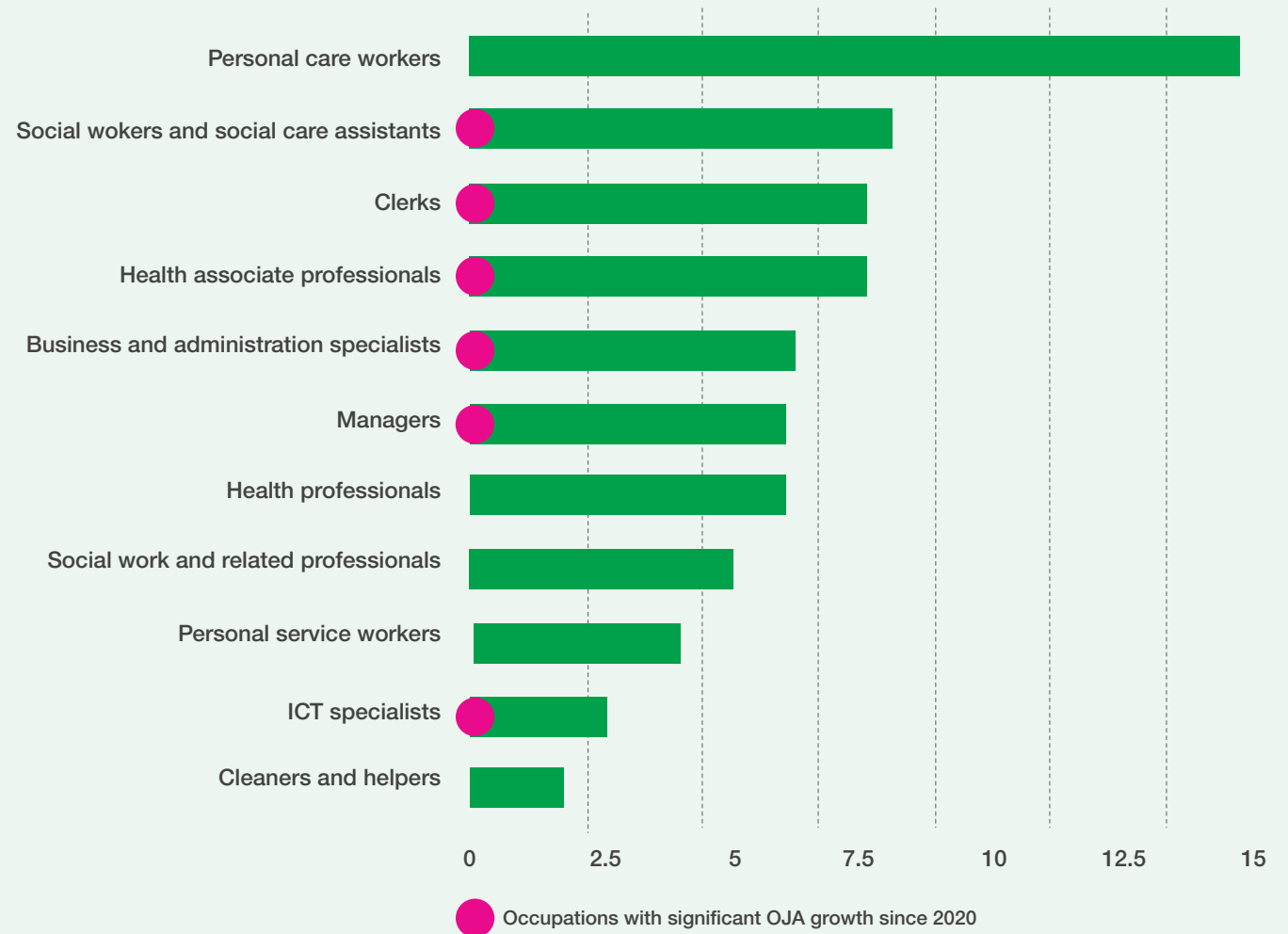
Source: Cedefop skills forecast. Own calculations.

NB: Care sector comprises activities under NACE 87 – Residential care activities, and NACE 88 – Social work without accommodation.



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**Figure 3. Online job advertisements (OJAs) in the care sector by occupation**  
(% of total OJAs in the care sector, 2020-22)



Source: Cedefop Skills OVATE. Own calculations.



# Working conditions limit care sector attractiveness

Most care sector workers are relatively low-paid, and even the highest earners (senior specialised nurses and therapists) typically receive little more than the average national wage (Eurofound, 2020). Domestic care is among the least regulated areas of work, usually not subject to inspection by labour authorities and involves a high share of undeclared work. Atypical working hours (nights or weekends), shift work, and frequent short-notice work (Eurofound, 2020) explain why jobs in the sector are often not perceived as an attractive career choice.

Cedefop skills intelligence shows that almost 40% of the care workforce is part-time employed and that one in every three part-timers actually wants a full-time job (Figure 4). Temporary contracts are also frequent (22% of care workers), and 1 in every 3 workers that have such contracts consider them undesirable.

Unsurprisingly, job turnover among care workers, measured by the share of recent hires, reached 12% for care workers in 2021, the second highest turnover rate among the skilled occupations. Particularly in the LTC sector, it is unlikely that attracting and retaining staff to meet the growing demand is possible without improving pay and working conditions (OECD, 2020). Care workers

feel more secure about their jobs (33% worry about losing their job, compared to 38% on average), but those jobs must become more attractive to keep them in the sector.

Jobs and profiles that support care professionals also show signs of shortages. The number of online job ads for ICT staff and for professionals for managerial, business administration and clerical posts is rising.

Foreign workers, often migrants, are a salient feature of the care sector in many EU countries, although precise data on their level of employment is lacking (Sowa-Kofta et al., 2019). Cedefop OJA analysis shows that language skills are in high demand, suggesting that migrant workers, with presumably insufficient language skills, may be an important target group. In Germany, migrants are encouraged to take jobs in several 'shortage occupations', including care. Since 2016, the German Federal Ministry for Economic Affairs and Climate Action has relied on refugee recruitment advisors to support companies of every size in filling vacancies and vocational training places with refugees and migrants. Their advisory duties include supporting migrants in acquiring the necessary basic skills.

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...low pay, atypical working hours, shift work, and frequent short-notice work make many jobs in the sector unattractive...



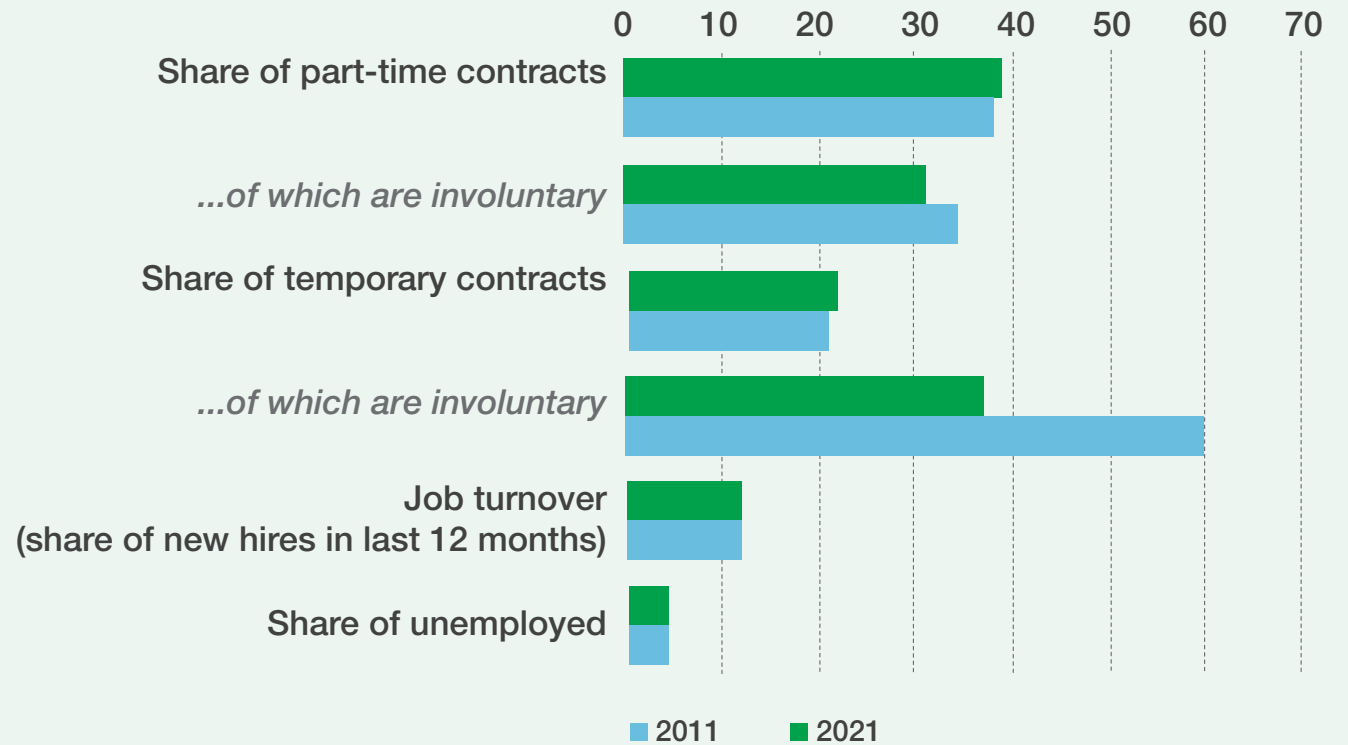
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Figure 4. **Key employment indicators for care workers** (in %)



Source: Cedefop skills intelligence calculations based on European labour force survey microdata.



# Care workers need a wide range of job-specific, transversal and soft skills

As qualifications to access health care and LTC professions and other professional regulations governing them vary across the EU-27, (Eurofound, 2020) the skills profile of the care workforce differs between EU Member States. Two in three personal care workers hold medium-level qualifications, while nurses typically have a diploma at a higher level (OECD, 2020). Currently, a notable share of care workers has only completed elementary education (19% in 2022). Ongoing upgrading of skills requirements and the replacement of older care workers by more skilled younger ones will phase out lower skilled employment in the coming years. Cedefop projects that almost 1 in 4 care workers will have a tertiary qualification in 2035.

Personal care workers and nurses require a wide spectrum of technical skills, ranging from the ability to provide everyday support to using advanced health monitoring technology. Soft skills, such as communication and decision-making, complement these.

Analysis of online jobs advertised by care sector employers provides complementary insight into skills requirements for care workers <sup>(2)</sup>. Adaptability is the skill most sought by employers in the care sector. It is followed by ability to work in a team and language skills.

OJA analysis and other care sector research show that the importance of ICT skills in the care sector is growing (Figures 5 and 6). Particularly in medium and high-skilled roles, technological innovation increasingly requires workers to use tablets, smartphones, and, in some cases, robotics; they must also be able to work with software or online platforms to manage client or patient dossiers and to facilitate communication (Gjylsheni et al., 2023). In the future, assistive, remote care and disease management, self-management and social technologies (OECD, 2023) may automate some of the tasks of care workers. While this increases their productivity, such technology will not replace core care giving tasks. Technology will also contribute to better meeting growing care needs, because it gives those in need of care more independence (OECD, 2023). Gerontechnologies – software and devices designed to meet the needs of a growing ageing population (Satariano et al., 2014) – can help expand care provision. Realising their full potential implies that many care workers will need to be upskilled in the coming years.

<sup>(2)</sup> As not all types of care jobs are equally represented in OJAs (with high-skilled and administrative roles more likely to be advertised online), it is likely the role of ICT and business administration skills would be overstated, while the importance of technical skills in care staff may not fully come to the fore.



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...Cedefop projects that **almost one in four care workers will have a tertiary qualification in 2035...**



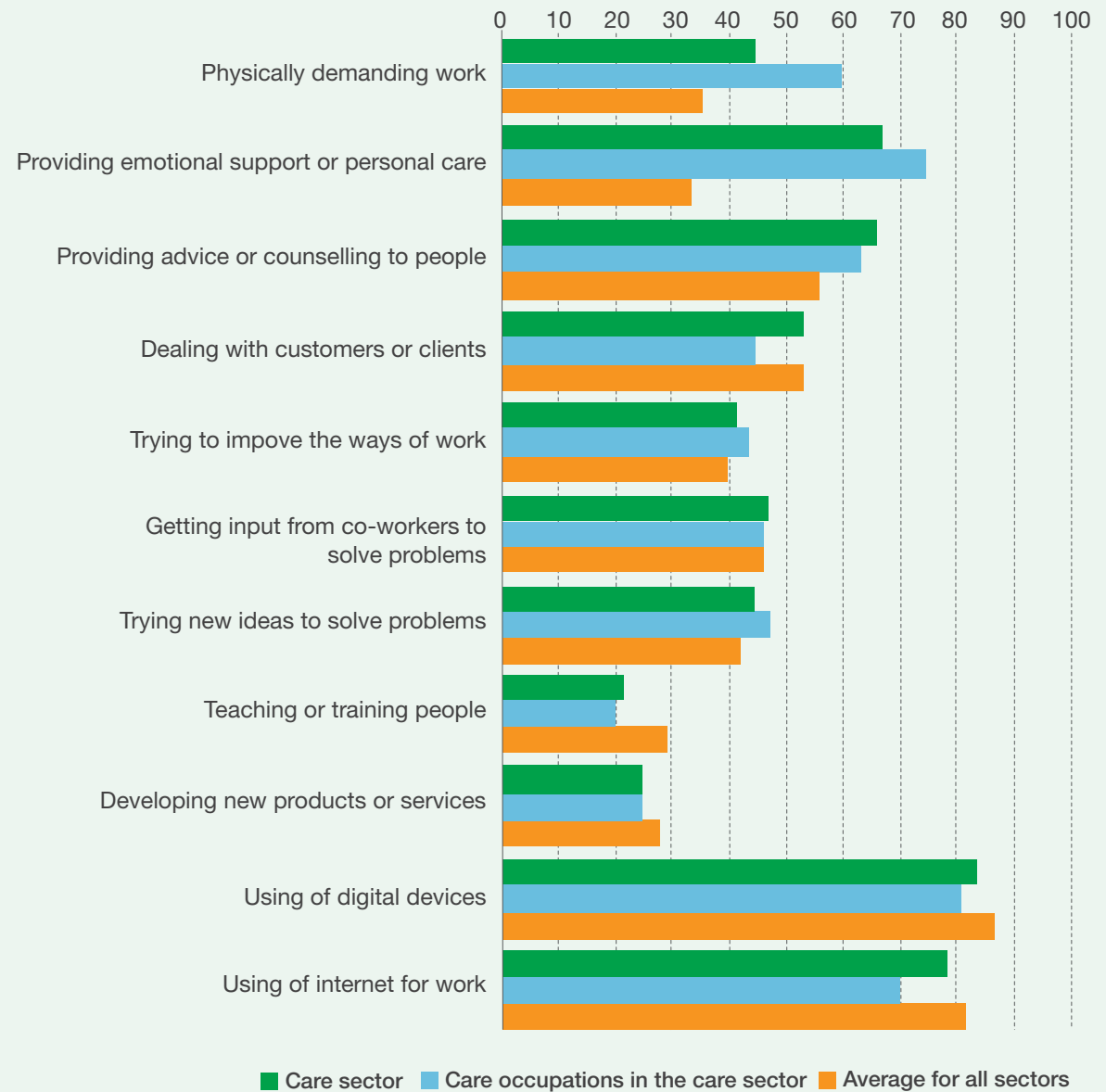
...**adaptability, ability to work in a team and language skills** are **highly sought-after** skills by employers...



...**the importance of ICT skills in the care sector is growing**, in particular in medium and high-skilled roles...



**Figure 5. Skills required in the care sector occupations (2021)**



Source: Authors' calculations based on European skills and jobs survey microdata.



Figure 6. **The skills and knowledge care employers want (2022)**



Source: Cedefop Skills OVATE. Own calculations.

# Trends in the care sector transforming skill needs

Looking towards the future, the demand for care skills will be shaped by several factors.

## AGEING

Increasing life expectancy and more people of retirement age imply more frequent acute illness and injuries. This will accelerate demand for services provided by health care occupations, including those providing supportive care (e.g. physiotherapists) and for people that support them transversally, such as managers, trainers and ICT specialists.

## CHANGING ORGANISATION AND GOVERNANCE OF CARE PROVISION

Responsibility for care is partially and gradually shifting from informal providers to formal professionals. This will raise demand for standardised and certified care skills and for workers and skills that support the rising number of care professionals. As many elderly and disabled persons prefer home care, individualised and customised care will become more important. Such care requires a more holistic and person-centred approach, complex skillsets, and higher-level transversal skills.

## DIGITAL TRANSITION

Promising new technologies will contribute to more healthy ageing and more efficient care provision. While it is likely that future care recipients and givers will be more familiar with digital technology, lack of skills currently remains one of the main barriers to implementing technological innovation effectively in the sector (Zigante, 2020).

The skills the emerging care sector will depend on will continue to cover from the technical to the transversal, while the trends will accentuate the need for geriatrics knowledge and digital skills. Synthesising the findings of the CARESS (2015) and iCare (2020) projects, Skills for Care (2016), and OECD (2020), it becomes obvious how growing demand, technological innovation and changes in delivery transform skill needs and profiles in the sector (Figure 7).



...**demand for care skills** will be mainly **shaped by ageing, changing organisation and governance of care provision,** and the **digital transition...**



...the future care sector will depend on **technical and transversal skills,** while the trends will accentuate the needs for **geriatrics knowledge** and **digital skills...**



...**technical skills** related to health and care at advanced and intermediate level, **soft skills** for **communication** and effective **case management** and **digital skills** will be **crucial...**



Figure 7. **Care skills 2.0: which skills are crucial in the future care sector?**

1

**Technical skills related to health and care at advanced and intermediate level**

These are needed for traditional and emerging care activities and include:

- knowledge on chronic and geriatric diseases (understanding of principles, methods, and procedures for diagnosis, treatment and rehabilitation);
- knowledge on primary, secondary, and tertiary prevention (Prince et al., 2015);
- skills to improve care recipients' health literacy (e.g. flu vaccination);
- observation skills to check physical and mental health daily, and evaluate care effectiveness (e.g. using evidence to evaluate health status, reporting concerns about health conditions, and distinguishing urgent from non-urgent situations);
- knowledge on infection control and skills to use personal protective equipment;
- skills in administering medication;
- skills in caring for people with memory disorders;
- palliative care skills.

2

**Soft skills for communication and effective case management**

Such skills were accentuated by the pandemic and will gain importance in the future care sector, which is more focused towards home-based care. They include:

- administration and management (e.g. leadership, strategic planning, coordination of people and resources, problem-solving and decision-making);
- service orientation, customer and personal services;
- teamwork and networking, for example to accommodate informal caregivers' needs, and to manage communication between family, health providers, and care recipients;
- multicultural communication skills (e.g. knowledge of second language and different cultural traditions and values, self-reflection and perception of own cultural biases, openness and interest);
- 'traditional' communication skills, such as written comprehension, active listening, clear speaking, negotiation skills, social perceptiveness, problem sensitivity and tact;
- skills to provide positive behavioural support within a person-centred framework for situations where behaviour can be challenging (for example with clients suffering from dementia or Alzheimer's disease).

3

**Digital skills to benefit from the full potential of digital transformation for providing high-quality care**

Apart from having skills to use digital technology, care workers will also need to be able to understand existing or anticipated benefits and underlying rationale for using monitoring technology (Hall et al., 2017). Digital needs in care include:

- data creation and sharing (e.g. creating and updating digital records accurately, sharing and storing data safely);
- use of digital technologies for learning and development;
- use of digital technologies in direct care (e.g. helping care recipients use technology);
- identifying technological solutions and resources that work for care recipients;
- information management (organising, storing, labelling and retrieving information) via remote monitoring systems;
- digital communication skills (e.g. via electronic devices, digital meeting platforms, electronic messaging, or email).



# CONCLUSIONS





Caring for those in need is one of the foundations of civilised societies. Realising the target of providing affordable and quality care to all Europeans, as enshrined in the European Pillar of Social Rights, will remain a significant challenge in the coming decades. Population ageing means more staff will be needed to care for the elderly soon; the same holds for child carers as female participation in the labour market is rising. The challenges of providing care to all that need it are even more pressing for countries where outward migration reduces the supply of carers or people that could take up a job in the care sector. VET will be the main supplier of the care skills that will be in high demand in the future; this is not only for young people but also, and especially, for adults who need to develop professionally. The evidence presented in this policy brief points towards the following observations and recommendations for decision-makers.

## 01 INCREASING TRAINING PROVISION

Opportunities for skills development in care services can be improved. According to Cedefop's second European skills and jobs survey, 65% of care sector workers had to develop their skills at least moder-

ately in recent years. This finding mirrors earlier research, which reported that 58% of care workers received training paid for or provided by their employer (Eurofound, 2020). Digitalisation and increasing disease complexities and co-morbidity in the elderly require additional training for care personnel.

## 02 BROADENING THE SCOPE OF TRAINING

The shift towards more home-based care means that future care workers will need a diverse set of skills, which go beyond what residential care requires. This involves communication, management, and psychosocial skills. Social distancing brought about by the pandemic intensified the need for communication skills and accentuated the enabling potential of technology in social care work. The shift from residential to community and home-based care means the content of care workers' training must be revisited: a more holistic approach which emphasises soft and intercultural communication skills, is necessary. Awareness of enabling technologies (such

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...the **challenges of providing care to all** in need are even more pressing for countries where **outward migration reduces the supply of care givers...**



...**VET** will be the **main supplier** of high in demand **future care skills** for young people and adults...



...increased and **broadened VET provision**, and **improved working conditions** will be crucial to **advance the image of care jobs** and equip workers with necessary skills...

as e-health, electronic beds, sensors, tablets or robot assistants) and the digital skills needed to work with them, are important assets for care workers. Digital skills of older people who receive care are equally important for the uptake of new care technology (OECD, 2023).

### 03 VET FOR THE CARE SECTOR NEEDS TO FOCUS MORE ON ADULTS

VET has traditionally played a key role in preparing young people for care jobs. But, as youth cohorts are shrinking, providing high-quality and timely continuing VET (CVET) for care

workers and people considering entering the sector is even more pressing. Evidence suggests care workers need up- and reskilling for a wide range of skills and that CVET should focus on developing skills for diversity-sensitive and person-centred care (Gjylsheni et al., 2023). Well-tested formats, such as apprenticeships, can be leveraged in CVET. To tackle shortages for nurses, on-the-job training routes for lower-skilled workers with experience in LTC are already provided in countries such as Belgium and Denmark. Coupling new programmes with incentives, such as wage subsidies for personal care workers who study nursing full-time, as is happening in Belgium, has proven effective (Formation 600 project in Belgium, Sociale Zekerheid, 2020 in OECD, 2023) <sup>(3)</sup>.

### 04 ADAPTING TO NEW CARE GIVER PROFILES

Demand for care skills is increasing and there are worrying forecasts showing a shrinking availability of workers for new care jobs and for replacing people in existing ones. To secure a sufficient workforce, care employers will need to expand their outreach to attract and employ people with skills profiles that match less and/or migrant workers. Attracting unemployed people and informal caregivers into the sector (as is happening in Cyprus, Hungary, and the Neth-



<sup>(3)</sup> Instead of the initial target of 600 participants, multiple renewals of the project allowed targeting many more people. The project funds personal care worker wages for up to 4 years when they suspend their work for 9 months per year to study nursing full-time (OECD, 2023).





erlands) (Llena-Nozal et al., 2022 and OECD, 2023) can also alleviate shortages. Opening up certification, validation and licensing procedures to such groups so that they can become professional caregivers can ease labour market tensions.

## **05 ADAPTING TO NEW CLIENT GROUPS**

Care provision and training also need to adapt to the needs of new groups in need of care, such as migrants and refugee children. The Erasmus+ **EU-VET CARE** project offers innovative online training programmes, on a wide variety of topics. These include mental health issues, protection of children, legal rights of child migrants and refugees, and non-verbal communication. They also provide in-depth knowledge on symptoms and stress signs to train carers to be attentive to the vulnerabilities of migrant children and the risks they face, and skills to support communication with children, adolescents, and their families.

## **06 LEVERAGING SKILLS INTELLIGENCE AND PARTNERSHIPS TO UPDATE CURRICULA**

Detailed information on required skills and knowledge and comparative research on best practices (OECD, 2020) inform curriculum updates and programme reforms. Sectoral or local stakeholder partnerships can be launchpads for better skills anticipation (with surveys, forecasts and foresight), promote better use of skills intel-

ligence, and foster social dialogue <sup>(4)</sup>. In Finland, for example, nursing programme curricula are updated in the context of social dialogue involving workers, employers, and training providers. Agreements between employers, VET schools and job centres can also be leveraged to attract unemployed people to care occupations.

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<sup>(4)</sup> The skills impact of the twin transition and other mega-trends can also be assessed through EU partnerships, such as the Erasmus+ BeWell project (managed by the pan European Partnership EIT Health between 2022 and 2026), which aims to establish the first Blueprint Alliance for the health ecosystem. The project develops and implements a pilot training programme on digital and green skills for the healthcare sector (including residential care and social work) and for emerging occupations.

## 07 IMPROVING JOB QUALITY AND IMAGE

Improving pay and working conditions is a precondition to making employment in the sector more attractive and so expanding its workforce. Some Member States (e.g. Germany and the Netherlands) have taken action to improve job quality (OECD, 2023). Improving the poor image of LTC (linked to working conditions), and breaking down the stereotypes that keep the sector highly gender-imbalanced, would make recruitment easier.

## 08 PERMASKILLING FOR CARE: INVESTING IN VET AND WORK-PLACE TRAINING AND IN JOB QUALITY

Funding learning in a sector where direct employment, public sector employment, and undeclared employment are particularly relevant, is crucial (Eurofound, 2020). While some issues might seem hard to address – as they are rooted in the very nature of care and LTC work – others might readily be mitigated by increasing pay, staffing, training and information on health and safety risks, and by making working times more predictable and more flexibly adaptable to workers' needs.





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## POLICY BRIEF

# Handling change with care Skills for the EU care sector

Supporting the rapid growth in the ageing population is one of EU's greatest challenges, placing the care sector high on policy agendas. Demographic change, technological advancements and poor working conditions exercise pressure on care workers' employment and skills. This policy brief discusses developments in the employment and skills of care sector workers, and the role that vocational education and training (VET) can play in support, building on Cedefop's skills forecast and online job advertisement analysis.

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