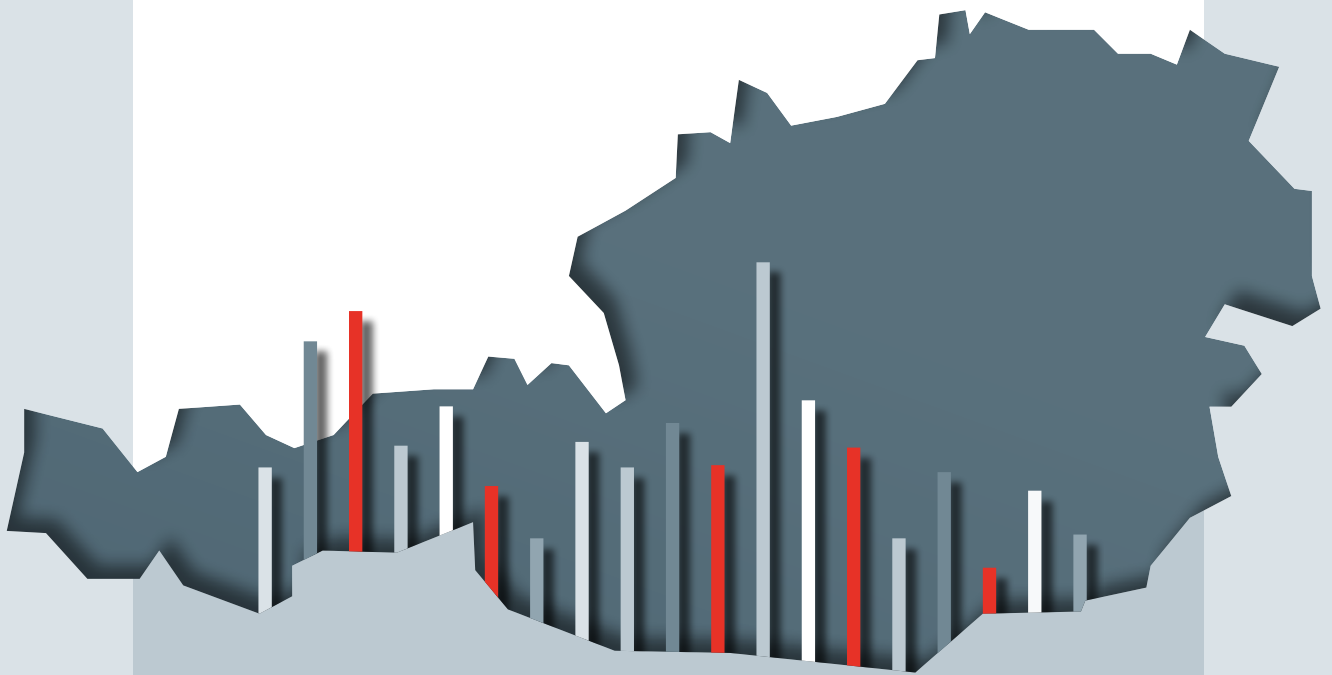


INTEGRATION REPORT 2022



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FOREWORD

by the Federal Minister for Women, Family,
Integration and Media



The entry into force of the Integration Act in 2017 laid the groundwork for successful integration in Austria. Today we can continue to build on these solid foundations. This is very important because, five years later, Austria continues to face enormous challenges with regard to integration. In particular, the coronavirus pandemic, the number of asylum seekers, strongly on the rise again since 2021, and, last but not least, the flow of refugees due to the war in Ukraine have brought new challenges.

As of June 2022, Austria was supporting over 72,000 registered Ukrainian displaced persons, a number that is expected to grow as the war continues. Austria displayed solidarity with Ukraine from the beginning and is providing extensive neighbourly assistance. In the wake of the implementation of the EU's Temporary Protection Directive, displaced persons from Ukraine were granted temporary protection.

To simplify their arrival as much as possible, (Mobile) ServicePoints were rapidly set up by the Austrian Integration Fund on the initiative of the Integration Department and in collaboration with the Federal Ministry for Labour, the Federal Ministry of Education, Science and Research, the Austrian Federal Office for Immigration and Asylum as well as other institutions. These provide all the important information for displaced persons, for instance regarding residence, labour market and education, in a centralised location. Furthermore, Austria reacted quickly to the increased number of displaced persons in terms of German language offerings, significantly increasing the number of places in German courses. Because the displaced persons from Ukraine are frequently women with children, it was ensured that the majority of language courses provide childcare. To enable people to improve their German language skills independently of location, a broad offering of online German courses was also set up. For example, since June the Austrian Integration Fund has offered a freely accessible online course in collaboration with Ukrainian universities.

Besides the displaced persons from Ukraine, the number of asylum applications, which have been increasing again rapidly since 2021, is probably the biggest challenge in the field of integration. In the past year some 40,000 asylum applications were submitted, almost as many as in 2016, at the time of the last refugee crisis. The figures for the first half of 2022 already indicate that this trend will continue and even increase. Overall, some 30,000 persons applied for asylum in Austria in this period. Should this trend continue in the second half of the year, 2022 could become the year with the highest number of applications since 2015, when around 90,000 people applied for asylum. Taking into account the displaced persons from Ukraine, this figure has already been clearly exceeded. For integration to be successful, one must always consider that this also depends on the number of persons to be integrated, and subsequently also on their educational background and values. This massive increase in asylum applications is already having an impact on our receiving and integration structures. Even more so as the integration of the refugees from 2015/2016 is still ongoing, as the data in this report makes clear.

All these developments must also be seen in the context of the developments of the coronavirus pandemic. Last year was again largely marked by the measures to counter the pandemic. The necessary measures to fight the pandemic meant that in-person contact was often only possible to a limited extent. The lack of exchange between immigrants and the receiving society hampers the integration process. However, the coronavirus crisis also showed how important a well-functioning healthcare system and health consciousness within society are. The available data reveals a difference in the health behaviour of persons with and without a migrant background in Austria. For instance, persons originating from other countries take advantage of screenings and preventive medical check-ups much less frequently, are less frequently fully vaccinated and are more likely to not seek medical assistance despite health problems. At this point I would like to thank the Expert Council for Integration, which addressed this important issue in this report and which identified areas where there is a need for targeted measures and targeted education in the health area.

A particular focus of our work on integration continues to be the integration of women. The 82% share of women among the registered displaced persons from Ukraine only further highlights that special measures are needed. Every fifth woman in Austria was born abroad, and every fourth woman has a migrant background. As Minister for Women and Integration, the promotion of equal rights and self-determination for the female population with and without a migrant background is especially important to me, and it must apply in all areas of life.

A primary condition for self-determination is that women can live their lives free of compulsion and violence. Of course, violence can affect all women, regardless of their origin. However, with regard to women with a migrant background we have to combat in particular honour-based forms of violence such as forced marriage, child marriage and female genital mutilation (FGM). With the counselling centre against forced marriage established last year in Innsbruck, the low threshold offers for affected girls and women in desperate situations was further expanded. Furthermore, the coordination office for female genital mutilation (FGM), as the central contact point for affected persons as well as institutions that care for women and girls across the territory, provides important work in this field of action. It aims at improving the health of affected women and girls as well as at the expansion of prevention through raising the awareness of endangered women and girls and educational measures in the affected communities.

A holistic look at the current developments shows that we continue to face big challenges with regard to integration. In particular, the renewed increase in the numbers of migrants as well as the many displaced persons from Ukraine highlight the fact that integration work in Austria will continue to play a major role in addressing these challenges in the future.

Finally, I would like to express my thanks to the Expert Council for Integration - in particular the Chair, Univ.-Prof. Dr. Katharina Pabel - for the Integration Report 2022 as well as for the founded expert knowledge and the deep analysis of integration policy issues that require more attention. In this report, the Expert Council for Integration, as usual, paints a detailed picture of the current state of integration in Austria and so provides important impulses for establishing future integration measures. The presentation and contextualisation of the relevant facts and figures of the Integration Monitoring form the foundation of an evidence-based integration policy. I look forward to our continued fruitful collaboration and wish all readers an insightful reading.



MMag. Dr. Susanne Raab
Federal Minister for Women, Family, Integration and Media

Vienna, 2022

FOREWORD

by the Chairperson of the Expert Council for Integration



Three developments currently characterise the issue of integration in Austria and will be addressed in this year's Integration Report. The first is the reception of more than 72,000 Ukrainians in Austria since 24 February 2022, fleeing their country because of the Russian war of aggression. Besides the provision of primary care and the essentials of life, it is important to enable integration into the labour market and into education institutions as rapidly as possible - with the knowledge that many Ukrainians wish to return to their country of origin as quickly as possible. From an integration perspective, various possible scenarios need to be considered in this situation. On the one hand, integration promotion measures should be put in place as early as possible, while on the other these should not hinder the opportunities of individuals to return to their country.

Secondly, the coronavirus pandemic continues to affect the economy, public and everyday life of people in Austria, and it also influences integration processes. For this reason, this year's Integration Report's focal issue is health in the context of integration, without however restricting its view to the pandemic and its consequences. Current data shows that integration policy should place more emphasis on various aspects of health provision and prevention measures for persons with a migrant background in order to make the health care institutions and offerings as accessible as possible to these persons.

A third development is the share of people with a migrant background in the Austrian population, a share that has continuously grown in the past years and that is currently marked mainly by an increase in asylum applications in addition to other forms of immigration. These circumstances make clear that integration policy will continue to be an important subject on the political agenda in the coming years.

In this context, the Expert Council for Integration presents its Integration Report for 2022, which, in addition to the focal issue of health in the context of integration and the reception of Ukrainians fleeing the war, presents the figures from the Integration Monitoring and analyses and contextualises them, as prescribed by its legal mandate. On this basis, the report presents a current analysis of the developments in the field of integration.

As Chairperson of the Expert Council for Integration, I would like to once again thank all members of the Expert Council for Integration, who invested great care and effort in drafting this report. I am also grateful to the Advisory Committee on Integration for providing the Integration Monitoring data. This Integration Report would not have been possible without the organisational support of the members of the Department for Integration of the Federal Chancellery. They, too, have my sincerest gratitude.

A handwritten signature in black ink that reads "Katharina Pabel".

Univ.-Prof. Dr. Katharina Pabel
Chairperson of the Expert Council for Integration

Vienna, 2022

CURRENT DEVELOPMENTS



Current developments

The Russian attack on Ukraine on 24 February 2022 and the ensuing war represent a deep geopolitical shift and from this point onwards determine the national and international debate. Subsequently, Russia's war of aggression on Ukraine triggered one of the largest refugee flows since the Second World War. Europe is therefore required to provide neighbourly assistance and is supporting people fleeing the war with a large number of aid measures. The so-called Temporary Protection Directive of the European Union grants Ukrainians a temporary right to residence without having to undergo asylum proceedings. Austria too has accepted refugees and is providing support - in June 2022, over 72,000 Ukrainian displaced persons had already been registered.

They are met with a strong willingness to help at all levels. The federal government, the federal provinces and the municipalities, but also many charitable and civil society associations and volunteers organised aid actions for initial reception, provided accommodations and ensured that essential needs were met. The wave of solidarity was highlighted by the numerous private initiatives. It is currently difficult to estimate how many of the people who fled the war in Ukraine will stay in Austria for a longer period or indefinitely. The desire to return of the Ukrainians seeking protection and the actual ability to return depend on how long the war lasts, how severe the destruction in Ukraine will be, what solution is found to end the war and how rapid reconstruction is. Supporting measures therefore need to consider various scenarios. While some displaced persons will wish to return to Ukraine as quickly as possible, others will decide to stay in Austria. The Austrian integration policy is therefore - as also recommended by the Expert Council for Integration - implementing early measures and offerings for integration promotion, without reducing the willingness to return.

Existing integration structures that ease arrival in Austria, such as language courses and various counselling offerings, were adjusted to the new target group. Of special note in this regard is that the majority of people seeking protection are women with children. In light of the new situation, legal changes were also made: in May 2022, the National Council passed amendments to the Integration Act and the Recognition and Evaluation Act in order to include war refugees from Ukraine in the definition of the target group of integration measures. In addition, the Austrian Integration Fund, the Public Employment Service (Arbeitsmarktservice, AMS) and the Education Directorates, on the initiative of the Integration Department, are implementing (Mobile) ServicePoints that will provide information on integration offerings like German courses, the labour market, the education system, but also information on the healthcare system, all bundled and available in several languages in all federal provinces. To enable rapid labour market integration, the Public Employment Service additionally expanded its competence checks and further education courses across Austria. Many schools have also welcomed the Ukrainian pupils and have in particular created additional offerings to acquire German language skills.

Language integration is promoted by the Austrian Integration Fund through tailored German courses with a broad offering of childcare places. The Expert Council for Integration published a position paper on the perspectives of Ukrainian displaced



persons in which it laid out a number of recommendations to support successful integration (see chapter C).

The focus on the war in Ukraine and the reception of Ukrainians since 24 February 2022 should not, however, distract us from the fact that since autumn 2021 Austria is confronted with increasing asylum application figures. In the first half of 2022, some 30,000 asylum applications were registered, already higher than the number of applications in the pre-pandemic years 2018 and 2019 combined. Should this trend continue, 2022 could see significantly more asylum applications submitted in Austria than 2016. In the coming years, this large increase in the refugee flow will represent a major challenge for integration. Added to this is the fact that the integration process for the refugees who have been in Austria since 2015/2016 has not been completed yet and that even persons living in Austria for a longer period of time still require integration.

In light of this, during the reporting period many aspects needed to be considered in integration policy in addition to the Ukrainian refugees; one such aspect is the promotion of women, who are oftentimes multipliers for the integration of families. Consequently, the Expert Council for Integration focuses strongly on women with a migrant background. Currently, every fifth woman living in Austria was born abroad, and every fourth woman has a migrant background. Initiatives like the establishing of "Let's Empower Austria" (LEA), an Austrian fund to support and promote women and girls, can also contribute positively to integration work in this context.

During previous phases of the pandemic, incidents of domestic violence and experiences of violence by women and girls increased, which is why protection from violence will remain a central issue. Measures that were developed in this area, such as the first integration conference on the issue of women and protection from violence in September 2021, the establishing of an office against forced marriage in November 2021, the setting up of a coordination office against female genital mutilation in January 2022 and the increase in financial resources for protection from violence, are welcome steps.

More generally, the expansion and optimisation of existing integration structures is required to effectively address the increasing challenges. Since the start of the coronavirus pandemic, for instance, many online offerings were created, while existing formats were expanded to include digital elements. Since January 2021, German courses are uniformly organised by the Austrian Integration Fund nationwide. This measure guarantees uniform standards across Austria and significantly contributes to ensuring the quality of German courses and examinations. The expansion of the values and orientation courses for persons entitled to asylum or subsidiary protection from a one-day to a three-day format, implemented at the start of 2022, is another important step that is welcomed by the Expert Council for Integration.

In the past year, the measures enacted to stem the coronavirus pandemic continued to influence the social, cultural, economic and political life in Austria in many ways. They also significantly affect the integration processes of people with a migrant background. While the Integration Report 2021 focused on issues around the labour market integration of migrants during the pandemic, this year's report is dedicated to the issue of health in the context of integration. In it, the Expert Council for Integration points to the importance of detailed scientific study of the physical and mental health of persons with a migrant background during pandemics, but also at other times. In the focal issue chapter, data on the health condition and health behaviour of migrants is evaluated and comprehensively analysed. As workers in various health professions, migrants make a significant contribution to maintaining the Austrian health-care system. At the same time, migrants are also recipients of healthcare services. It was found that perceptions of health vary depending on migrant background.

Scientific exchange and networking with other experts on issues of relevance to integration is an important concern for the Expert Council for Integration. Several focal issue meetings over the past year enabled deeper discussions of current issues.

In the context of an exchange on the war in Ukraine, the specific challenges for the integration of Ukrainian refugees, but also their potential return options, were discussed, also drawing on reports about international experiences. The expert contribution of the International Centre for Migration Policy Development (ICMPD) provided important starting points for developing recommendations that were incorporated in the position paper of the Expert Council for Integration (see chapter C).

In a session on the subject of citizenship, the advantages and disadvantages of a birthplace or origin principle as well as dual citizenship were discussed with recognized experts. The issue of granting citizenship to children of migrants and possible hurdles and motivations for not applying for Austrian citizenship despite fulfilling the requirements were also examined.

In a gathering to discuss the challenges of integration in the security context, the Expert Council for Integration drew on external experts to discuss the level of crime within various population groups, deradicalisation measures in the penal system and intercultural trainings in various areas, and discussed the significance of integration work for the prevention of extremism. The role of families and social regulation in communities were also discussed in this context.

In other sessions, the Expert Council for Integration focused particularly on the phenomenon of "moral guardians" as a consequence of patriarchal role models in settings marked by honour culture, as well as on the internal conflict between different identities in many adolescents with a migrant background. The subject of anti-discrimination as an important building block to overcome social divisions was also addressed. In order to network with experts from practice, the Expert Council

for Integration also held talks on integration-related issues of adolescent and social work, school psychology and girls' centres.

Meetings with the Federal Minister for Integration, during which consultations were held, amongst other subjects, on the issues of health, feelings of belonging of migrants, and in particular the promotion of women, created the framework for an exchange between academia and politics.

The following chapters will first provide an overview of current available data related to integration. These primarily include figures that are reported annually as part of the legally prescribed Integration Monitoring and that the Expert Council for Integration contextualises and prepares in accordance with its mission. This includes demographic data (immigration and asylum) and data on education, the labour market and the social situation. In light of current events, one chapter of this year's Integration Report is dedicated to the situation of Ukrainian refugees. The focal issue of the Integration Report shines a light on the present situation and on current trends in the field of health from the perspective of integration. The final chapter summarises the conclusions of the previous parts.

INTEGRATION IN NUMBERS

Immigration and population structure

Education and training

Labour market

Social aspects

A large, white, serif capital letter 'B' is positioned in the bottom right corner of the dark blue rectangular area. The letter is bold and has a slight shadow effect, making it stand out against the background.

Immigration and population structure

At the start of 2022, 8,978,900 people lived in Austria, some 46,300 (or +0.5%) more than at the start of 2021. The population growth in 2021 was thus slightly higher than in the previous year (2020: +31,600 people or +0.4%). Austria's population grew strongly in 2022 due to regular immigration, and recently due to the arrival of tens of thousands of Ukrainian war refugees/displaced persons¹ and a growing number of asylum seekers. By March 2022, the figure of 9 million was exceeded.

In 2021, some 2.24 million people with a migrant background lived in Austria - an increase of some 102,500 (+5%) compared to 2020. 1.64 million people were born abroad to two parents born abroad (1st generation), while 605,300 persons born in Austria had two immigrant parents (2nd generation). A further 160,000 persons born abroad had a mother and/or a father born in Austria. According to the definition of Statistik Austria, these are not included in the population with a migrant background, regardless of their nationality.

Overall, the Austrian population grew by 570,800 persons (+7%) during the past 10 years (01/01/2012-01/01/2022). The increase was a direct and indirect result of immigration. This originated mainly from other EU states, but also from third countries. Between 2011 and 2021, the resident population with a migrant background grew by 692,300 persons (+44.7%). At the same time, the share of people with a migrant background (1st and 2nd generation) in the overall population grew from 18.7% (2011) to 25.4% (2021). This trend was in contrast to the population without a migrant background, which diminished.

IMMIGRATION AND EMIGRATION

Demographic growth in Austria is due exclusively to immigration. This works in two ways. Directly, the population grows because there is more immigration than emigration (= positive migration balance). Indirectly, migration affects the population dynamics, as young immigrants bear children in Austria and so increase the birth rate (= more births than deaths). In the medium and long term, however, immigration will also result in a higher number of deaths.

¹ From a migration theory perspective, persons who have arrived in Austria from Ukraine since February 2022 are war refugees, because their arrival is due to the individual decision, based on the political and military circumstances, of the individual or families who left the country. Displacement (in the migration theory definition) would only apply if larger groups of people were forced to leave the country against their will due to their ethnic or religious affiliation. This is not the case in Ukraine. The term displaced persons/persons displaced by war, used by Austrian authorities, is based on the definition of the Displaced Persons Ordinance (Vertriebenen-Verordnung, BGBl. (Federal Law Gazette) II No. 92/2022), which implements the EU's Temporary Protection Directive (2001/55/EC) on the basis of the Implementing Decision (EU) 2022/382 of the Council of the European Union (EU Ministers of the Interior) of 4 March 2022 establishing the existence of a mass influx of displaced persons from Ukraine into Austrian law (ST/6846/2022/INIT). There the term "displaced persons" is also used.

MIGRATION TO AND FROM AUSTRIA

2010, 2015, 2020 and 2021 by nationality



Fig. B1; Source: Statistik Austria (2022), Wanderungen mit dem Ausland (2011 – 2021); own representation

Since 2002, overall immigration, by both Austrian citizens and non-citizens, is over 100,000 per year. In 2021, a total of 154,200 persons immigrated from abroad or returned to Austria. This included 139,500 foreign nationals and 14,700 Austrian citizens.² In total, immigration increased by 13% compared to 2020. In the same year, a total of 101,700 persons (including 84,600 foreign nationals and 17,100 Austrian citizens) left the country. Compared to 2020, emigration therefore increased by 6%. In 2021, the balance of immigration and emigration was +52,500 persons, +12,400 (+31%) more than in 2020.

As in the previous years, in 2021 immigration was dominated by people from other EU states (83,800). The main countries of origin in the EU were Germany (19,400), Romania (17,900) and Hungary (9,600). A smaller part consisted of immigrants from third countries, mainly Syrian (13,400) and Serbian (5,400) nationals. Emigration (101,700 persons in 2021) is dominated by Austrian citizens and those of other EU states.

The effect of immigration and emigration is that Austria's resident population is not only growing (due to net immigration)³, but is also undergoing structural changes.

- » On the one hand, there is a growth in the population with a migrant background, and in particular of the foreign resident population, because many more foreign nationals immigrate than emigrate (= positive migration balance).
- » On the other, the number of children born in Austria with a foreign citizenship is larger than the number of older foreigners who die here (= positive rate of natural increase).
- » For Austrian citizens, this is reversed. They are becoming fewer due to a negative rate of natural increase.
- » Naturalisation somewhat counteracts this trend. However, in Austria the numbers are too low to prevent the diminution of the resident population with Austrian citizenship.

BIRTH AND DEATH RATES

Following a decrease in births triggered by the consequences of the coronavirus pandemic (2020: 83,600; -1.6% compared to 2019), 2021 witnessed an increase of 3% compared to 2020 despite the ongoing pandemic, with 86,100 births. Data on births of immigrants is not available in Austria. However, it is known how many newborns are foreign nationals. In 2021 there were 17,300 children, compared to 17,200 in 2020 (+0.4%). This represented a fifth of all births (20.1% in 2021 and 20.6% in 2020).

² These are mainly returning Austrians and only very few people with an Austrian nationality born abroad and who are coming into the country for the first time.

³ Positive migration balance (= more immigration than emigration).

In contrast, deaths increased significantly in 2020, to 91,600 cases (+9.8% compared to 2019). In 2021, deaths were slightly above this figure (92,000, +0.4%) and so remained above the average of previous years. The increased death rate is primarily due to Covid-19 deaths. 5,900 of all deaths in 2021 were foreign nationals residing in Austria. Compared to 2020, this is a significant increase of 15.9%.

The difference between births and deaths was negative in 2021, despite the increase in the number of births. There were fewer births than deaths. However, in 2021 excess deaths were not quite as high (5,900) as in 2020 (8,000). But without immigration, Austria's population would have decreased in both years.

BALANCE OF BIRTHS AND DEATHS

2020 and 2021 by nationality

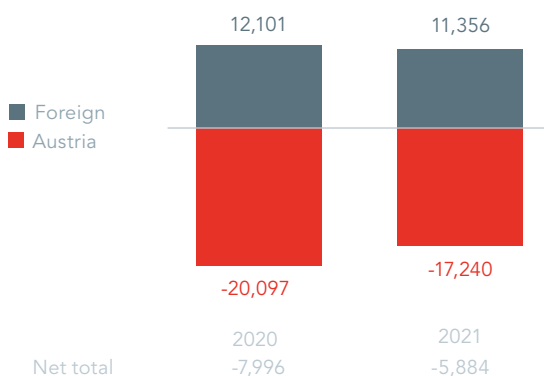


Fig. B2; Source: Statistik Austria (2022), Geburten und Sterbefälle; own representation

STRUCTURE OF IMMIGRATION

Of the foreign nationals who immigrate to Austria, the majority come from other EU/EFTA countries. These do not require a residence permit. In 2021, these numbered 85,600 (+1,100 compared to 2020). Most of those immigrating from other EU/EFTA states either work or study in Austria.

Third-country nationals need an individually granted initial residence permit in Austria before being allowed to reside here. Depending on the reason for and duration of stay, third-country nationals in Austria are granted different residence permit (e.g. work, education or family reunification).

In 2021, 32,900 people (not including asylum cases) received their first residence title.⁴ This was an increase of some 14,600 (+79%) from 2020. This significant increase has two very distinct causes:

- » On the one hand, this reflects the greatly increased international mobility following various lockdowns and travel restrictions during the first year of the coronavirus pandemic.
- » On the other, the figure includes residence titles issued for the first time to British citizens already living in Austria as a result of Brexit, as since January 2020 these can no longer benefit from freedom of movement within the EU. However, the newly issued residence titles for British nationals are not relevant to migration patterns in 2021 and the following need for integration, as most of them have already been in Austria for an extended period.⁵

⁴ some of these titles grant access to the labour market, while others do not.

⁵ Issued residence titles to British nationals in Austria following the United Kingdom's departure from the EU.

The number of initial residence titles issued in 2021 was also above the level for 2019, the year before Brexit and the coronavirus pandemic (2019: 26,300; 2021: 32,900).

An analysis that differentiates by purpose of the issued residence title reveals the following:

- » the largest share of newly issued residence titles is for humanitarian titles (in particular temporary residence following an asylum application): in 2020, this was the case for 17,700 third-country nationals (-600, or -3%, compared to 2019).
- » In second position are residence titles for family members immigrating together or for family reunification as well as for persons acquiring the right of residence through marriage to a person living in Austria (marriage immigration).⁶ In 2020 this was the case for 11,600 third-country nationals (-1,800, or -14%, compared to 2019).
- » Direct immigration of third-country nationals for a job only comes in third place (especially Red-White-Red Card and Blue Card EU for qualified labour and temporary residence for independent workers; 2020: 2,700 third-country nationals -1,300, or -33%, compared to 2019).
- » A similar share goes to immigration of foreign students and apprentices from third countries (2020: 2,700 persons; -1,400 or -33% compared to 2019).

In total, the number of initial residence titles actually issued in 2021 was higher. However, shorter periods of residence (e.g. seasonal workers, students in exchange programmes, artists) are not defined as immigrants to Austria and are also not relevant for integration requirements.⁷

RIGHT OF RESIDENCE GRANTED FOR THE FIRST TIME

2011 – 2020 by reasons for immigration

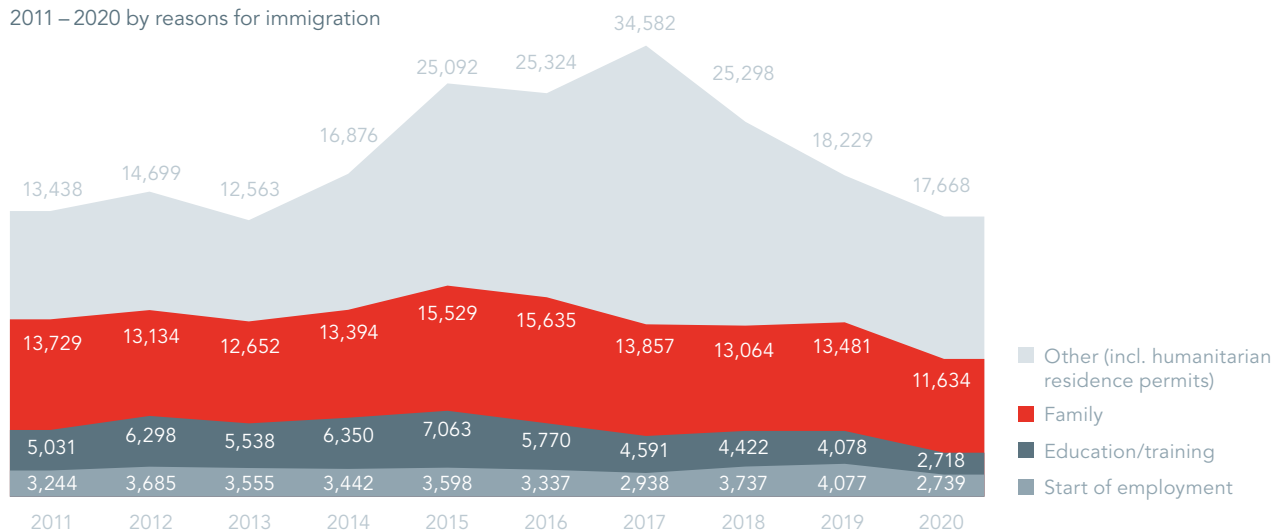


Fig. B3; Source: Eurostat (2022), First permits by reason (based on data from Federal Ministry for the Interior); own representation

⁶ The “family members” title is granted to spouses, registered partners and single minor children (including adoptive and step-children) and grants access to the labour market.

⁷ Residence titles for a period shorter than 12 months are not included in Fig. B3.

Newly granted residence titles for third-country nationals are temporary. These temporary permits can be extended if the respective conditions are met. After a five-year period of continuous legal residence in Austria, demonstrated successful integration⁸ and the fulfilling of the remaining conditions, the title “Long-term Resident – EU” may be granted. This residence title grants the right to settle indefinitely, with an unrestricted right to work, as well as to move to other EU/EFTA states. Persons entitled to asylum or subsidiary protection may obtain the permit “Long-term Resident EU int. person entitled to protection” if they had an asylum or protection status in the past five years, counting the time for the asylum procedure.⁹

Looking at the overall immigration of foreign nationals over the past years, one finds the following:

- » Persons immigrating from other EU states generally quickly find a job or take up studies. Their average length of stay in Austria is comparatively short. Ten years after the date of immigration, 60% of immigrants from other EU states no longer reside in Austria.
- » For persons immigrating from non-EU states, family reunification, marriage immigration and humanitarian residence titles play a central role. In recent years, only a small number of persons were granted a residence title due to their specific qualification and professional experience. At the same time, a larger share of this group remains in Austria for a longer period of time or indefinitely. Ten years after the date of immigration, two thirds are still residing in Austria.
- » From a labour market perspective, the structure of the immigration from third countries that predominated in the past years is not efficient. From an integration policy perspective, immigration that is not primarily oriented to the requirements of the national labour market and sometimes is not even aimed at immediate entry into the labour force creates an additional challenge.

ASYLUM

A share of the residence titles granted is for asylum seekers (and in 2022 also for collectively tolerated war refugees or displaced persons from Ukraine). Only two groups of people are of relevance to the migration balance:

- » Firstly, persons who entered the country legally or illegally and who lodge an asylum application (“original first-time asylum applications”¹⁰) or people exempted from applying on the basis of their citizenship (war refugees/displaced persons from Ukraine);
- » Relatives (spouses and minor children) who are reunited with a person entitled to asylum or protection.

Not of relevance to the migration balance, but relevant to the future integration requirements, are those children born in Austria whose parents are entitled to asylum or subsidiary protection or who are in the asylum process. They are also included in the asylum statistics because in Austria an asylum application is automatically submitted for these children at birth. If the parents’ asylum process is already successfully completed, the new-born children receive the same status as their parents.

⁸ Fulfilment of Module 2 of the Integration Agreement.

⁹ For more information on the individual residence titles see https://www.oesterreich.gv.at/themen/leben_in_oesterreich/aufenthalt/3/2.html.

¹⁰ Non-original-country asylum applicants include children of refugees born in Austria, persons who have submitted several applications and those with an immigration permit (family reunification).

- » In 2021, 32,400 persons submitted their first application for international protection ("asylum") after arriving in Austria. This was a significant increase from 2020 (+22,900 persons or +240%).
- » In 2021, 12,200 applications for family reunification were submitted to Austrian embassies and consulates (+10,000 or +450% compared to 2020).¹¹ Previous data shows that only some of these applications are granted. And a positive decision does not automatically mean that immigration to Austria will take place in the same year.
- » 3,100 asylum applications were submitted for children of refugees born in Austria ("subsequent births"). This represented 8% of all asylum applications.
- » 8,900 applications were related to minors under 18, of which 5,600 were unaccompanied minors.¹²
- » 85% of all asylum applications were submitted by male adolescents or men, 15% by female adolescents or women.

The countries of origin in 2021 were similar to those in the previous years. Almost two thirds (64%) of all first-time asylum applications were submitted by Syrian (43%) and Afghan (21%) nationals. The people arriving in the framework of family reunifications were almost all Syrian (60%) or Afghans (26%). They were mostly women, children and adolescents.

FIRST ASYLUM APPLICATIONS

Applicants 2020 and 2021
by most common nationalities

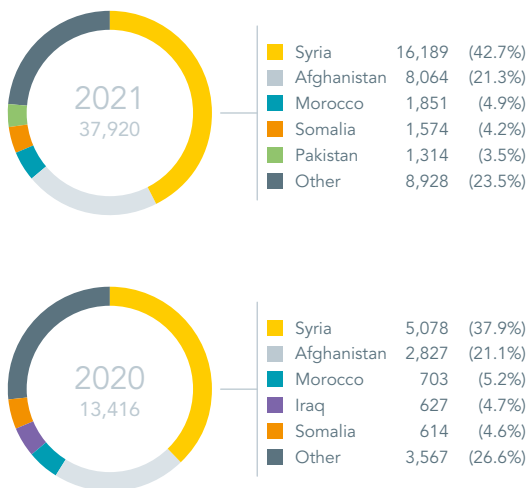


Fig. B4; Source: BMI (2020 and 2021), Asylstatistik 2019 und 2020; own representation

In the EU27, a total of 537,300 first-time asylum applications were submitted in 2021. This figure is 29% higher than for 2020 (417,100 first-time asylum applications). However, one fact should be noted: while restrictions due to Covid-19 measures meant that fewer asylum seekers travelled to Austria in 2020, the official data underestimated the actual numbers. This is because some of the asylum seekers who entered Austria in 2020 were only registered in 2021 for administrative reasons and so only became visible in the statistics at that time.¹³

More than a quarter (148,200 or 28%) of all first-time asylum applications registered in the EU27 in 2021 were registered in Germany. This was followed by France (103,800 or 19%) and Spain (62,100 or 12%), Italy (45,200 or 8%) and Austria (37,800¹⁴ or 7%). These five EU members thus registered almost three quarters of all first-time asylum applications in the EU.¹⁵

11 Family reunification pursuant to Section 35 AsylG (Asylum Act) (according to reply of the Federal Ministry for European and International Affairs).

12 Federal Ministry of the Interior (2022), Asyl-Statistik 2021.

13 Part of the increase is therefore due to administrative "calendar effects".

14 According to the asylum statistic of the Federal Ministry of the Interior: 37,900 first-time applications, of which 32,400 first-country applications. Due to subsequent reporting within the year and different reporting dates, there may be small differences between the sources.

15 Eurostat (2022), First-time asylum applicants up by a quarter in 2021.

It should be noted that these figures are only somewhat comparable. In contrast to the process in Austria, in many EU states new-born children of refugees do not have to lodge an asylum application. And in many EU states, relatives joining persons entitled to asylum or subsidiary protection are not registered as asylum cases but as regular family reunifications.

In Austria, in 2021 some 12,000 persons were granted asylum (+4,000 compared to 2020). Most of them came from Syria (6,900), Afghanistan (2,600) and Iran (600). Overall, around 35% of all asylum proceedings completed in 2021 were concluded with a final positive decision. Recognition rates were high among Syrian nationals (78%), among asylum seekers from Somalia (62%) and from Iran (61%). The recognition quota was significantly lower for asylum seekers from Afghanistan (26%), the Russian Federation (26%) and Iraq (9%).

A further 4,300 persons (+1,700 compared to 2020) were granted subsidiary protection. These included especially asylum seekers without a refugee status from Afghanistan (1,700), Syria (1,100) and Iraq (900).

Of the people recognized as refugees and persons entitled to subsidiary protection or granted humanitarian protection in 2021, 3,000 were new-borns born in Austria, another 3,000 were minors under 14 years of age and 900 were minors aged between 14 and 18. Based on past experience, many people who receive neither refugee status nor subsidiary protection or humanitarian residence remain in the country.

DECISIONS ON INTERNATIONAL PROTECTION IN AUSTRIA

2016 – 2021

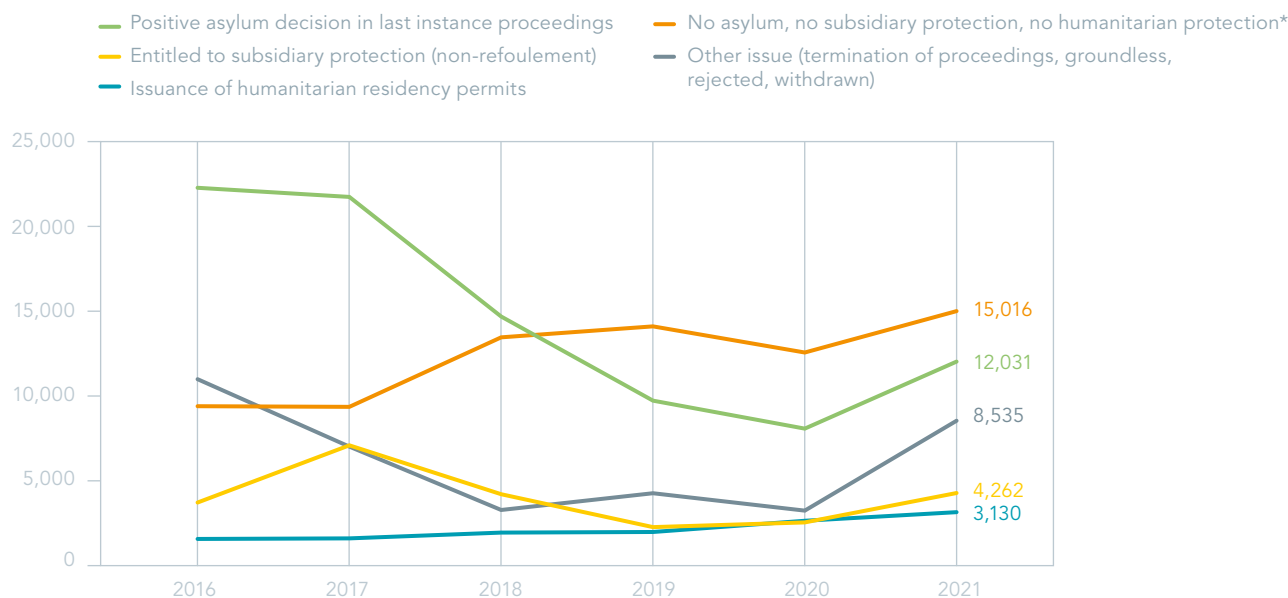


Fig. B5; *corresponds to the category "legally binding neg. decisions on residence permits based on exceptional circumstances"; Source: BMI (2017 – 2022), Asylstatistik 2016 – 2021; own representation

POPULATION WITH A MIGRANT BACKGROUND

In 2021, around 2.24 million people with a migrant background lived in Austria. Compared to 2020, this figure increased by 102,600 persons (+4.8%). The increase was thus again greater than in 2020, when restrictive measures to stop the spread of the coronavirus pandemic and a temporary high rate of unemployment slowed down immigration to Austria.

Of all persons with a migrant background, 1.64 million were born abroad and their two parents as well (1st generation).¹⁶ In 2021, 605,300 persons born in Austria (2nd generation) had an immigrant mother and an immigrant father. Another 160,000 persons born abroad had a mother and/or a father born in Austria. Regardless of their nationality, they are not counted in the population with a migrant background according to the definition of Statistik Austria.¹⁷

20.1% (2021) of all residents in Austria were born abroad. 18.2% were immigrants with a migrant background (1st generation), while immigrants without a migrant background represented 1.8%.¹⁸ 6.7% of all residents were persons born in Austria with a migrant background (2nd generation).¹⁹ In total, at 25.4%, people with a migrant background made up almost a quarter of the population of Austria.²⁰ A little over four out of ten (43%) immigrants with a migrant background (1st generation) came to Austria between 2010 and 2021, 20% settled here between 2000 and 2009, and 36% have been in Austria for over 20 years.

Of the population with a migrant background (1st and 2nd generation), 878,000 (39%) have roots in another EU or EFTA state or in the United Kingdom. Of these, just over a third (307,000 persons) originated in Western Europe²¹ – with Germany being the most important country of origin. Two thirds (588,000 persons) come from one of the eastern central and south-eastern EU states (especially Poland and Romania). 584,000 persons (26%) had roots in a West Balkan state (not including Albania).²² 286,000 persons (13%) were of Turkish origin. 127,000 persons (6%) had an Afghan, Iraqi or Syrian migrant background.

Looking at the population born abroad with a migrant background (1st generation) over time, one finds that in contrast to immigration during the 2nd half of the 20th century, after 2000 people increasingly came to Austria from other EU states. This reduces the share of traditional countries of origin for guest workers (ex-Yugoslavia, Turkey) and of countries that saw refugee migration (Bosnia-Herzegovina, Kosovo, Turkey). Germany and eastern EU states gained prominence as countries of origin. During the past ten years (2012 – 2022), internal migration within the EU and refugee migration shifted the origins of Austria's immigrant population. At the start of 2022, more than half came from just five countries: Germany, Bosnia-Herzegovina, Turkey, Serbia and Romania.

16 Definition: place of birth abroad (with both parents born abroad). Persons born abroad who have at least one parent born in Austria are not included in the population with a migrant background.

17 This definition of migrant background follows the "Recommendations for the 2020 censuses of population and housing" of the United Nations Economic Commission for Europe (UNECE).

18 Persons born abroad with at least one parent from Austria do not count as 1st generation.

19 According to Statistik Austria, only people with two parents born abroad are considered 2nd generation.

20 People who work in Austria and are subject to social security but have no permanent residence (including the majority of 24-hour care staff, border commuters and agricultural seasonal workers) are not included in the population with a migrant background or in the foreign population.

21 EU states in the northwest and south of Europe, EFTA states, United Kingdom (GB).

22 Bosnia-Herzegovina, Kosovo, Montenegro, North Macedonia, Serbia.

IMMIGRANTS

2012 and 2022 by most common countries of birth, change in percent































2012			2022		
Germany		201,366	Germany		251,576 +25%
Turkey		158,683	Bosnia and Herzegovina		174,261 +16%
Bosnia and Herzegovina		150,493	Turkey		159,060 +/-0%
Serbia		130,211	Serbia		143,883 +10%
Romania		69,148	Romania		138,329 +100%
Poland		60,473	Hungary		85,316 +100%
Hungary		42,648	Poland		76,527 +27%
Czechia		42,535	Syria		62,968 +1,747%
Croatia		39,091	Croatia		53,485 +37%
Slovakia		27,702	Slovakia		45,791 +65%
Kosovo		27,578	Afghanistan		43,002 +291%
Russian Federation		27,546	Russian Federation		36,633 +33%
Italy		25,279	Italy		36,443 +44%
North Macedonia		21,308	Czechia		34,633 -19%
Slovenia		18,509	Kosovo		34,043 +23%

Fig. B6; Source: Statistik Austria (2022), Bevölkerung zu Jahresbeginn 2002–2022 nach detailliertem Geburtsland; own representation

There were clear differences in the increases. While the number of residents born in Turkey and in Serbia has hardly changed between 2012 and 2022, there was a significant increase for some other countries of origin. In absolute figures, the growth was strongest for people born in Romania (+69,200), in Syria (+59,600) and in Germany (+50,200), followed by Hungary (+42,700) and Afghanistan (+32,000). Compared to 2012, the number of people born in Romania living in Austria has doubled by 2022. The relative increase in immigrants from Afghanistan and Syria was even greater, because in the base year 2012 there were only a few people from these two countries in Austria.

During 2021, the number of foreign nationals increased by 56,200 persons (+3.7%), while the number of Austrian citizens decreased during the same period (-8,900; -0.1%). As a consequence of this shift, the share of foreign nationals in the overall population grew (start of 2021: 17.1%; start of 2022: 17.7%). This shift between citizens and foreign nationals has several causes. Among Austrian citizens, there is more emigration than immigration and there are more deaths than births. Among foreign nationals, there is more immigration than emigration and there are more births than deaths.

POPULATION

With a migrant background, with place of birth abroad and with foreign nationality, annual average 2017 – 2021

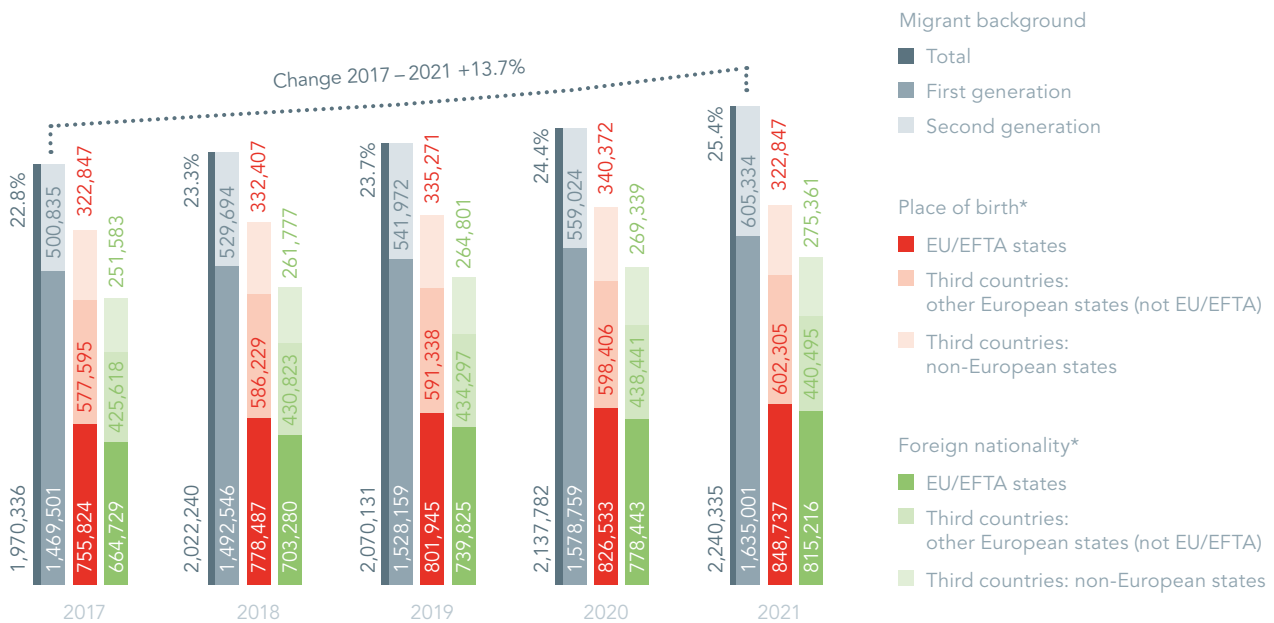


Fig. B7; * respectively on 01/01 of each year, EU/EFTA states incl. GB; source: Statistik Austria (2022), Bevölkerungsstruktur/Mikrozensus-Arbeitskräfteerhebung; own representation

IMMIGRANT POPULATION WITH A MIGRANT BACKGROUND

2021 by year of immigration

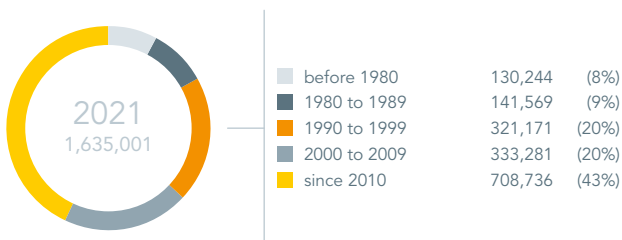


Fig. B8; * respectively on 01/01 of each year, EU/EFTA states incl. GB; source: Statistik Austria (2022), Bevölkerungsstruktur/Mikrozensus-Arbeitskräfteerhebung; own representation

IMMIGRANT POPULATION, A EUROPEAN COMPARISON

In a European comparison, mainly small states like Luxembourg (49%),²³ Malta (23%) and Cyprus (22%) have a high share of persons born abroad. Of the larger states in Europe, Switzerland has the highest proportion of immigrants (29%). This is followed by a number of EU states with similar shares of foreign-born populations: Austria²⁴ (20%), Sweden (20%), Belgium (18%) and Germany (18%).

SHARE OF IMMIGRANT POPULATION

In total population in selected EU/EFTA states 2021

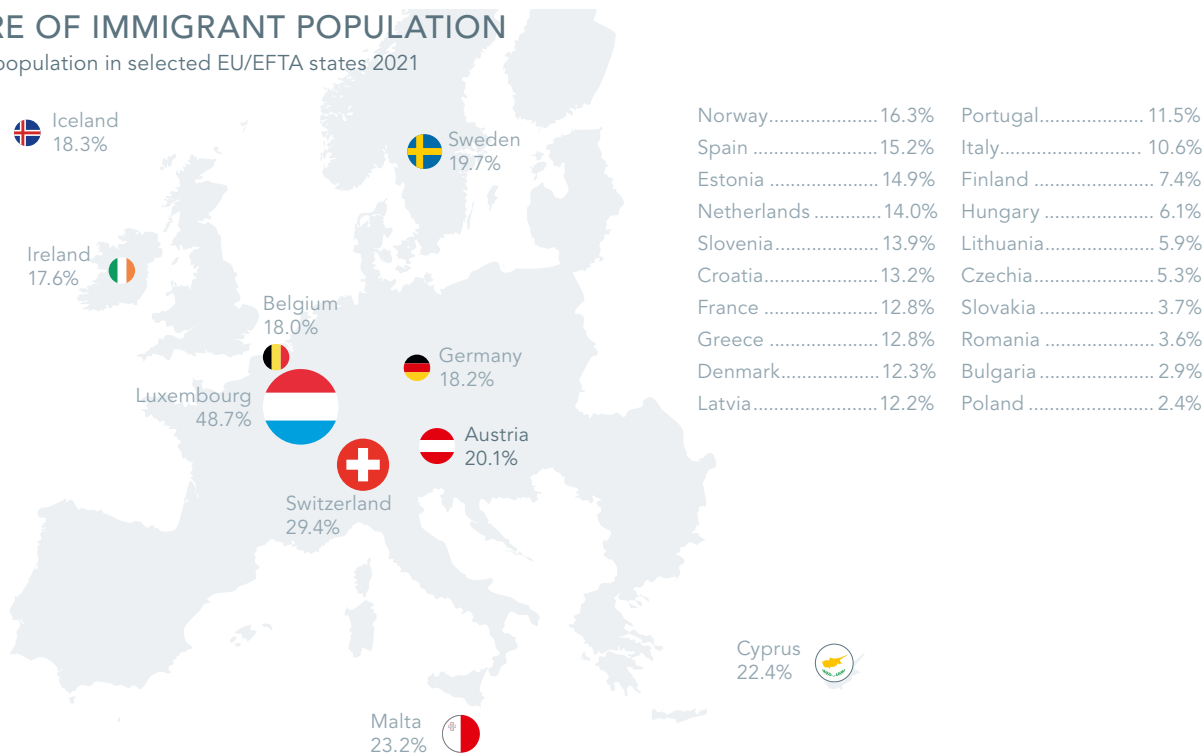


Fig. B9; Source: Eurostat (2022), Population by country of birth – People born abroad (with and without migrant background); own representation

FOREIGN NATIONALS

At the start of 2022, 7,392,000 Austrian citizens (-9,400 compared to 2021) and 1,587,000 foreign nationals (+55,600 compared to 2021) lived in Austria. Foreign nationals represented some 18% of the total population. Of these, 53% were citizens of an EU/EFTA state or the United Kingdom.

One third (35%) of the population with a migrant background possessed Austrian citizenship in 2021 (792,800 persons). Two thirds (65%) lived in Austria as foreign nationals (1.45 million). Of the 1st generation immigrants, only 25% were naturalised. Of the 2nd generation population, in contrast, 63% held Austrian citizenship.

²³ Luxembourg is a special case of a small land-locked state where even geographically close movements may result in international migration due to the run of the borders.

²⁴ Share of the 1st generation in 2021 with a migrant background (definition of Statistik Austria) and of persons born abroad without a migrant background.

The share of Austrian citizenship was above average among persons with a Turkish migrant background (59%). The share was also above average among persons with a migrant background from a successor state of Yugoslavia not in the EU²⁵ (Austrian citizens: 41%). Of the people with roots in one of the EU states of eastern central and south-eastern Europe, 29% held Austrian citizenship.²⁶ Of those with a western European origin, the figure was just 17%. The share was expectedly even lower among persons with Afghan, Iraqi and Syrian migrant backgrounds (9%). Of these, a larger share does not yet fulfil the minimum conditions for naturalisation (particularly minimum length of stay, financial independence).

POPULATION WITH A MIGRANT BACKGROUND

2021, share of Austrian and foreign nationals by origin*

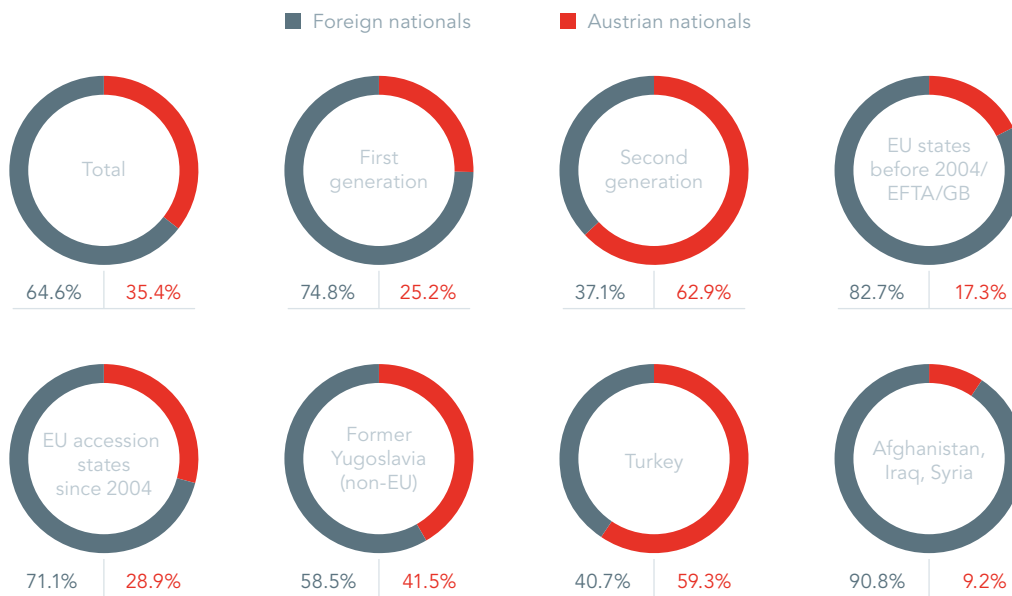


Fig. B10; * by own country of origin or country of birth of the mother; Source: Statistik Austria (2022), Bevölkerung nach Migrationshintergrund; own presentation

NATURALISATIONS

The acquiring of Austrian citizenship in Austria has no influence on the size of the population with a migrant background, but it does affect the sizes of the citizen and foreign national populations. While current migration surpluses (= more immigration than emigration of foreign nationals) and birth surpluses (= more new-born than deceased foreign nationals) increase the existing foreign population, naturalisations decrease it. However, naturalisations in Austria slow down the constant decrease of the local population.

²⁵ Namely Bosnia-Herzegovina, Kosovo, Montenegro, North Macedonia, Serbia. More than thirty years from the disintegration of Yugoslavia, it is certainly no longer meaningful to speak of "ex-Yugoslavia". However, this term continues to be used in official statistics.

²⁶ This is in part the consequence of a higher share of nationals of eastern central and south-eastern European states naturalised before EU accession. A very small percentage of persons from Malta and Cyprus (EU accession from 2004) are also included in this category.

In 2021, 16,200 people obtained Austrian citizenship through naturalisation. That is almost twice as many as in 2020 (9,000). The increase is almost completely explained by the naturalisation of victims of the Nazi regime and their descendants. Since September 2020, this has been facilitated.²⁷ With few exceptions (some 100 persons), in 2021 this increase was due to naturalisations of people living abroad, who have no direct influence on the size and composition of Austria's population. This gesture recognises the historical responsibility of Austria towards victims of National Socialism and their descendants, even if it comes quite late. It also has a symbolic meaning. However, it also increases the number of persons who may immigrate to Austria in the future without any other conditions.

In Austria itself, 9,700 people (2021) were naturalised, some 1,000 more (+11%) than in 2020. Some two thirds of all people newly naturalised in Austria were born abroad (1st generation: 6,400 persons),²⁸ while around one third were born in Austria as foreign nationals (2nd generation: 3,300). One sixth of naturalised persons (17%) were previously nationals of another EU/EFTA state.²⁹ The large majority (82%) were previously third-country nationals.³⁰ Related to the entire foreign resident population, the naturalisation rate for both 2020 and 2021 was around 0.6%.³¹

If one only considers the foreign population eligible for naturalisation due to length of stay, in 2021 the effective naturalisation rate of first-generation immigrants was around 0.7%, and for those born here but with a foreign nationality (2nd generation) it was 1.7%.

Viewed historically, the naturalisation rate for the past years is low. Between 1991 and 2008, the number of naturalisations in Austria, despite the smaller foreign resident population at the time, was always above 10,000 per year, and in 2003 and 2004 – in the wake of the high immigration in the 1990s (mainly war refugees from Bosnia-Herzegovina, Croatia and Kosovo) – it even exceeded 40,000 per year. In these peak years, 5-6% of all foreign nationals living in Austria were naturalised. From 2009, the number of naturalisations in Austria was almost always below 10,000 per year, back at the level of the 1980s and early 1990s. In 2010 the number of naturalisations in Austria dropped to its lowest level in 40 years, to 6,100. The following years saw an increase in naturalisations in Austria until 2019 (10,500), a dip in 2020 (8,800) and a renewed increase in 2021 (9,700).³² The general naturalisation rate between 2010 and 2021 lay between 0.6% and 0.7%.

NATURALISATIONS

2021 by previous nationality/section 58c compared to previous year

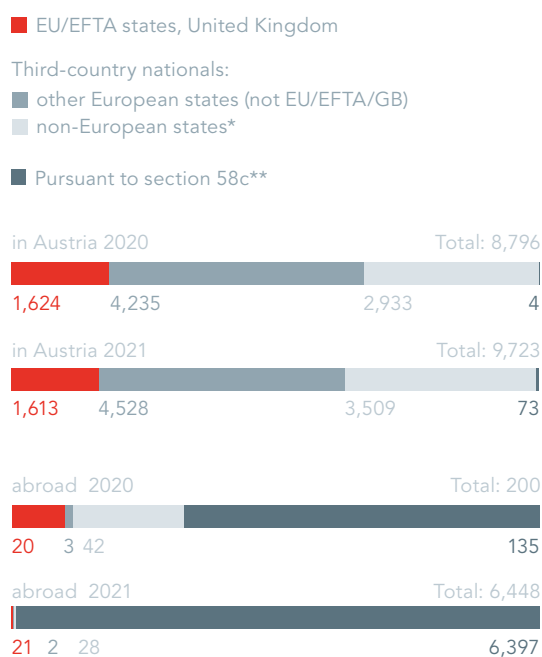


Fig. B11; * incl. stateless, unknown and unclarified; ** Regaining following loss for political reasons; Source: Statistik Austria (2022): Eingebürgerte Personen seit 2010 nach ausgewählten Merkmalen; own representation

27 Section 58c para. 1a Naturalisation Act. This new rule, passed in 2020, enables the descendants of victims of the National-Socialist regime to obtain citizenship simply through notification, without having to give up their current citizenship or demonstrate residence in Austria. Additionally, the already existing simplified naturalisation process for ex-citizens of Austria expelled by the National-Socialist regime (and their descendants) was expanded to include ex-citizens of all successor states of the Austro-Hungarian Empire as well as stateless people. Simplified naturalisation was only possible for people who had left the territory of today's Austria by 9 May 1945; today it applies to those who left by 15 May 1955.

28 Including 1,660 recognized refugees.

29 Incl. United Kingdom.

30 There was also a small group of previously stateless people (0.8%).

31 Statistik Austria (2022), naturalisations.

32 Naturalisation of victims of National Socialism and their descendants (pursuant to Section 58c Naturalisation Act) not included, as these almost all reside abroad.

A European comparison shows that with a naturalisation rate of 0.6% to 0.7% per year, Austria is clearly under the average for EU and EFTA states (2019: 2.2%, 2020: 1.5%). Most EU states with similarly low naturalisation rates had hardly any immigration between 1990 and 2021 (Bulgaria, Estonia, Latvia, Lithuania, Slovakia, Czechia). European countries with a comparable share of immigrants (with the exception of Denmark) mostly have significantly higher naturalisation rates. Even Norway and Switzerland, two countries with more restrictive conditions for acquiring citizenship than Austria, have significantly higher naturalisation rates (Fig. B12).

There are several reasons for the historically and – compared to other European countries – low naturalisation rates in Austria.

- » Since 2000, citizens of other EU states have come to Austria in larger numbers; these have the same rights as the national population in most areas. Many of them do not stay long enough in Austria to fulfil the general requirements for naturalisation. And of those who stay here long-term or permanently, the majority of citizens of western EU states in particular show little interest in naturalisation.
- » Between 2006 and 2018, Austrian naturalisation law became more restrictive. The requirements for obtaining Austrian citizenship were increased. This development went against the European trend, as since 2000 several other European countries witnessed a trend towards easing citizenship requirements.³³
- » The increasingly restrictive legislation since 2006 aims largely to demonstrate the sustainable integration of applicants for citizenship. Conditions that have no integration policy justification include the high fees, which differ between federal provinces. There are also increasing reports of bureaucratic hurdles, lacking communication and insufficient service orientation in the authorities responsible for naturalisation, particularly in Vienna and Salzburg.³⁴ Such administrative practices can lead to significant delays in naturalisation. A standardised survey of foreigners aged 18 and above in Vienna in February 2021 reveals that enabling dual citizenship would also greatly increase the appeal of naturalisation.³⁵

NATURALISATIONS

2020 in EU/EFTA as share of the resident non-nationals

Sweden	8.6%	Poland	2.0%	Romania	1.3%	Iceland	0.8%
Portugal	5.5%	France	1.7%	Germany	1.1%	Slovakia	0.7%
Netherlands	4.8%	Cyprus	1.7%	Malta	1.1%	Austria	0.6%
Norway	3.3%	Luxembourg	1.6%	Slovenia	1.1%	Czechia	0.5%
Finland	2.9%	Switzerland	1.6%	Hungary	1.1%	Estonia	0.4%
Italy	2.6%	Greece	1.5%	Ireland	0.9%	Latvia	0.4%
Belgium	2.4%	Denmark	1.3%	Liechtenstein	0.9%	Lithuania	0.2%
Spain	2.4%	Croatia	1.3%	Bulgaria	0.8%		

Fig. B12; Source: Eurostat (2022), residents who acquired citizenship as a share of the resident non-nationals; own representation

33 Stiller, Martin (2020), *Möglichkeiten des Staatsbürgerschaftserwerbs durch Fremde in Österreich*; Valchars, Gerd and Bauböck, Rainer (2021), *Migration & Staatsbürgerschaft*.

34 See Volksanwaltschaft (2015–2020), *Report to the Vienna Parliament and (2021), Report to the Salzburg Parliament 2019–2020*.

35 Haller, Max and Stadlmair, Jeremias (2021), *Wunsch nach Erwerb der österreichischen Staatsbürgerschaft. Eine empirische Untersuchung in Wien*, p. 31.

Since 2017, the Austrian Integration Act defines naturalisation as the end goal of successful integration.³⁶ We need to examine why this end goal formulated by the legislators currently is only achieved by relatively few people. Overriding state and social policy considerations suggest that a constantly growing number of foreigners combined with a continuously decreasing number of the national resident population is not a desirable trend in the long run. In the Expert Council for Integration's view, it is therefore important to consider what measures should be taken to increase the naturalisation rate among the share of the immigrant population whose primary place of residence, for the long term or permanently, is Austria. This applies even more for the approximately 251,000 foreign nationals born and raised in Austria.

36 "Der Erhalt der österreichischen Staatsbürgerschaft soll den Endpunkt eines umfassenden Integrationsprozesses darstellen" ("Obtaining Austrian citizenship should be the end goal of a comprehensive integration process") – (Section 2 para. 2 Integration Act.)

Education and training

Due to immigration and increasing diversity, the number and proportion of school pupils with a migrant background and another language than German as their everyday language is constantly rising in Austrian schools. In the school year 2020/2021, already over a quarter of children and adolescents had another everyday language than German. On average, these children and adolescents leave the education system earlier and with measurable deficiencies in their skills. In the lower levels of academic secondary schools, apprenticeship training and upper secondary education schools, adolescents with a migrant background are significantly underrepresented. The education system compensates for inequalities of opportunity arising from family situations only to a slight extent. This affects later employment and labour market participation.

ACQUISITION OF SKILLS IN THE AUSTRIAN SCHOOL SYSTEM

Schools and kindergartens are social institutions that provide more than just formal education. They are also of primary importance in the acquisition of social and language skills as well as for the transmitting of cultural values. Whether the integration of children and adolescents with a migrant background is successful or not therefore depends very largely on the number of staff and other resources, the organisation and everyday practice in kindergartens and schools.

Empirical surveys on school success reveal a skills deficit, and so a starting disadvantage among pupils with a migrant background when moving onto higher education and employment. On average, these pupils acquire lower skills than children and adolescents without a migrant background. This is supported by surveys of the education level for Austria from the period before the coronavirus pandemic among 13- to 14-year-olds (8th grade), who are near the end of the period of compulsory schooling.³⁷

- » At the time, just one third of adolescents with a migrant background (32%) had solid reading comprehension (achieved or surpassed the standards for reading; without a migrant background: 62%).
- » Another third of students with a migrant background (34%) partially met reading standards, and understood only short texts of low complexity (without a migrant background: 27%).

37 The legal basis of the educational standards in section 17 of the School Education Act (SchUG), the Educational Standards Ordinance (Federal Law Gazette II no. 1/2009) and its amendment (Federal Law Gazette II no. 282/2011) define striving for results, sustainable expansion of skills, and targeted individual support as obligatory tenets of instruction; see Expert Council for Integration (2020), Integration Report 2020.

- » The remaining third of youths with a migrant background (35%) failed to meet the learning objectives. They had problems with comprehension even with texts that are short and of low complexity, and thus had significant literacy problems.³⁸
- » In maths, one third of adolescents with a migrant background (35%) achieved or surpassed the standards (without a migrant background: 64%).
- » Another 35% only partially met these standards (pupils without a migrant background: 25%).
- » The remaining 30% had problems with simple mathematical assignments, even if they were short and of low complexity, and thus had significant problems in numeracy (without a migrant background: 11%).³⁹

Since 2016/2017 no education standard surveys have been conducted in Austria, but one can hardly assume that the skills of children and adolescents in compulsory schooling in the school year 2020/2021 lay above those in the last survey, especially in light of the significant restrictions on regular schooling due to the coronavirus pandemic, which probably resulted in additional educational deficits.

Already in previous Integration Reports, for instance in 2019, so before the coronavirus pandemic, the Expert Council for Integration had pointed to these challenges and had noted that education is the key for participation in the labour market and in social life.

According to an OECD study, in the school year 2020/2021 there was no in-class teaching on 74 days (= 40% of the school year) in Austrian primary schools across the country, and on 105 days (= 57% of the school year) in upper secondary education schools (from grade 9).⁴⁰ In contrast, kindergartens only closed on a case-by-case basis due to Covid-19 outbreaks. Internationally, Austria was in the OECD average. In-class teaching was suspended much less frequently for instance in Sweden, France and the Netherlands.

38 Breit, Simone et al. (Ed.) (2017), *Standardüberprüfung 2016. Deutsch, 8. Schulstufe*, p. 45.

39 Schreiner, Claudia et al. (Ed.) (2018), *Standardüberprüfung 2017. Mathematik, 8. Schulstufe*, p. 47.

40 OECD (2021), *The State of Global Education: 18 Months into the Pandemic*, p. 11.

STRUCTURAL SPECIFICITIES OF THE AUSTRIAN EDUCATION SYSTEM

There are several reasons for the considerable differences, on average, between children with and without a migrant background.

- » The educational success and graduation rate of children and adolescents is strongly correlated with their origin and the educational level of their parents.⁴¹ The educational qualifications and professional status of the parents already accounted for some 60% of the educational careers of children after primary school a decade ago.⁴² This is largely due to the fact that in Austria the decision about whether children continue their education at an academic secondary school/higher vocational school, which is very likely to lead to higher education entrance qualification, or whether they attend a middle school and later enter into an apprenticeship or perhaps acquire no educational qualification at all, is already made after the 4th grade.
- » Traditionally, the Austrian education system focuses too little on supporting talents in a targeted manner. And it also does not explicitly follow the aim of directly compensating for the disadvantages of origin (low income, low-education or low-income family, growing up in a single-parent household).

Added to this are some specificities of the Austrian education system:

- » The Austrian education system is very well equipped in material resources. There is almost no other country in the OECD or in Europe in which as much is spent on the education sector (from primary school to higher education⁴³) per student as in Austria.⁴⁴
- » However, the instruction times of teachers are lower than the EU and OECD averages. Both in primary school and in the lower grade of the academic secondary school and in middle school, instruction is generally limited to the mornings and is shorter overall than in many comparable countries. Instruction time per year is shorter on average by 100 hours in Austrian primary schools, and by 23 hours between 9th and 12th grade, than the OECD average.⁴⁵
- » Given the half-day instruction prevalent in the majority of schools, school pupils barely have contact with teaching staff outside of instruction time. No one-on-one conferences where pupils can discuss concerns with their teachers are scheduled. Adolescents are therefore largely dependent on their parents (especially their mothers), other relatives or other persons. Paid tutoring plays a major role in Austria.

41 This was empirically demonstrated for the first time in the baseline tests that were introduced at the time. These tests were the precursor of the educational standard assessment. They were carried out for the first time in 2009 in the 8th grade and for the first time in 2010 in the 4th grade on representative samples of pupils (around 8,000 pupils).

42 Evaluations of BMUK/BIFIE by Herzog-Punzenberger, Barbara (2013), Migration, Mehrsprachigkeit und Chancen(un)gleichheit im Bildungsbereich. See also the 5-year longitudinal study of Jörg Flecker and Ona Valls Casas, <https://science.apa.at/power-search/1536967080723462410>.

43 Spending on universities of applied sciences and universities, excluding research budget.

44 Only Luxembourg has a significantly higher per person budget; Norway spends around as much as Austria; OECD (2021), Education at a glance 2021.

45 Ibid.

- » In the school year 2021/2022, 48% of children in primary school received support from their parents daily, 33% received support one to three times per week. In middle school the figures were 22% daily and 40% one to three times per week. In the lower grades of academic secondary schools, the figures were 16% daily and 48% one to three times per week.⁴⁶
- » Paid and unpaid tutoring plays a major role in Austria.
- » During the summer 2021 holidays and in the 2021/2022 school year, some 164,000 pupils across the country received paid tutoring (no change from 2020/2021). Some 77,000 pupils received unpaid private tutoring. A further 63,000 received free tutoring at school (+13,000 compared to 2020/21).⁴⁷
- » Due to the comparatively large number of instruction-free days – on average 179 days per year (including weekends and a long summer holiday of 63 days) – there is a risk that achieved learning steps and language skills are not sufficiently anchored.

A decisive factor of success in education – besides talent, hard work and knowledge of the German language – is the family environment: housing situation, possibility of receiving support from the parents, and the ability of the parents to make strategic decisions regarding the choice of school for their children due to their knowledge of the education system and their interactions with the teaching staff.

The Austrian school system, which concentrates instruction in the mornings, separates different education paths early in the child's life and relies a lot on the collaboration of the parents, and is therefore not oriented to sufficiently compensate for differences in origin. Education and status will therefore – despite the expansion in education in the past decades – most likely be “inherited”.⁴⁸

In the context of migration, the structural specificities of the Austrian education system frequently result in disadvantages for children with a migrant background and who don't speak German at home. They tend to have lower skills in the language of instruction and are very likely to have parents with a low level of formal education, who cannot help them much, if at all, in understanding the course contents, solving homework and preparing for exams; can spend less or even no money on paid tutoring (see chapter B: Social aspects); and frequently lack the strategic knowledge to optimally place their children in the Austrian education system.⁴⁹

⁴⁶ Aichholzer, Julian et al. (2022), *AK-Studie: Nachhilfe in Österreich 2022*.

⁴⁷ *Ibid.*

⁴⁸ Statistik Austria (2018), *Vererbung von Bildung*; BMBWF (2021), *Nationaler Bildungsbericht 2021*.

⁴⁹ For an overview, see the report of the Austrian Academy of Sciences: Herzog-Punzenberger, Barbara (Eds.) (2006), *Bildungsbe/nach/teiligung in Österreich und im internationalen Vergleich*.

EARLY DEPARTURE FROM THE SCHOOL SYSTEM AND INACTIVITY

The effect of segregation in education and insufficient compensation of origin-related challenges are reflected in educational success: children with a migrant background have a higher rate of skills deficits in the core subjects (German, English, mathematics). At the same time, upwards mobility in qualifications amongst adolescents with a migrant background is lower than amongst children without a migrant background.⁵⁰

Persons with immigrant parents and an everyday language that is not German are less likely to obtain higher education qualifications than their own parents and have a higher risk of leaving the education/training system before they turn 18.⁵¹ Amongst adolescents and young adults who immigrated from a third country or whose parents did, the share of those who leave early is a quarter (2020: 24%, 2010: 26%), amongst those with an immigration background from other EU states still one sixth (2020: 16%, 2010: 12%).⁵² The majority consists of adolescents and young adults with only obligatory schooling (no apprenticeship training); a minority even has no qualification at all. The proportion of persons in this age group who do not enter gainful employment after leaving the education process early is accordingly high.

One consequence of early departure from the school system – in a minority of cases without any qualification – is inactivity (NEET). In 2021, 8% of adolescents and young adults aged between 15 and 24 were neither gainfully employed nor in training (+0.5% compared to 2020). With a share of around 13% of all people of the same age, adolescents with a migrant background were around twice as frequently inactive as adolescents and young adults without a migrant background (7%). This is explained in particular by the significant share, further increased after 2018, of inactive 15-24-year olds born abroad (1st generation; 2021 and 2020: 17%, 2018: 14%).⁵³ The NEET rate of coevals of the 2nd generation was 9%, a similar level as that for adolescents and young adults without a migrant background.

EARLY LEAVERS FROM EDUCATION AND TRAINING

18 to 24 years, 2010 and 2020

by country of birth

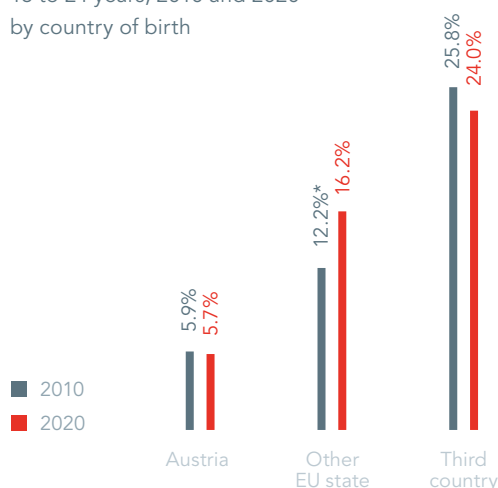


Fig. B13; "Early" means: before turning 18; * low reliability; Source: European Commission (2021), Education and Training Monitor 2021; own representation

⁵⁰ Purely from a statistics perspective, the opposite should be expected, because immigrant parents on average have a lower level of qualifications than Austrian parents without a migrant background.

⁵¹ Figures on learning mobility are calculated by the European Commission (DG EAC) based on UOE data for 2018. Additional information is available in Annex I and Volume I; European Commission (2021), Education and Training Monitor 2021.

⁵² Compared to persons of the same age between 18 and 24 years with the same migrant background.

⁵³ Adolescents and young adults who are neither in training nor gainfully employed are designated in the relevant statistics as NEET ("not in education, employment or training").

Over the past years there was a decrease in the share of inactive persons with a migrant background from a third country, while adolescents and young adults originating in another EU member state saw a slight increase in NEETs.

SHARE OF NEETS IN 15–24-YEAR-OLDS

2014 – 2021 by nationality

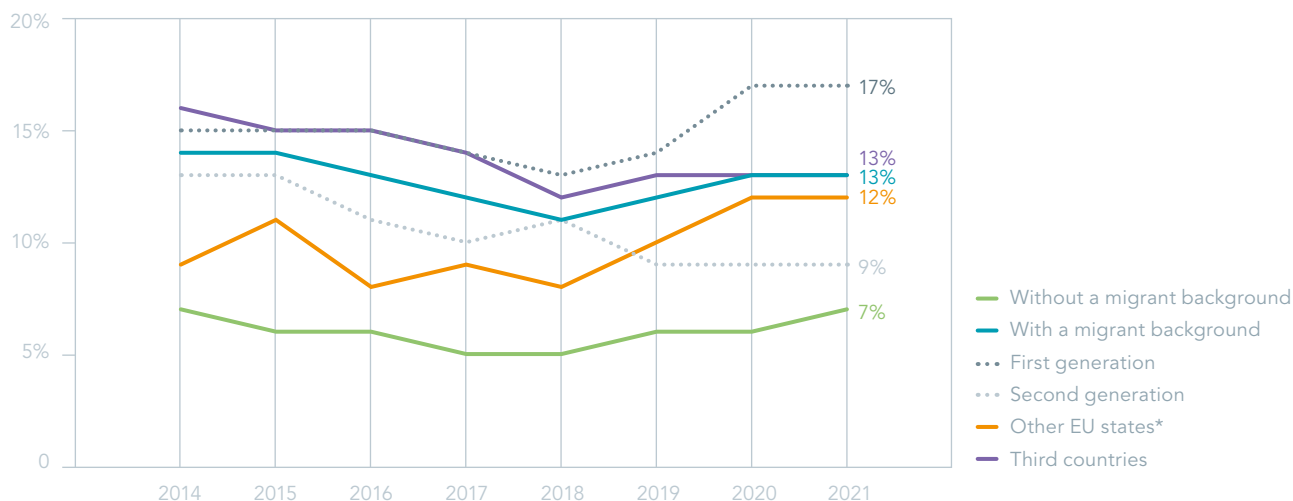


Fig. B14; * From 2017 incl. EFTA states, from 2020 incl. GB; Source: Statistik Austria (2015–2022), migration & integration; own representation

CHILDREN AND ADOLESCENTS IN SCHOOLS BY EVERYDAY LANGUAGE

In the school year 2020/2021, 1,124,900 children and adolescents attended school. For 818,600 (73%) of them, German was the most common everyday language and the language used at home. 306,300 (27%) spoke a different everyday language than German in their families.⁵⁴ Of these, 71,800 (6%) spoke Bosnian, Croatian or Serbian (BCS) at home, 61,100 (5%) spoke Turkish and 173,400 (15%) spoke another language. Around one quarter of these pupils used both German and the family's original language everyday (outside school).⁵⁵

While the number of pupils who spoke Bosnian/Croatian/Serbian or Turkish at home has stagnated in the past years and even decreased slightly, the number of children with another everyday language increased from 8% (2010/2011) to 15% (2020/2021) (+81,300). In the same period, the number of mainly German-speaking children and adolescents decreased by 114,700. The generally observable decrease in the population without a migrant background is also visible among the younger population (see chapter B: Immigration and population structure).

54 This includes both children and adolescents with a migrant background whose everyday language is their language of origin, and children and adolescents without a migrant background belonging to a recognized ethnic minority.

55 BIFIE (Eds.) (2019), Standardüberprüfung 2018 Mathematik, 4. Schulstufe Bundesergebnisbericht.

EVERYDAY LANGUAGE OF SCHOOL AND KINDERGARTEN CHILDREN

in Austria 2020/21

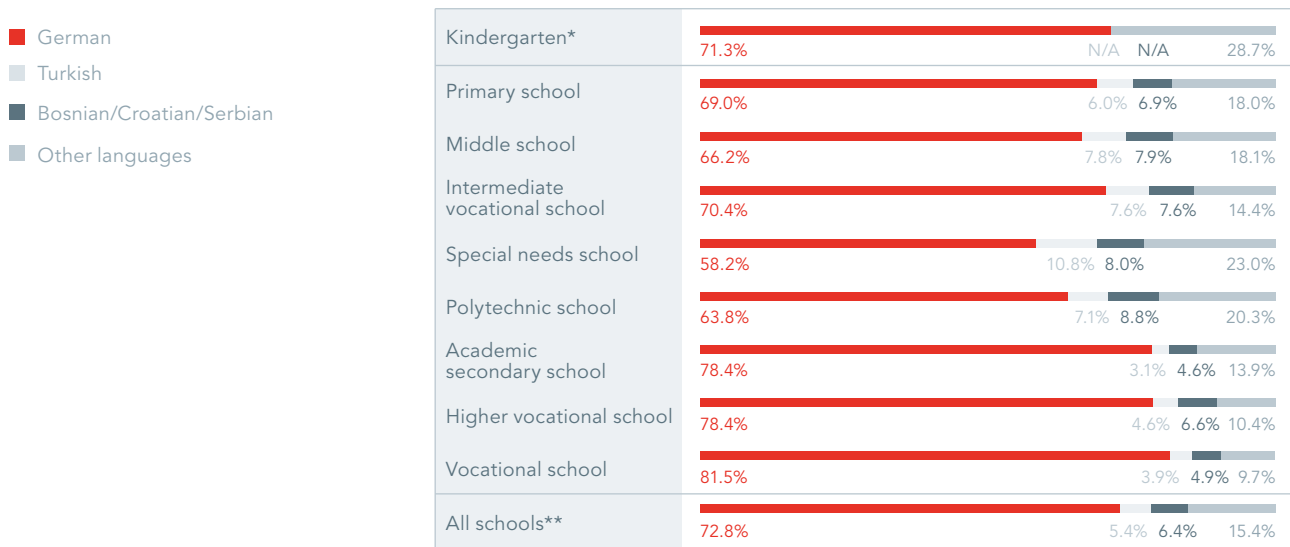


Fig. B15; * excluding Styria. ** including federal sports academies and other gen. and voc. education schools (and private schools with public status), without schools and academies in healthcare; Source: Statistik Austria (2022), Schulstatistik und Kindertagesheimstatistik; own representation

Some 195,000 children attended kindergarten in 2020/2021. Of these, almost a third (29%) spoke another everyday language than German, while around two thirds spoke German as their everyday language and at home. According to the language level survey, 14,200 children had deficient knowledge of the German language and required support.⁵⁶

Having an everyday language that isn't German is not associated with insufficient German skills in all cases.⁵⁷ In this age group, around a quarter of children and adolescents with another first language also used German in their daily activities. An everyday language other than German can however be considered an indicator that there is a potential need for support in German acquisition. Without sufficient German skills, learning the contents of all the other subjects in school becomes more difficult. With regard to achieving the legally mandated competence goals, a non-German everyday language therefore counts as a risk factor.⁵⁸

The proportion of children and adolescents with an everyday language other than German depends on the school type. Across Austria, in 2020/2021 the highest proportions of pupils with an everyday language other than German were found in middle schools (34%), polytechnic schools (36%) and special needs schools (42%). These school types are exclusively attended by children and adolescents below the age of 15. Of particular note is the high share of children with a migrant background and a foreign everyday language in special needs schools. As the Expert Council for Integration already emphasised in the Integration Report 2021, from an integration policy perspective it is important that children that have a need for language support but are not cognitively impaired receive tailored support and do not end up in a special needs school⁵⁹.

⁵⁶ Parliamentary materials (2022), Frühkindliche Sprachförderung und Deutschförderklassen.

⁵⁷ The data reflects only the pupils' first choice for the characteristic "language(s) used in everyday life" within the framework of data collection for school statistics; Statistik Austria (2021), Schülerinnen und Schüler mit nichtdeutscher Umgangssprache im Schuljahr 2020/21.

⁵⁸ Oberwimmer, Konrad et al. (2021), Indikatoren A: Kontext des Schul- und Bildungswesens, pp. 177ff.

⁵⁹ It also includes children and adolescents who are taught in regular school but according to the schedule of a special needs school.

The proportion of adolescents with another everyday language than German was much lower in vocational schools (19%) and in academic secondary schools and higher vocational schools (22% each), so in the school types leading to further education and where adolescents obtain an apprenticeship certificate or can obtain a Matura (final exam). In these school types there are too few – relative to their share of all coevals – children and adolescents with a migrant background and an everyday language other than German.

This form of unequal distribution in the Austrian education system negatively influences the later education careers of children with a migrant background, because without an apprenticeship certificate or Matura and higher education, gaining employment in (highly) qualified occupations is much more difficult. Without further education or training, the more stable and better paid positions in the labour market remain out of their reach.

Beside the type of school, there are also large differences in the proportion of children and adolescents with another language than German as their everyday language from province to province. The proportion was highest in Vienna, where just over half (53%) of pupils use another everyday language than German. A comparison between cities and rural areas shows that Vienna has a similarly high proportion of pupils with a language other than German as their first language as other densely populated areas in Austria.⁶⁰ The federal province with the second-highest proportion of pupils with an everyday language other than German was Vorarlberg (27%), followed by Upper Austria and Salzburg (23% each). The federal province with the lowest proportion was Carinthia (16%). In Burgenland and Carinthia, there are also pupils with recognized minority languages (Croatian, Slovenian, Hungarian).

Empirical data from the National Education Report shows that immigrant parents of primary school pupils on average have a lower level of education than locals, with differences based on country of origin. While around half of the parents from Germany had a tertiary degree, two fifths (39%) of parents of Turkish origin had at most completed compulsory schooling and just one tenth (9%) had a tertiary degree. This affects the kind of employment. Parents with a migrant background were some four times more likely to work as low-skilled workers, machine operators and installers than parents without a migrant background (11% compared to 3%). At the other end of the professional spectrum, 21% of parents with a migrant background were active in leadership or in academic positions, compared to 37% of parents without a migrant background.

In the context of an education system whose structures do not focus on compensating inequalities of opportunity amongst children and adolescents, a low professional status and a low level of formal education of the parents represent significant hurdles for the educational success of their children and for their opportunities in the labour market. Furthermore, the findings of the National Education Report revealed a strong concentration of risk factors in primary school children with a migrant background; this concentration has increased over the past years.⁶¹ Since 2015, the proportion of children with a migrant background of the 1st generation⁶² that have one or two risk factors grew from 84% to 89%. 4% of pupils with a migrant background had all three risk factors.

⁶⁰ Oberwimmer, Konrad et al. (2021), *Indikatoren A: Kontext des Schul- und Bildungswesens*, p. 183.

⁶¹ *Ibid.*, pp. 174ff. Risk factors are 1) parents with at most compulsory schooling, 2) low professional status of the parents and 3) pupil's first language is not German.

⁶² Born abroad – except Germany.

The likelihood of having one or more risk factors also depended on the degree of urbanisation of the municipality. While there were hardly any pupils with more than one risk factor in thinly populated municipalities (2% with two and 0.3% with three risk factors), Vienna had the highest proportion of children with two (13%) and three (2%) risk factors. In other larger cities, the situation is similar.

PREPARATION OF TEACHING STAFF TO REQUIREMENTS DUE TO DIVERSITY

For the education system, the increasing diversity of pupils is increasingly a challenge. This also affects the teaching staff, whose training may lie several years or even decades in the past.

PREPARED FOR DIVERSITY IN CLASS

Training and preparation by age of teachers

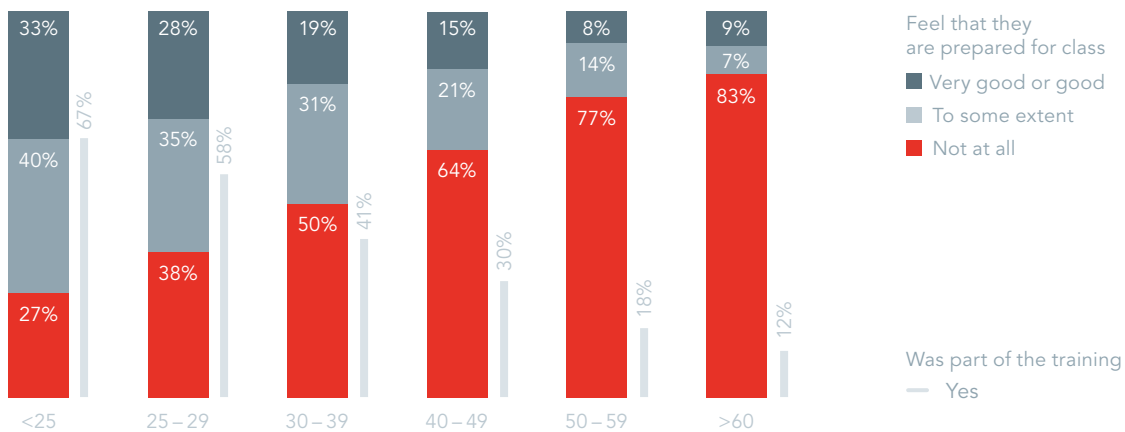


Fig. B16; Answers of teachers in percent; Source: Höller, Iris; Itzlinger-Bruneforth, Ursula; Widauer, Katrin (2019), *Schule und Unterricht in vielfältigen Lernwelten*; own representation

The standardised teacher survey (TALIS)⁶³ carried out by the OECD in many countries found for Austria:

- » Younger teachers (aged under 30 in 2018) mostly had the opportunity during their training to acquire skills for managing a multicultural school environment and therefore feel more prepared.
- » In contrast, for those over 30 (in 2018) – the majority of the staff – this was not the case. The majority acquired no relevant skills during their studies and feels poorly prepared for the challenges brought on by the diverse origins of their pupils. It is not clear why this majority could not or did not acquire the relevant further qualifications during their careers.

The fact that to date few teachers in Austria themselves have a migrant background and few speak the languages of origin and spoken in the families⁶⁴ of their pupils also highlights the need for multicultural skills.

⁶³ Höller, Iris et al. (2019), *Schule und Unterricht in vielfältigen Lernwelten*.

⁶⁴ Albanian, Arabic, Bosnian/Croatian/Serbian, Farsi, Kurdish, Romanian, Turkish.

CHILDREN AND ADOLESCENTS GETTING GERMAN SUPPORT CLASSES OUTSIDE REGULAR INSTRUCTION

Children and adolescents who cannot follow instruction in German are taught as non-regular pupils until they achieve the requisite language level. Since the school year 2018/2019, children with insufficient German skills are instructed in their own German support classes (from 8 pupils) or in German support courses parallel to instruction, separately from the other pupils.⁶⁵ They only attend regular classes with their co-pupils in arts, music, and movement and sports. This enables concentrated language teaching, but it reduces the time that pupils with insufficient German skills spend with children who speak German well or for whom it is their everyday language.

In the past 12 school years, the number of non-regular pupils ranged between 25,700 (2010/11) and 45,300 (2017/18). In 2020/21, around 34,000 pupils had a non-regular status (around 3% of all pupils; -400 compared to 2019/20). The duration of German support classes and German support courses in the reporting period was at most four semesters or two school years.

NON-REGULAR PUPILS

School year 2019/20 and 2020/21 by nationality

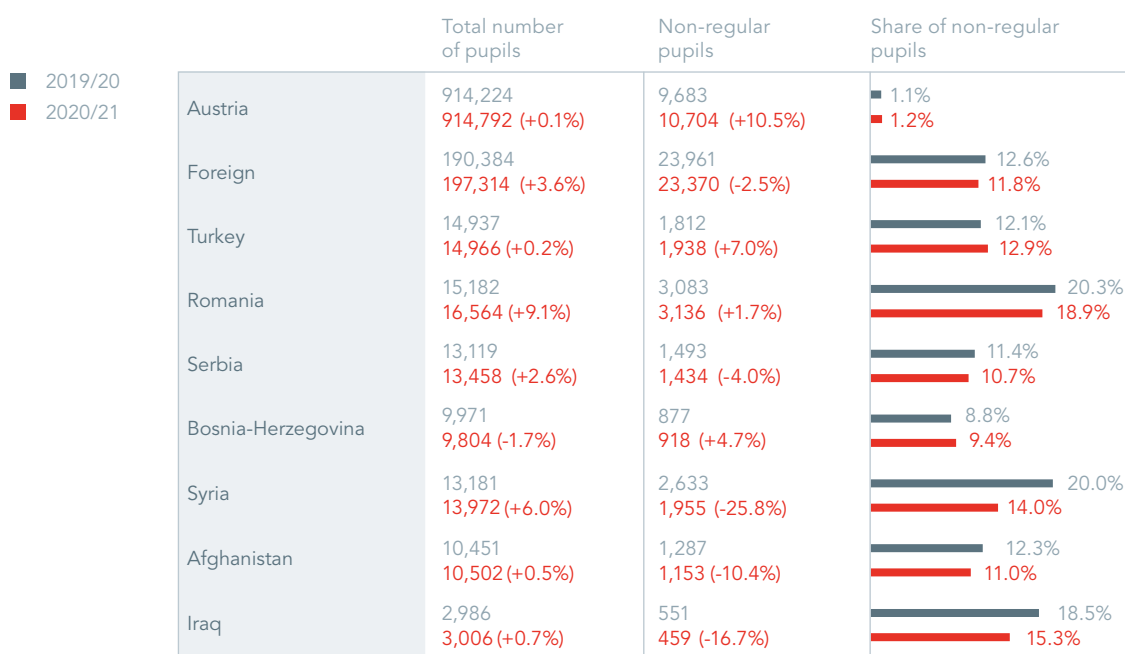


Fig. B17; Source: Integration Monitoring according to the Integration Act; own representation

⁶⁵ The assignment is based on the Austria-wide uniform measurement tool for skill analysis in German (MIKA-D). A second test at the end of the semester determines German support for the upcoming semester and, in the event of sufficient German skills, a transfer to regular instruction is enabled; see BMBWF (2019), Deutschförderklassen und Deutschförderkurse.

In the school year 2020/2021, 13,600 pupils were in a German support class, another 18,700 in German support courses. There were clear regional differences, which relate both to the various support needs and to the variously large numbers of children with a migrant background starting school. In Vienna, 12,000 pupils attended German support classes or German support courses. In Upper Austria, 6,200 attended one of the support models, in Lower Austria 3,900. The federal provinces with the lowest number of pupils in one of the two German support models were Burgenland (400) and Carinthia (1,100).

The largest group receiving support consisted of pupils with Austrian citizenship (10,700 = 1.2% of all Austrian pupils). With much smaller numbers, this was followed by citizens of Romania (3,100; 19% of all Romanian pupils), Syria (2,000; 14%), Turkey (1,900; 13%), Serbia (1,400; 11%), Afghanistan (1,200; 11%) and Iraq (500; 15%). Compared to 2019/2020, the largest drops in numbers were amongst pupils from Syria (-26%), Iraq (-17%) and Afghanistan (-10%). At the same time, the number of non-regular pupils with Austrian citizenship increased by some 11%.

PUPILS IN GERMAN SUPPORT CLASSES AND COURSES

Share of total number in school year 2020/21 by federal province

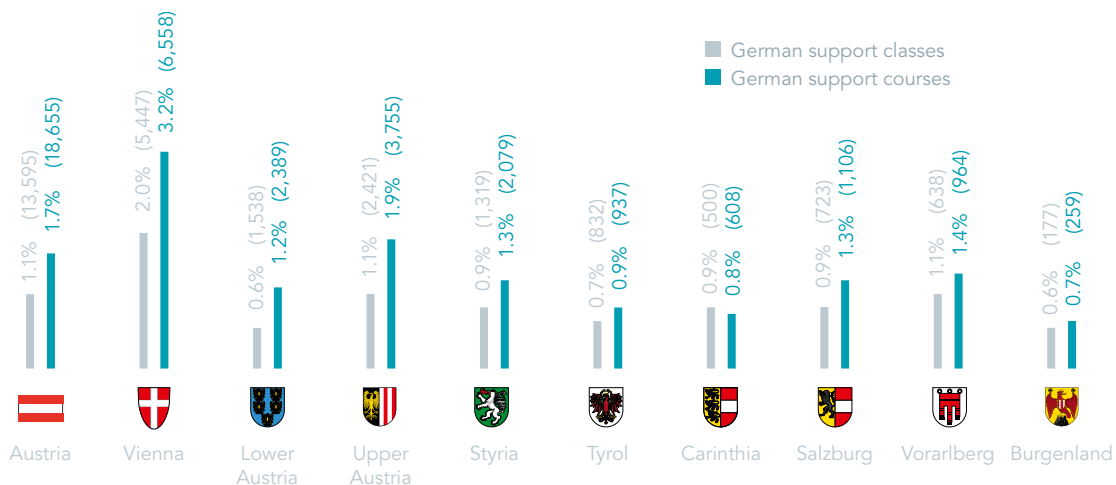


Fig. B18; Source: Integration Monitoring according to the Integration Act; own representation

One way to estimate the efficacy of intensive German language support is transfer rates to regular instruction. The school statistics show that of 10,600 pupils who attended a German support class for the first time in the school year 2018/2019, 2,800 (27%) had sufficient skills to attend regular instruction after one year (at the start of the third semester). Another 5,600 (53%) required additional support beyond regular instruction and were registered in a German support course. After 1.5 years (at the start of the fourth semester), 5,500 (52%) already had a regular status, while 3,900 (37%) still required a German support course.

Of the 7,200 pupils who started a German support class in the following school year 2019/2020, 1,100 (16%) were in regular instruction after one year (start of the third semester) with sufficient German skills, while 3,600 (49%) still required a German support course in addition to regular instruction.⁶⁶

Upon their introduction, the support models were contested in education expert circles.⁶⁷ The Expert Council for Integration therefore repeatedly suggested over the past years that the models introduced in 2018 be evaluated. The Ministry of Education has now commissioned such an assessment. Results will be available by autumn 2022. In two preparatory workshops with experts from schools, school supervisory board, academic research and the Ministry of Education, goals as well as indicators for their achievement were formulated and the status quo was appraised. In a first estimation, the participating experts found a need for improvement in the instruction in the support classes (for instance as much time as possible in integrative learning settings), in the professionalisation of the teaching staff (of which some are not trained in “German as a foreign/second language”), and at the system level (including smaller class sizes).⁶⁸

A country-wide survey of teachers conducted by the University of Vienna revealed an approval rate of 36% for the current support model, but also provided additional suggestions and constructive criticism.⁶⁹ Aspects that needed improvement or change included:

- » The lack of language role models due to the limited contact to coevals with German as their everyday language, which can lead to the “cultivation of incorrect German”.
- » A strong age mix, as all age groups from pre-school to third-graders can be present in one support class.
- » Great variations in level, as both children without any German knowledge who have just arrived in Austria and children born in Austria who have a language deficit may be in the same support class.
- » Lacking support for mathematics and English, meaning that the pupils “lack important basics to be able to keep up” when they switch to regular instruction.
- » 12% of surveyed teaching staff in support courses and 22% of those who work in German support classes stated that they are not sufficiently qualified for the task. Only around 40% had training in German as a second language.⁷⁰

66 Parliamentary materials (2022), *Frühkindliche Sprachförderung und Deutschförderklassen*.

67 See amongst others APA-OTS (2020), *Pädagog*innen fordern Abschaffung von “Deutschklassen”*.

68 Spiel, Christiane et al. (2021), *Bericht der Workshopergebnisse zu den Themen Zieleklärung und Implementierung. Vorprojekt zur Evaluation der Deutschförderung*.

69 Schwab, Susanne and Kast, Julia (2020), *Deutschförderklassen und Deutschförderkurse. Ergebnisse zur Befragung von Lehrer*innen*.

70 See also the results of the OECD/TALIS survey in Fig. B16.

DUAL EDUCATION

Overall, in the school year 2020/2021 there were some 124,000 persons in apprenticeship training, of which 18,000 (15%) were foreign nationals. While the number of apprentices with Austrian citizenship only saw a small change, that of foreign nationals grew by 700 (+4%). The largest changes were in citizens of eastern central and south-eastern EU states (-24%) and third-country nationals (+14%). These figures are only partly relevant to assess the success of integration, as around two thirds of the adolescents and young adults born in Austria with a migrant background (2nd generation) have Austrian citizenship.

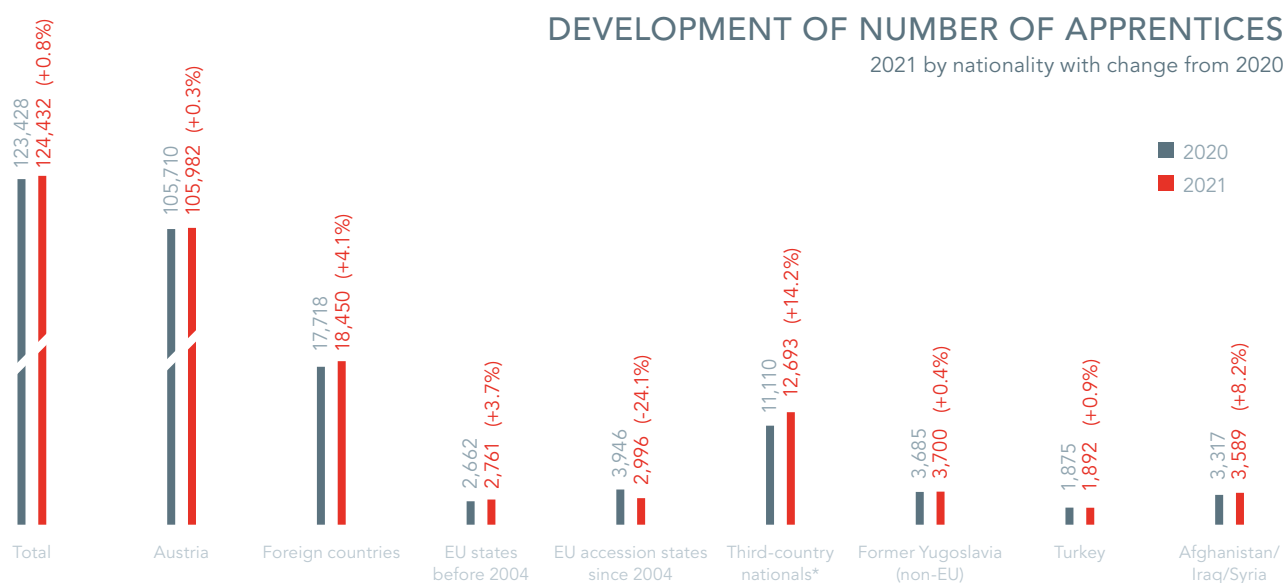


Fig. B19; * incl. stateless and unknown; Source: Integration Monitoring according to the Integration Act; own representation

VALUES AND ORIENTATION COURSES

Values and orientation courses are offered to people above the age of 15 who are entitled to asylum and subsidiary protection or asylum seekers whose application was approved for submission. The courses are in German, and interpreters for the most common languages of origin, such as Arabic, Farsi/Dari, as well as English, are on hand for participants whose German is still insufficient. The training materials are also available in several languages.

The values and orientation courses, which have been offered since 2015, transmit the basic values of the Austrian constitution such as democracy, equality of women and men and human dignity and teach the participants about the importance of German language skills and education as well as practical everyday knowledge for integration in Austria. Starting in January 2022, the one-day courses were expanded into a three-day format and their contents were increased. They now address three themes, each on one day: 1) learning German, education and labour market, 2) voluntary work and cultural aspects of coexistence, 3) constitutional values and legal integration. After completing the training, there is the option of visiting volunteer organisations, Austrian institutions or sights during a voluntary practice day.

PARTICIPANTS IN VALUES AND ORIENTATION COURSES

2021 by most common nationalities and sex

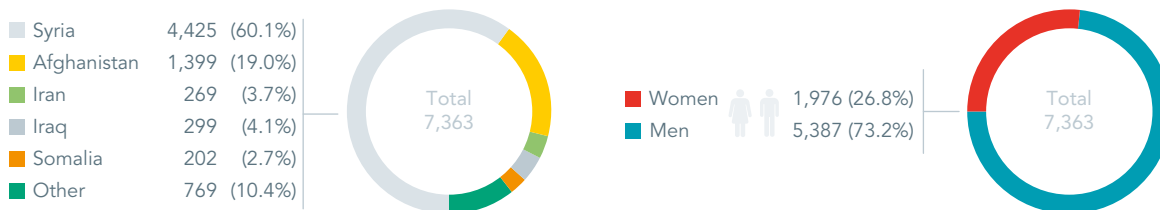


Fig. B20; Source: Integration Monitoring according to the Integration Act; own representation

In 2021, some 7,400 persons participated in a values and orientation course (+3,000 compared to 2020). As in the previous year, the numbers should be seen in the context of the Covid-19-related restrictions and associated lack of in-person events. When in-person events were possible, these were carried out under observance of the mandatory protective measures. This resulted in a reduction in the number of participants. As in the previous years, the largest groups were citizens of Syria (4,400 or 60%) and Afghanistan (1,400 or 19%). In accordance with the demographic structure, men represented some three quarters (73%) and women around a quarter (27%) of participants.

Since the introduction of the Integration Act, some 90,000 persons also took a German course. For 2022, some 43,000 German course places across Austria were agreed in the framework of 33 German course projects. Due to the Ukraine war, German courses for displaced persons were also legally anchored in the Integration Act; these can be attended by this target group. The already running German courses were thus expanded by some 35,000 places. Due to the coronavirus pandemic, since 2020 an additional offering of online German courses for several language levels was also established. In 2021, some 1,600 online courses were held. In the future, online offerings will be expanded in addition to regular courses.

Labour market

In the annual average for 2021, there were 4,298,000 persons in Austria who were either non-self-employed or self-employed. This was an increase of 2% (+92,000) from the previous year. At the same time, the number of job seekers in 2021 decreased to 402,100 (-14%) and the unemployment rate to 8% (9.9% in the previous year). This represents a significant improvement in the labour market in 2021 from the previous year; in some areas, the figures were even better than in 2019, the last year before the coronavirus pandemic. For example, the number of people in gainful employment is higher than in 2019 (+7,600 or +0.2%); however, the number of job seekers remained above the level of 2019 (+38,800 or +11%). The unemployment rate in 2021 has also not gone back to the 2019 level of 7.4%. This trend is due to the fact that the supply of labour in 2021 increased more rapidly than the demand for labour - not least because people in the so-called silent reserve returned to the labour force.

These developments in the labour market also influenced the labour market integration of people with a migrant background. In some areas, their employment situation also improved, and the unemployment rate decreased somewhat. However, there were differences based on gender, qualification and country of origin.

FOREIGN LABOUR

In 2021, the number of foreign employees grew by +62,400 (+8%) to 839,600, while the number of employed Austrian citizens increased by +25,400 (+1%) to 2,965,300.

A particular improvement was seen in 2021 in the employment situation of refugees and people entitled to subsidiary protection from the main refugee countries of origin in recent years (Afghanistan, Syria, Russian Federation, Iran, Iraq and Somalia), with a rate of increase of +21% (+8,500), followed by migrant workers from post-2007 EU accession states (Bulgaria, Romania, Croatia) with an increase of +13% (+14,000) and migrants from pre-2004 EU states and EFTA incl. the United Kingdom (+6%, +9,200). The smallest percentage increase (+5% or +13,400) was in the employment of third-country nationals (without nationals of one of the refugee countries of origin cited above). The proportion of foreign workers amongst all employees (including people in military service and parental leave) consequently increased to 22.1% - from 20.9% in 2020.

EMPLOYED AND SELF-EMPLOYED FOREIGNERS

2021 by nationality, annual average compared to previous year

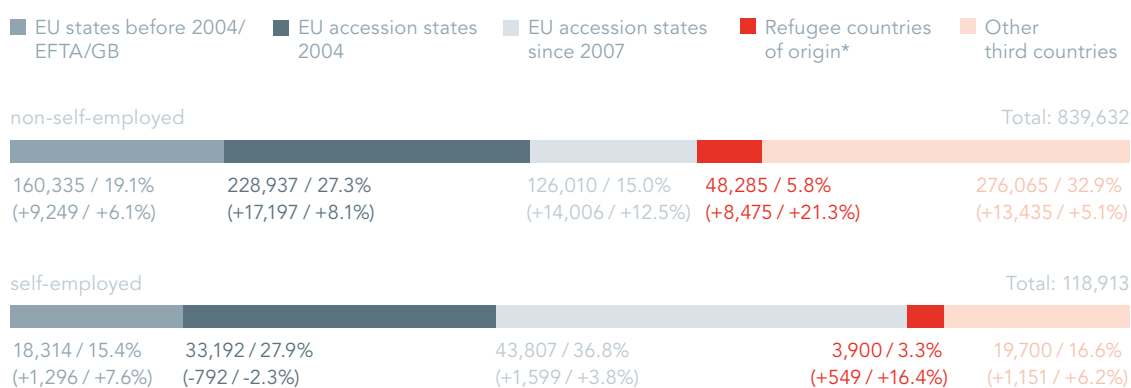


Fig. B21; * Refugee countries of origin: Afghanistan, Syria, Russian Federation, Iran, Iraq and Somalia. This is an approximation: not all nationals of these countries are refugees, refugees with other nationalities were not included; Source: BMA (2022), Online labour market database AMIS; own representation

Amongst the foreign self-employed, 2021 saw an increase of +2,500 (+2%) to 118,900 persons. In this category too, the largest increase was amongst people from the refugee countries of origin cited above (+16% or +549). The number of self-employed nationals of pre-2004 EU states/EFTA incl. United Kingdom increased somewhat less (+8%, +1,300), followed by third-country nationals excluding the refugee countries of origin (+6%, +1,200) and nationals of post-2007 EU states (+4%, +1,600). The only decrease was amongst nationals of EU states that acceded in 2004, a decline of -800 (-2%). The share of foreign self-employed persons in all self-employed persons increased in 2021 to 24.1%, from 23.8% in 2020.

The share of foreigners in all (non-self-employed and self-employed) workers correspondingly increased in 2021 to 22.3%, from 21.2% in 2020.

NON-SELF-EMPLOYED

2021 by sector, nationality and sex

	Non- self-employed	of which women	Foreigners	of which women	Share of foreigners	Share of foreigners in women
Total*	3,734,365	1,699,301 45.5%	839,634	334,802 39.9%	22.5%	19.7%
Manufacture of goods	623,417	156,834 25.2%	130,247	32,661 25.1%	20.9%	20.8%
Hospitality	186,717	103,577 55.5%	95,622	47,789 50.0%	51.2%	46.1%
Retail; Maintenance and repair of vehicles	562,139	301,709 53.7%	120,192	58,488 48.7%	21.4%	19.4%
Provision of other economic services	83,111	55,378 66.6%	16,320	10,165 62.3%	19.6%	18.4%
Construction	284,994	35,499 12.5%	89,605	4,715 5.3%	31.4%	13.3%
Traffic and storage	194,275	41,521 21.4%	54,057	8,655 16.0%	27.8%	20.8%
Health care and social work	295,260	223,161 75.6%	50,717	38,647 76.2%	17.2%	17.3%
Rendering freelance, scientific and technical services	194,296	103,950 53.5%	36,471	18,046 49.5%	18.8%	17.4%
Public administration, defence, social security	587,998	359,090 61.1%	34,516	25,121 72.8%	5.9%	7.0%
Education and teaching	110,111	65,807 59.8%	27,830	15,920 57.2%	25.3%	24.2%
Agriculture and forestry; fisheries	25,749	9,383 36.4%	13,735	4,268 31.1%	53.3%	45.5%
Other	441,282	203,782 46.2%	77,242	35,835 46.4%	17.5%	17.6%

Fig. B22; * excl. military conscripts and parental leave; Source: BMA (2022), Online labour market database AMIS; own representation

The share of foreign workers varies greatly from sector to sector. In 2021, their share in “accommodation and gastronomy” as well as “agriculture and forestry” was highest, at over 50% in each, and lowest in “public administration, defence and social security” at 6%. The average share of foreign workers across all sectors (excluding military service and employees in parental leave) was 23%.

Around half of all employees were female in 2021 (46%), but amongst foreign nationals the share of women was significantly lower at 40%. In most sectors, the share of women amongst foreign workers largely corresponded to the average share of women, but with some marked exceptions. For instance, some 46% of all employed women in accommodation and gastronomy were foreigners, while their share in public administration was just 7%. In total, more than half of foreign women worked in four large employment sectors – commerce, tourism, production and healthcare and social welfare – while only 44.5% of female Austrian citizens worked in these areas.

The picture amongst the self-employed looks very different: while the share of women was 42% (207,800) in 2021, amongst the foreign self-employed it reached 64%. This is due to the large share of self-employed women in the healthcare and social welfare sector working as 24-hour carers (see chapter D).⁷¹ Of all foreign self-employed women (2021: 76,100), 72% were active in the healthcare and social welfare sector – compared to 8% of female Austrian citizens. Female Austrian citizens are largely present as self-employed workers in tourism, commerce, person-oriented services (hairdressers, physiotherapists etc.) or as freelancers.

SHORT-TIME WORK

In 2021, short-time work remained an important instrument to stabilise employment. From January to December 2021, a total of 546,400 persons were in short-time work, around half as many as in the previous year (-705,200, -56.4%). As in the previous year, foreigners were more affected by short-time work than Austrians. While 22% of foreigners were in short-time work (2020: 43%), this was true for “only” 12% of Austrians (2020: 31%). Of note is the fact that amongst foreign nationals there is hardly any difference by gender in the numbers of workers on short-time work, while amongst Austrian citizens many more women than men benefitted from it.

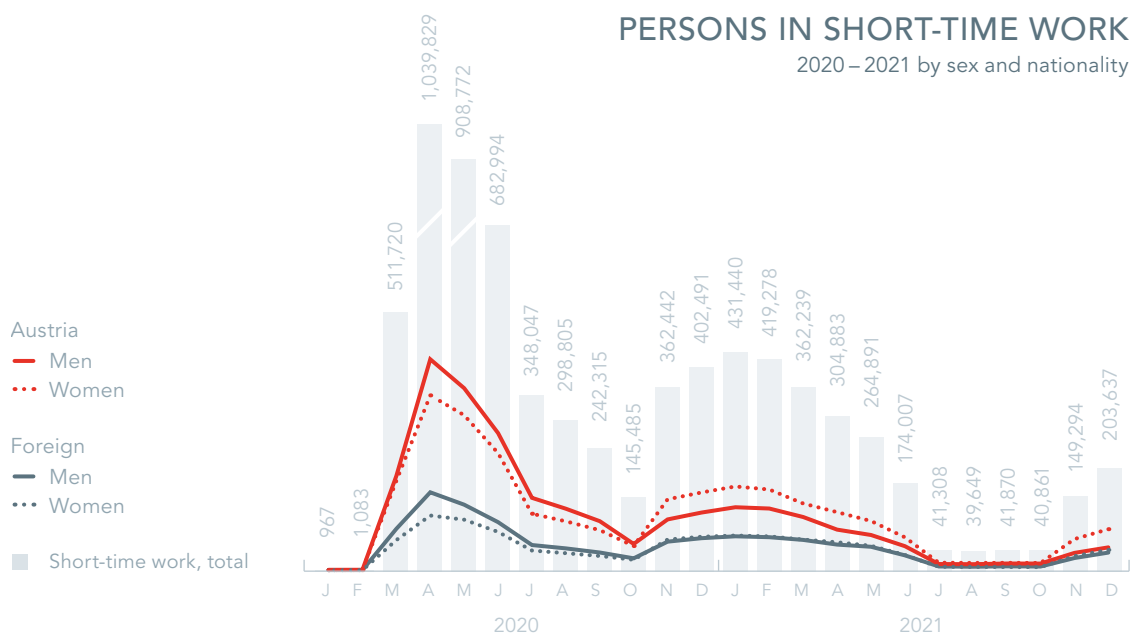


Fig. B23; Source: Public Employment Service (2022), special assessment; own representation

⁷¹ The large majority of 24-hour care workers as well as some of the staff of hospitals and care homes are employed and subject to social security in Austria. However, they are not migrants, but rather cross-border commuters, as they do not have a permanent residence in Austria.

UNEMPLOYED AND TRAINING PARTICIPANTS BY NATIONALITY

After reaching its highest level since the Second World War in 2020, at 466,700 persons, in 2021 the number of job seekers declined again for all population groups of working age, reaching 402,100 (-14%). Of these, 331,700 persons were registered as unemployed, and so as immediately available for placement, with the Public Employment Service. Another 70,300 persons were in training and were therefore not immediately available to the labour market. Year-on-year, the number of immediately available unemployed declined by 77,900 (-19%), while the number of job seekers participating in a training increased by +13,200 or +23%.

In relative terms, the unemployment of Austrians and foreigners declined equally by 19%, but starting from different levels. The number of unemployed Austrians declined by some 51,000 to reach 217,900, that of foreigners by 26,900 to reach 113,800. The share of foreigners amongst all unemployed in Austria consequently stagnated at the previous year's level of 34%. Because foreign unemployed persons are more integrated than Austrians in trainings and further education, their share in training is higher. Between 2020 and 2021, their share increased slightly from 43% to 46%.

UNEMPLOYED AND TRAINING PARTICIPANTS

2013 – 2021 by nationality

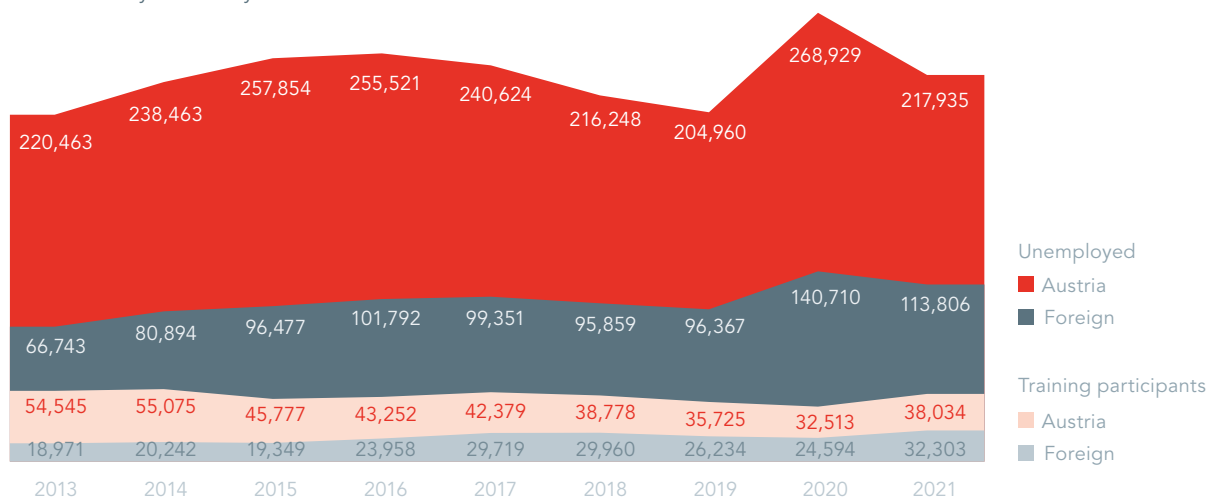


Fig. B24; Source: BMA (2022), Online labour market database AMIS; own representation

In 2021, the unemployment rate declined for all larger population groups: for men and women, immigrants and Austrians. While the unemployment rate of Austrian men was 7.2% and that of Austrian women was 6.4%, for foreign men it was 10.8% and for foreign women 13.6%. The unemployment rate of men and women who are nationals of pre-2004 EU states and states that joined the EU in 2004 was also under one tenth (men: 6.8% and 5.1%; women: 7.2% and 9.8%). The highest unemployment rate was amongst men and women with third-country citizenship (16.2% and 18.5%). However, the group of male third-country nationals witnessed the largest year-on-year decline (-4.2 percentage points).

UNEMPLOYMENT RATE

2016 – 2021 annual average by sex and nationality

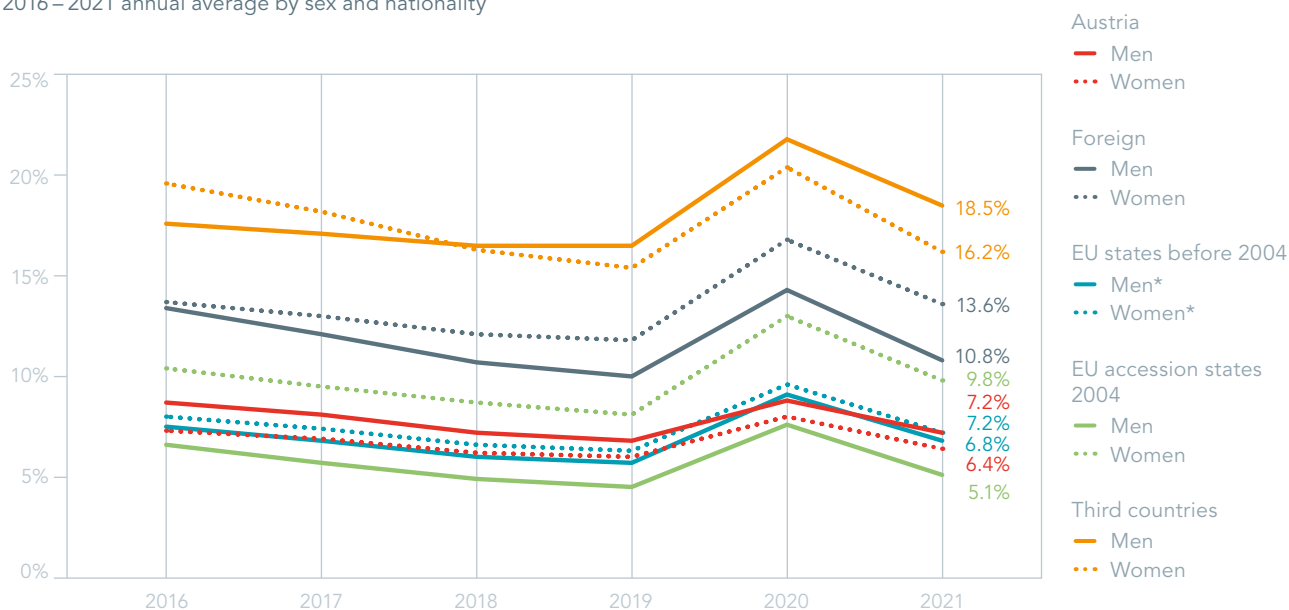


Fig. B25; * from 2020 without GB; Source: BMA (2022), Online labour market database AMIS; own representation

In the ten-year comparison, the largest changes are found among Serbian nationals and persons from the refugee countries of origin Syria, Afghanistan and Iraq. While the unemployment rate amongst Serbian nationals declined significantly in ten years (men: -14.7%; women: -21.7%), it grew significantly among Syrians (men: +14.5; women: +38.2 percentage points). This is largely due to the fact that Serbian nationals as a group have been in Austria for a long time, while the majority of nationals from refugee countries of origin only recently immigrated and are therefore still looking for stable employment. A particularly strong increase in the unemployment rate during this period was found amongst Afghan and Iraqi women (+17.1 and +20.1 percentage points, respectively), largely because they only attempted to enter the labour force following a long period of adjustment to life in Austria. In contrast, the unemployment rate amongst Afghan men declined by -4.5 percentage points, as they were registered as unemployed for a longer period and were therefore available to the labour market. Iraqi men have not come that far yet; similarly to the women, they only became capable of employment after some time; consequently, their unemployment rate increased by +3 percentage points.

UNEMPLOYMENT RATE

2011 and 2021 by sex and nationality

■ 2011
■ 2021



		Men		Women	
Syria		20.7%	35.2%	23.0%	61.2%
Russian Federation		31.6%	28.8%	23.7%	23.8%
Iraq		23.5%	26.5%	26.6%	46.7%
Serbia		41.1%	26.4%	47.5%	25.8%
Afghanistan		25.4%	20.9%	34.0%	51.1%
Turkey		11.9%	15.2%	14.1%	22.1%
Bulgaria		8.8%	15.2%	10.9%	19.0%
Croatia		17.1%	10.7%	13.5%	11.8%
Bosnia and Herzegovina		14.6%	10.4%	11.2%	11.0%
Romania		8.5%	10.3%	10.3%	14.6%
Poland		8.2%	7.8%	9.7%	11.6%
Austria		6.6%	7.2%	5.9%	6.4%
Germany		5.3%	6.3%	6.6%	6.7%

Fig. B26; Source: BMA (2022), Online labour market database AMIS; own representation

The rise in the unemployment rate of women from the main refugee countries of origin in 2015/2016 is in part a result of the attempts to enter the labour market. A first step in this direction is frequently registering as unemployed, often associated with a training or further education measure. Many of them undergo training as care workers or nursing assistants, as this field is in great demand. Consequently, the unemployment rate rises in the short term; in the medium term, however, this can result in sustainable employment possibilities.

REGISTERED UNEMPLOYED AND REGISTERED JOBSEEKERS IN TRAINING BY EDUCATION LEVEL

In most education groups, in 2021 there was a decline in the number of job seekers. Exceptions were persons entitled to subsidiary protection with higher qualifications, as well as persons entitled to asylum with compulsory schooling, who witnessed an increase in unemployment (+3% and +1%, respectively). The strongest decline was amongst persons with compulsory schooling from EFTA countries and the United Kingdom (-23%). Amongst EU citizens, the unemployment numbers in all education groups declined by more than 10%, except for persons with academic degrees (-9%). A direct comparison by place of origin found a larger decline in job seekers amongst citizens of other EU states than among third-country nationals.

Of the job seekers with only compulsory schooling, the share of third-country nationals continued to be the largest, at 70%. An important sub-group, persons entitled to subsidiary protection, were above the average with a share of 82%, while persons entitled to asylum were slightly below the average at 69%. This high share underlines the central challenges of labour policy in the context of integration.

Persons from eastern-central Europe with simple qualifications were very highly represented (55%) among unemployed EU nationals. The lowest rate was exhibited by nationals of western and southern EU states (EU14 excl. AT) as well as the EFTA countries (28% and 30%, respectively). Among the latter, the proportion of job-seeking academics was surprisingly high (EU14 excl. AT: 20% and EFTA: 24%). Job-seeking Austrians largely had simple qualifications (37%) or had completed an apprenticeship (37%). Only 7% of job-seeking Austrians in 2021 had a university degree.

UNEMPLOYED OR JOB-SEEKERS IN TRAININGS

2021 by nationality or residence status and degree of education; by categories compared to previous year

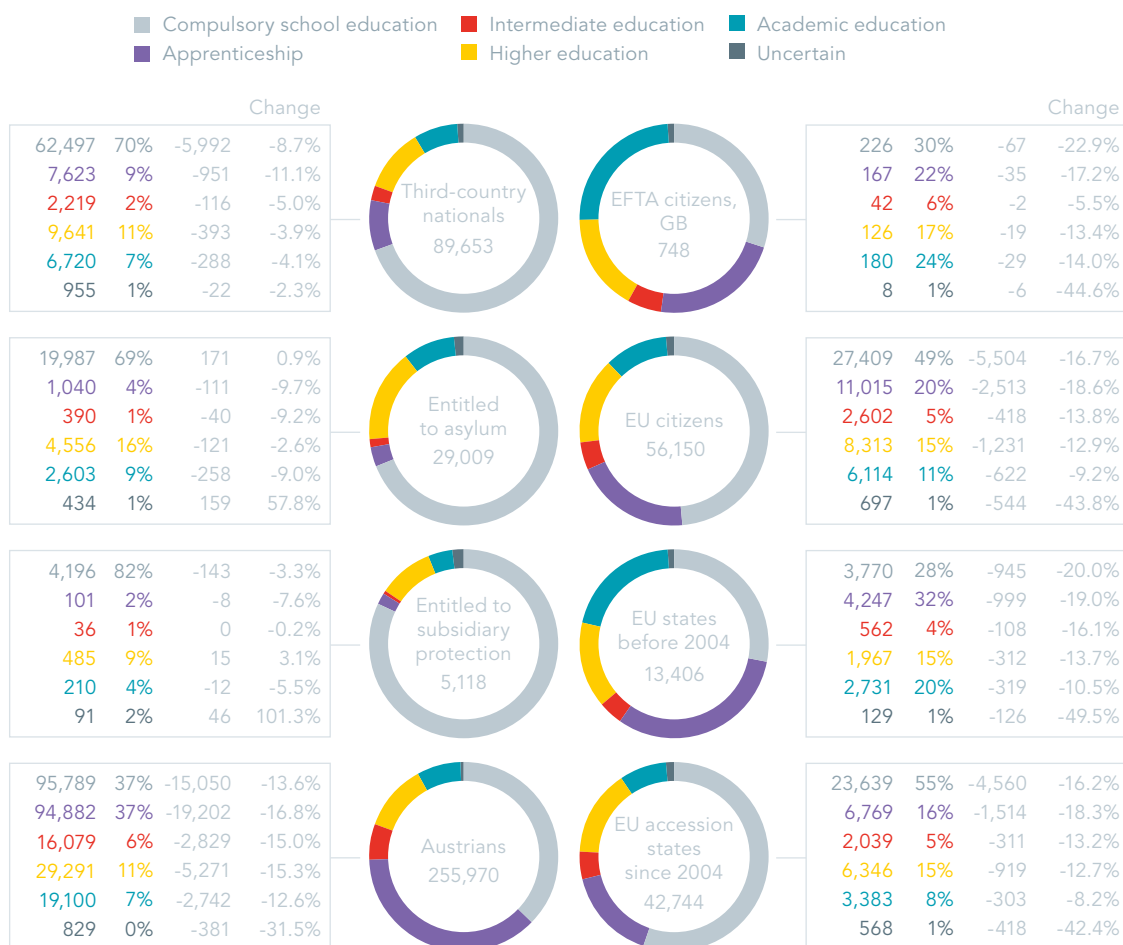


Fig. B27; Source: Integration Monitoring according to the Integration Act; own representation

LONG-TERM UNEMPLOYED

In 2021, there were 80,100 long-term unemployed in total (with a period of unemployment of one year or more); this corresponds to a quarter of all unemployed. Of these, 58,900 (74%) were Austrians, 21,100 (26%) were foreign nationals. Of the latter, 7,200 came from EU/EFTA states and the United Kingdom, another 13,900 from third countries.

Since 2015, long-term unemployment has increased by 130% (from 34,800 to 80,100 persons), but the increase in 2021 was especially large. In 2021 the number of long-term unemployed increased despite a decline in overall unemployment, namely by 18,100 (+29% compared to the previous year). All groups of origin were affected by this increase. It was strongest amongst workers from the states that acceded to the EU in 2004 and 2007 (+46% and 41%, respectively), followed by the EU states before 2004/EFTA and the United Kingdom (+40%). The increase in the number of long-term unemployed amongst third-country nationals was significantly smaller (+30%) - not least because they are subject to high employment instability and therefore are less frequently unemployed for a year or more.

LONG-TERM UNEMPLOYED

2016 – 2021 by nationality, share of all unemployed with same nationality

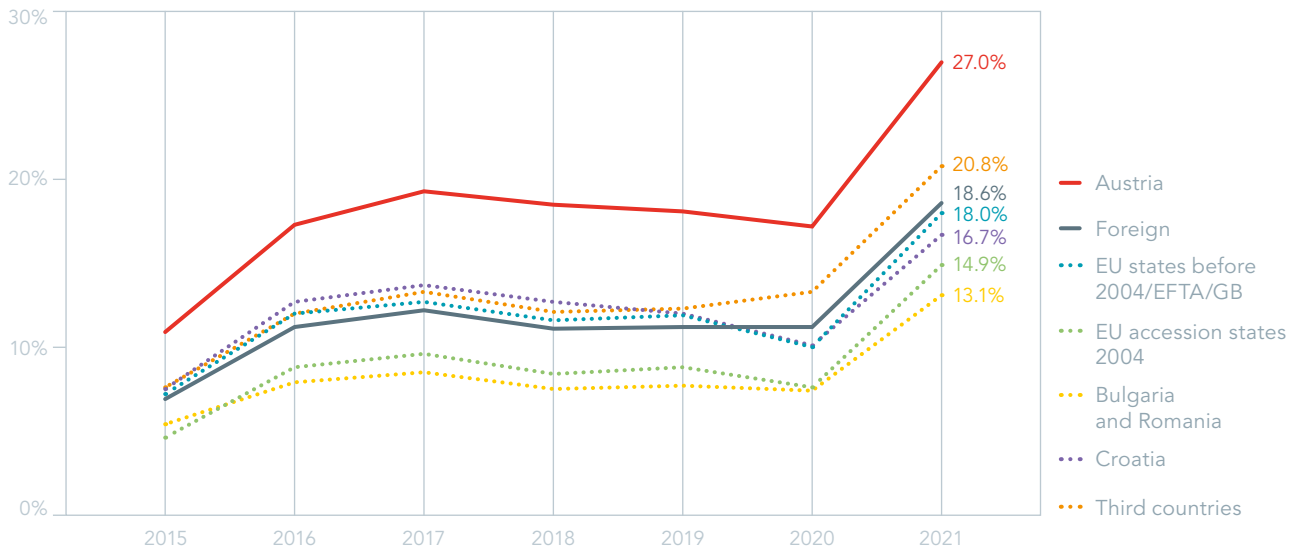


Fig. B28; Source: Public Employment Service Austria, Labour Market Research and Professional Information (2022), special assessment DWH-PST; own representation

In 2021, the share of long-term unemployed amongst the registered unemployed increased in all groups of origin. As in previous years, it was higher among Austrians than among foreigners. In 2021, 27% of all Austrian unemployed were long-term unemployed, compared to 19% of foreigners. This is due to the tense employment situation following the coronavirus pandemic, which continued in 2021. Citizens of other EU states have the smallest share of long-term unemployed. In 2021, only 13% of the unemployed citizens of the EU2 (Bulgaria and Romania) were long-term unemployed, followed by those of the EU10 with 15%, 17% of unemployed Croatians and 19% of EU14 citizens (excl. AT). Third-country nationals lay slightly above that figure at 21%. Amongst citizens of the countries of origin of the refugee cohort 2015/2016, long-term unemployment is comparatively low due to the strong fluctuation of their employment (Afghanistan: 11%; Syria: 15%). It is comparatively high, at 27%, amongst unemployed Russian citizens, most of whom have a Chechen migrant background.

The strongest increase in the share of long-term unemployed in 2021 compared to the previous year was amongst Austrians (+10 percentage points), followed by Russian citizens (+9 percentage points) and citizens of the EU14/EFTA/GB (+8 percentage points). Amongst Syrian and Afghan citizens, the increase was smaller due to the employment instability mentioned earlier (+4 percentage points each).

TRANSITION RATE FROM UNEMPLOYMENT INTO EMPLOYMENT

In 2021, the rate of transition from unemployment into employment (transition rate, measured as the share of outflows from unemployment) was 60% of all unemployed. The remainder consists of people entering retirement, emigrating, or becoming eligible for care. Generally, the transition rate is higher for men than for women. In 2021 it was lower than in the previous year, but at 63% for men and 55% for women it largely corresponded to the figures before the coronavirus pandemic.

Transition from unemployment into employment was most common in 2021 amongst persons from states that joined the EU before 2004 (65%; men: 68%; women: 61%), followed by the EFTA states including the United Kingdom. Among third-country nationals, transition from unemployment was at 45% (men: 55%; women: 32%). Among third-country nationals, the difference between the genders is extremely high, as in previous years. The difference among Afghans is particularly stark (men: 57%; women: 17%), Syrians (men: 40%; women: 15%) and Iraqis (men: 54%; women: 23%).

The largest changes from the previous year were observed among Turkish citizens (-9 percentage points) and, viewed by gender, among Afghan and Iraqi men (+9 percentage points each) as well as among Iranian women (+12 percentage points). Nonetheless, the transition rates remain below average, sometimes significantly so, amongst nationals from the refugee countries of origin of 2015/2016.

TRANSITION RATE FROM UNEMPLOYMENT TO WORKING POPULATION *

2021 by sex and nationality (comparison to previous year in percentage points)

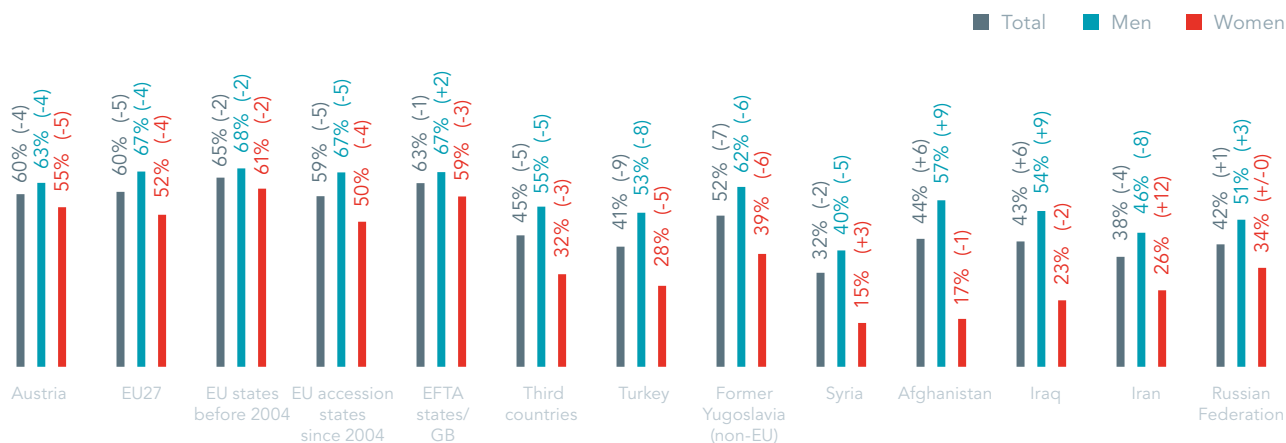


Fig. B29; * Transition rate from unemployment to employment in percent of all departures of unemployment; Source: Integration Monitoring according to Integration Act; BMA (2022), Online labour market database AMIS; own representation

EMPLOYMENT RATE OF MIGRANTS

The activity rate measures the share of the working-age population that is either non-self-employed or self-employed or is actively seeking a job. While the employment integration, measured in this way, of persons born in Austria remained relatively stable even during the coronavirus pandemic, it declined slightly among some groups of origin. 2020 witnessed a collapse in labour market participation, especially amongst third-country nationals. This is partly explained by the fact that recognized refugees and persons entitled to subsidiary protection face particular challenges when entering professional life. However, in 2021 they were better able to enter the labour market, although strong differences remain with regard to country of origin and gender.

In 2021 as in previous years, men had higher activity rates than women, whether they were born in Austria or abroad. Women born in EU states (76%) and men born in EU states (86%) on average had a higher labour market integration than women and men born in Austria (74% and 81%). In contrast, persons from third countries were less frequently available to the labour market. While the activity rate of men born in third countries (83%) was just slightly under that of men born in Austria, the difference among women born in third countries (62%) was much sharper.

EMPLOYMENT RATE

2016–2021 by sex and country of birth, 15–64-year-olds

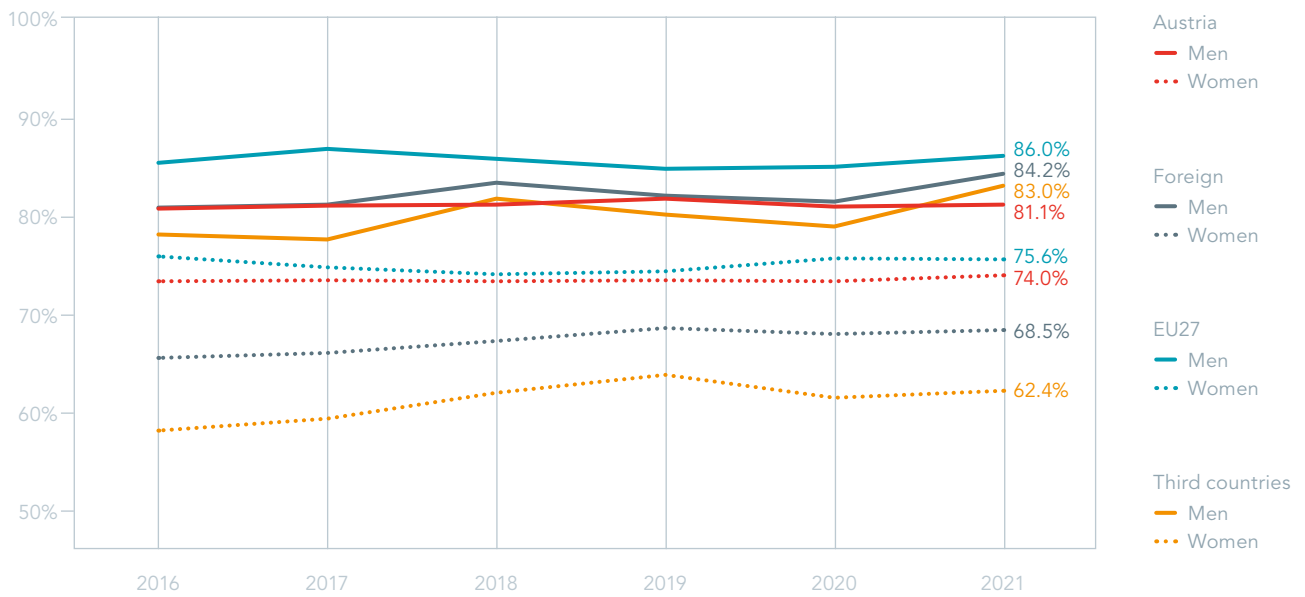


Fig. B30; Source: Eurostat (2022), activity rates by sex, age and country of birth; own representation

Social aspects

Origin and nationality influence employment, income from employment and access to social benefits. This leads to major differences in the average socio-economic situation of immigrants (1st generation), persons born in Austria with a migrant background (2nd generation) and Austrians without a migrant background. On average, the latter have the highest employment income, but also receive higher social benefits - especially old-age and widower pensions. In contrast, immigrants on average have lower employment and pension income and are so at greater risk of poverty. This holds especially for persons from EU states in eastern central and south-eastern Europe as well as for immigrants from third countries.

EMPLOYMENT INCOME AND SOCIAL BENEFITS

Socio-economic differences by origin have several causes.

- » On the one hand, adult Austrians without a migrant background as well as immigrants from western European EU states are employed in better-paid sectors and positions than immigrants from other parts of the world. This is due to their better qualifications and more constant career progression, but also with access to stable and better-paid segments of the labour market, which due to legal provisions or common recruiting practice are especially accessible to Austrians (and particularly well-educated foreign nationals, mainly from western Europe).
- » On the other hand, immigrants (with the exception of those from western Europe) on average have a lower activity rate (in the formal sector of the labour market) and a higher unemployment rate. This has several reasons: a lower level of education on average (including high rates of drop-outs, particularly among men with a migrant background), insufficient German skills, partially culturally anchored prejudices against women working outside the home, a higher number of children per woman, as well as employment relations in informal sectors.

- » Austria has a wide range of monetary social benefits. The main social benefits to secure livelihood include: on the one hand, the financial benefits of health insurance and social security, particularly old-age and widower pensions, unemployment benefits, sick pay and maternity benefits; on the other hand, benefits from the family burden equalisation fund, in particular family allowance, parental leave and child-care allowance. There are also benefits provided by the federal provinces, in particular nursing allowance, housing benefits, heating allowances and social assistance. Direct payments from the EU's agriculture subsidies also support income. Various tax benefits (e.g. family bonus, sole earner deductions, kilometre allowance) and benefits in kind (e.g. subsidised housing, largely free healthcare funded by health insurance) have an indirect effect.
- » The benefits above have different distribution effects.
- » Old-age and widower pensions, agricultural subsidies, housing construction subsidies and nursing allowances mainly benefit Austrians without a migrant background. During the pandemic, Covid-19 subsidies to the self-employed and short-time work allowance overwhelmingly benefitted Austrian workers, even though foreign workers were proportionately more affected by short-time work.⁷²
- » Due to the age structure and higher average number of children, people with a migrant background benefit disproportionately from family and child allowances.⁷³ In contrast, social assistance (a subsidiary social benefit provided by the federal provinces) disproportionately benefits immigrants and their children.
- » The only social benefit whose target group exclusively consists of immigrants is the provision of basic welfare support to refugees. It is paid exclusively to foreigners in need of help and protection, namely asylum applicants and persons entitled to subsidiary protection and asylum⁷⁴, war refugees/displaced persons with a temporary right to residence⁷⁵ and temporarily tolerated persons without sufficient resources. However, this target group includes only a small minority of all persons born abroad.

72 There are two reasons for this: (a) Covid-19 allowances to the self-employed are based on turnover, so that the comparatively higher share of self-employment amongst adults with a migrant background did not translate into a higher transfer volume. (b) Non-self-employed persons with a migrant background were and are more represented in sectors that were not closed down even during successive lockdowns (e.g. healthcare, food industry, cleaning services, home and institutional nursing); nonetheless, foreign workers were proportionally more frequently in short-time work; see Expert Council for Integration (2021), *Integration Report 2021*, p. 49 and Figure B22 on short-time work in this chapter on the labour market.

73 While in 2020 the fertility rate of Austrian women was 1.35 children per woman, it was 1.76 children per woman for foreign women. The number of children was above the overall average amongst Syrians (3.44), Kosovans (2.78) and Afghans (2.44).

74 Up to 4 months after recognition of status; Austrian Integration Fund (2022), *Frauen. Zahlen, Daten, Fakten*.

75 Refers to Ukrainian citizens who arrived in Austria from 24 February 2022.

INCOME AND RISK OF POVERTY

The median available household income (weighted by household structure) for Austrians was € 29,700 in 2021 (+4% from 2020), while that of citizens of other EU states was € 22,500 (+2% from 2020) and that of third-country nationals was only € 19,100 (+5% from 2020). The gap between the households of Austrian nationals and the households of other EU nationals was 32% - in 2019, before the pandemic, it was just 26%. The gap between the households of Austrian nationals and third-country nationals grew even larger. While before the pandemic it was slightly over 45% (2019), the difference in 2021 was 55%.

EQUIVALISED AVAILABLE MEDIAN ANNUAL INCOME

2017 – 2021, 18- to 65-year-olds by nationality

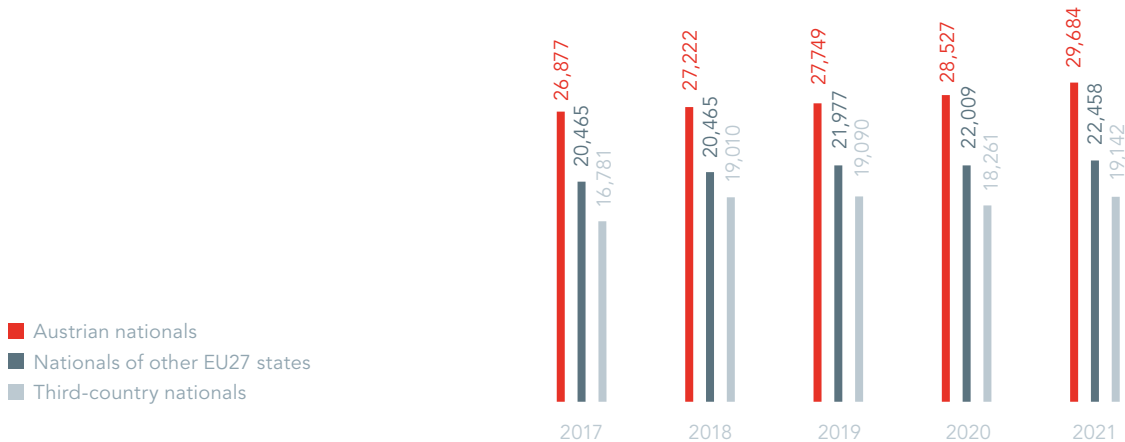


Fig. B31; In the weighting, the first adult in the household counts as 1.0, each additional adult and adolescent over the age of 14 as 0.5, and children under 14 as 0.3; Source: Eurostat (2022), Mean and median income by broad group of citizenship (population aged 18 and over) in Euro; own representation

Over ten years, the difference between the median household income of Austrians and that of other EU nationals increased by 8 percentage points (2012: 24% difference, 2021: 32% difference), while the difference between the median household income of Austrians and that of third-country nationals increased by 15 percentage points (2012: 40% difference, 2021: 55%). The EU comparison shows that this difference in income is particularly marked in Austria. The causes of these relatively large differences in income are a lower level of education (especially amongst third-country nationals), a lower average employment income due in part to the lower average level of education, and a lower scope of employment (not least due to the high proportion of sole earners with an above-average number of children).⁷⁶

⁷⁶ Biffi, Gudrun (2008), *Verteilung der Haushaltseinkommen aus einer Gender-Perspektive*.

In 2021, looking only at employment income, pensions and some subsidies,⁷⁷ some 2.31 million people were at risk of poverty.⁷⁸ This represents around a quarter of Austria's population. The various social benefits⁷⁹ diminish this number by almost exactly 1 million to 1.29 million persons, 15% of the adult population. Overall, after various social benefits, the risk of poverty is reduced by 44%. For Austrian citizens, the risk of poverty, taking into account employment income, pensions, short-time work allowance and Covid-19 subsidies, was at 20%, a figure that is cut in half by various other social benefits to reach 11%. For naturalised persons (outside EU/EFTA), the risk of poverty was around twice as high: without social benefits, it was around 38%; after various welfare benefits it was almost halved to 22%. Citizens of EU/EFTA states including GB were similarly at risk of poverty: without social benefits, 44%; after various social benefits, still 22%. For third-country nationals, the risk of poverty was much higher. Considering employment income and pensions, a little over two thirds (69%) of all adults were at risk of poverty, a figure that dropped to a still significant 46% after various social benefits are included. While the risk of poverty is halved amongst the other groups through social benefits, it is only diminished by a third amongst third-country nationals.

In 2021, various social benefits⁸⁰ again represented a high proportion of the equivalised income for persons with a low income (43%). For persons with a medium income, this figure was 13%, while it was just 4% for persons with a high income. The proportion of various social benefits in the equivalised income differed quite clearly depending on nationality. While such transfer payments made up 12% of total income for Austrian citizens (with and without a migrant background), they represented 16% for nationals of EU/EFTA states including GB and 29% for third-country nationals.⁸¹ It should be noted that in 2019 – so before the start of the measures to counter the coronavirus – some two thirds of the nationals of other EU states at risk of poverty, and half of the third-country nationals at risk of poverty (to differing extents), were gainfully employed or lived with a gainfully employed partner. This is a clear indication that a significant share of the immigrant population receives income from employment that is barely sufficient to cover the cost of living.

In 2021 the percentage of adults at risk of poverty hardly increased from the previous year (+0.6 percentage points). One major factor for this was the government benefits (particularly Covid-19 subsidies for companies and the self-employed as well as short-time work allowance), which were an additional stabilising factor for household income, particularly for the Austrian population. These government benefits thus reduced the risk of poverty in light of the possible negative effects of lockdowns, travel restrictions and supply chain problems. People who were on short-time work in 2020 had a similarly below-average risk of poverty (8%) as people who were employed for the full year (without short-time work) (7%).⁸²

77 Short-time work allowance, agricultural subsidies etc.

78 Persons are considered to be at risk of poverty if their equivalised net household income lies below the poverty risk threshold of 60% of the median. For 2021, the median equivalised net household income is 27,428 euros per year. The poverty risk threshold in 2021 was therefore 16,457 euros for a single-person household, or 1,371 euros per month (times twelve). For multi-person households the threshold increases based on the weighted number and age of the household members; Statistik Austria (2022), *Armut und soziale Eingliederung*, pp. 6–8.

79 Excluding pensions, agricultural subsidies, Covid-19 subsidies and short-time work allowance, which are considered equivalent to employment income.

80 Excluding pensions, agricultural subsidies, Covid-19 subsidies and short-time work allowance.

81 Statistik Austria (2022), *Tabellenband EU-SILC 2021*, p. 45.

82 Statistik Austria (2022), *COVID-19-Pandemie vergrößert Anteil der Personen in Erwerbslosenhaushalten*.

For children and adolescents (represented in the household-based view in Fig. B32), data is only available on the place of birth (in Austria/abroad). After considering social benefits payments to the households in which these children live, one finds that children and adolescents born abroad are at significantly greater risk of poverty (36%) than their coevals born in Austria (7%).

RISK OF POVERTY

2021 by nationality

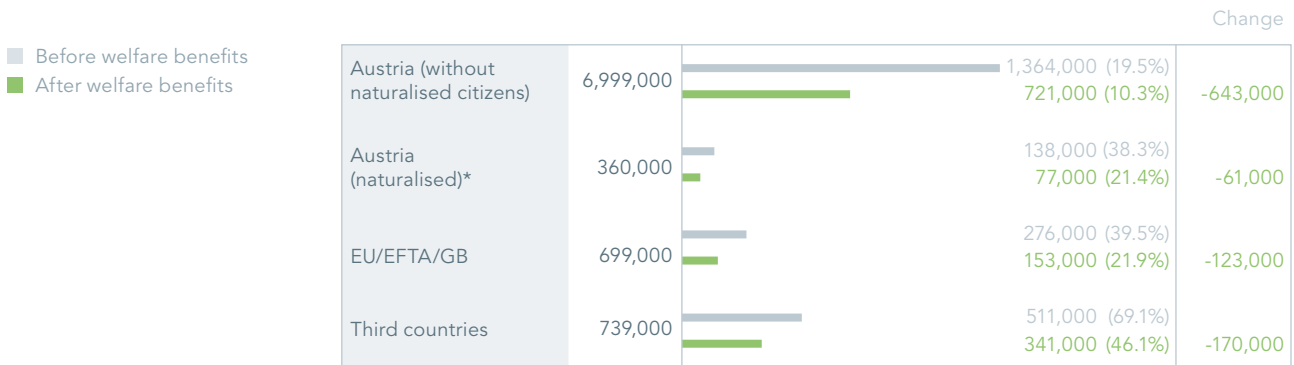


Fig. B32; * without naturalisations from EU/EFTA/GB; Source: Statistik Austria (2022), Risk of poverty before and after welfare benefits by socio-demographic characteristics; own representation

When children with a migrant background grow up in households that are at risk of poverty, this may negatively affect their educational and integration success (see chapter B: Education). In such households, children and adolescents generally have less space and don't have a room of their own. They less frequently have access to laptops, PCs and tablets or to fast Internet. They may not be able to participate in some scholastic activities (e.g. school ski classes, theatre trips). Paid afternoon child care, tutoring and paying learning and information media may not be affordable.

RISK OF POVERTY AMONG CHILDREN AND ADOLESCENTS

2016 – 2020, by parents' country of birth

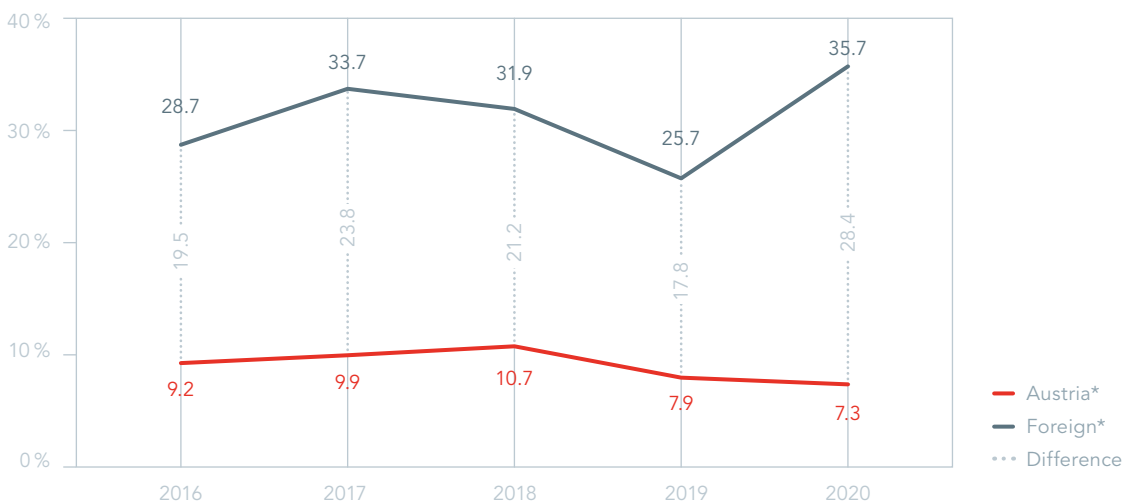


Fig. B33; * Rate by welfare benefits in %; Source: Eurostat (2022), Rate of children at risk of poverty by parents' country of birth (persons aged 0 to 17); own representation

SOCIAL ASSISTANCE AND MINIMUM BENEFITS

Overall, social assistance, with payments of some 960 million euros, only plays a minor role compared to pensions, short-time work allowance or family allowances. The annual sum of social assistance recipients⁸³ in Austria decreased in 2021 by some 9% compared to 2020, down to 259,800 persons (-24,600). Depending on the federal province, foreign nationals represented between 45% and 61% of social assistance recipients; this rate is significantly above their share in the overall population (2022: 18%).

SOCIAL ASSISTANCE RECIPIENTS

2021 by federal province, compared to 2020 in abs. numbers*

- Austrian nationals
- Nationals of EU, EFTA, GB and assoc. small states
- Entitled to asylum or subsidiary protection
- Other third-country nationals (incl. stateless and unknown)

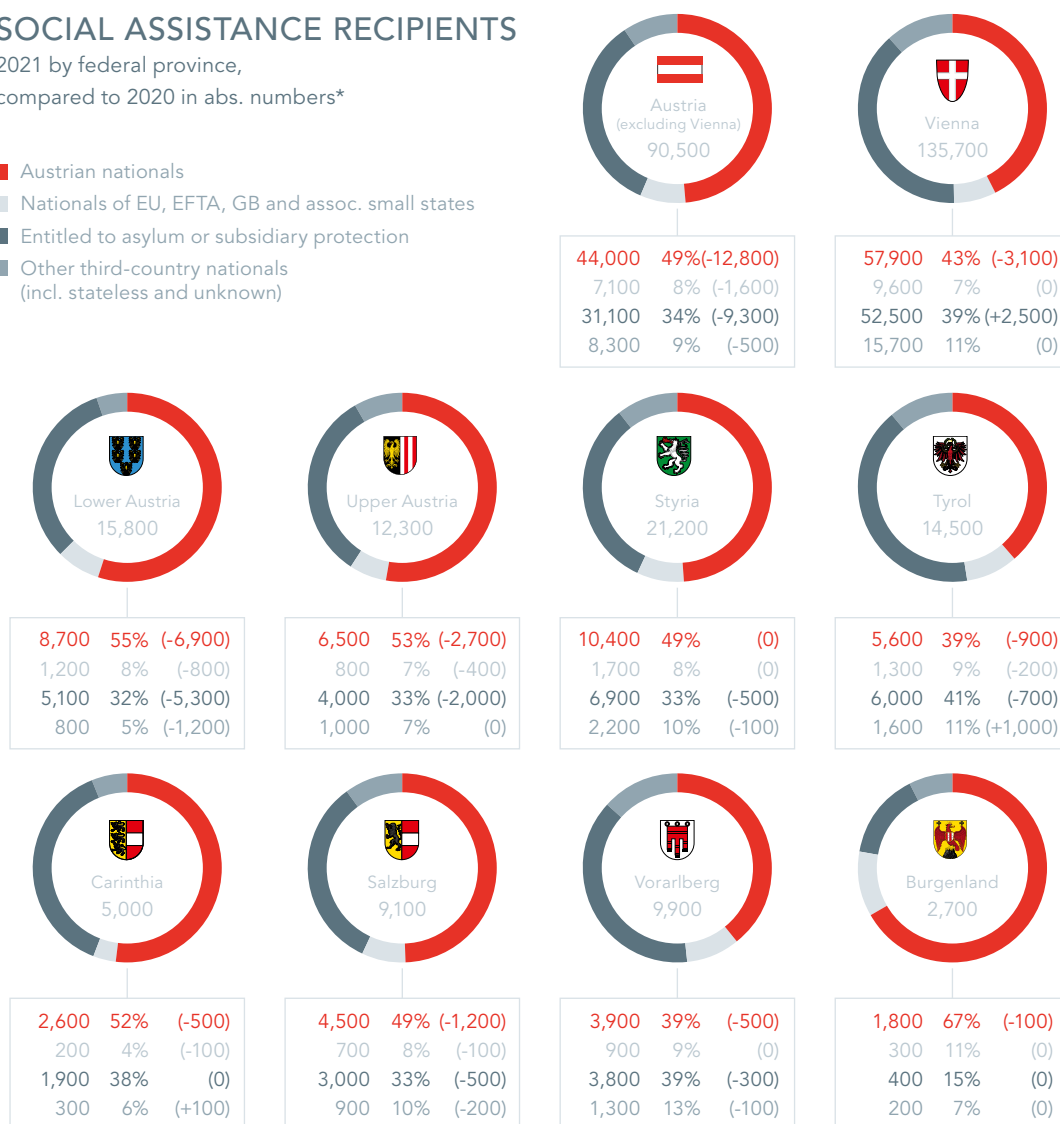


Fig. B34; * Vienna based on annual averages, other federal provinces on annual totals; Source: Data of the federal provinces collected in the course of the Integration Monitoring according to the Integration Act; own representation

In 2022 as in 2021, the highest shares were in Tyrol and Vorarlberg (61% each). These two federal provinces also have the highest proportion of persons entitled to asylum and subsidiary protection among social assistance recipients (Tyrol: 41%, Vorarlberg: 39%). In Vienna, the share of persons entitled to asylum and subsidiary protection among recipients of minimum benefits was also 39%. The share of

83 In the following, the term "social assistance recipient" includes persons who receive minimum benefits based on provincial laws and those who receive social assistance based on social assistance implementation laws.

foreign social assistance recipients in Vienna was 57%. Burgenland had the lowest share of foreign social assistance recipients at 33%. Half of these (15%) were persons entitled to asylum and subsidiary protection. In the remaining federal provinces, the share of foreign social assistance recipients was between 45% and 61%. The share of recognized refugees and persons entitled to subsidiary protection who received social assistance lay between 32% and 41%. With the exception of Burgenland, between one third and two fifths of all social assistance therefore flow to refugees and persons entitled to subsidiary protection.

The number of recipients was highest amongst Syrian nationals in all federal provinces, followed by Afghan nationals - the exceptions were Vorarlberg and Burgenland, where nationals of the Russian Federation (almost all from Chechnya) and Hungarian nationals, respectively, came in second place.

In relation to the total population of the respective federal province, in 2021 as in 2020 the percentage of recipients was highest in Vienna (8.8%), followed by Vorarlberg (2.5%) and Tyrol (1.9%) The population of Upper Austria resorted least frequently to social assistance (0.8%). However, a comparison between federal provinces is only possible to an extent, because there are differences in how the provinces account for the benefits and what they disburse.⁸⁴

As Vienna records the annual average of beneficiaries, it is possible to calculate beneficiary rates for the federal capital⁸⁵ In 2021, on average 7% of the population of Vienna received minimum benefits (social assistance or heating allowance). The figure for the population with Austrian citizenship was 4%. Beneficiary rates were high among nationals from refugee countries of origin, who mostly have only lived in Austria for a few months or years: Syrians (79%), Somalis (72%), Afghans (60%) and Iraqis (54%). Nationals of Bosnia-Herzegovina, Kosovo, Montenegro, North Macedonia and Serbia on the other hand were below the average, at 6%.

RATE OF SOCIAL ASSISTANCE RECIPIENTS IN VIENNA

2021 by nationality

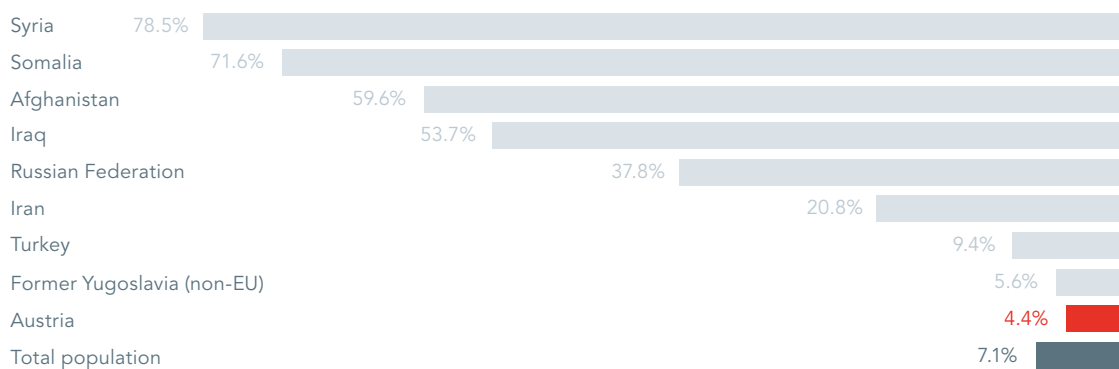


Fig. B35; Source: Data of the federal provinces collected in the course of the Integration Monitoring according to the Integration Act; own representation

⁸⁴ Vienna records annual averages, while the other federal provinces record annual totals, which also include people who receive benefits only for a very short time. In addition, heating allowances are registered as minimum benefits/social assistance in Vienna but are separate in other federal provinces.

⁸⁵ Annual average of minimum benefits recipients in relation to annual average of population of same citizenship.

Social assistance and minimum benefits are subsidiary benefits that mainly benefit persons who have no claim to social security benefits like unemployment benefits, pension, Covid-19 subsidies or short-time work allowance. This explains the high share of beneficiaries in the foreign population with an asylum background. Many no longer receive basic welfare support to refugees but are not yet (sufficiently) integrated in the workforce. It should further be considered that the beneficiaries also include persons who cannot be gainfully employed, mostly children under 14, as well as workers with very low income (persons receiving benefits to compensate their very low income).

FOCUS ON UKRAINE

C

Focus on Ukraine

The Russian attack on Ukraine on 24 February 2022 and the ensuing war resulted in many people having to leave their residence in Ukraine and seek shelter elsewhere in the country or abroad.⁸⁶ Many of the people who fled Ukraine due to the war and the resulting danger to life and limb as well as the destruction of the infrastructure and of personal belongings⁸⁷ were received by neighbouring and other states. Austria also received people from Ukraine and provides them with protection. By mid-June 2022, 72,000 displaced persons from Ukraine were registered in Austria. This represents some 1.4% of all refugees from Ukraine registered in Europe (as of 21/06/2022: 5.25 million).⁸⁸ However, one can assume that a small number of already registered persons has travelled further or returned to Ukraine in the meantime. As long as the war continues, it should be expected that people will continue to leave Ukraine seeking shelter, including in Austria.

The Ukrainian community in Austria before the war

Compared to countries like Poland, Germany, Italy, Czechia and Spain, which have large Ukrainian communities, before the war a comparatively small, but constantly growing, Ukrainian community lived in Austria. At the start of 2022, 16,500 persons born in the Ukraine and some 12,700 Ukrainian citizens lived in Austria - compared to 8,100 persons born in Ukraine and 6,200 Ukrainian nationals at the start of 2012. Two thirds of the Ukrainian citizens in Austria were women (as of 01/01/2022) and on average quite young - 32% were below the age of 24, 64% were 25 to 64 years old, and only 3% were above the age of 64. The large majority of Ukrainians present in Austria at the start of the year (57%) lived in Vienna.⁸⁹

On an annual average, in 2021 some 600 Ukrainian citizens were unemployed, another 200 were in training. Their unemployment rate was 9% (compared to 8% in the overall population). In 2021, Ukrainian women had a higher unemployment rate (11%) than Ukrainian men (7%).⁹⁰ In the school year 2020/2021, around 1,500 Ukrainian pupils attended school in Austria, while 74 attended a German support class (two thirds in primary school). In the summer semester 2021, just over 2,000 Ukrainian citizens studied at public universities.⁹¹

86 On 13/05/2022, the Expert Council for Integration published a position paper on the integration of refugees from Ukraine. This publication was updated and included in the Integration Report 2022; Expert Council for Integration (2022), Vertriebene aus der Ukraine. Perspektiven in Österreich.

87 On the terminology (refugees/displaced persons) see Note 1 in chapter B.

88 UNHCR (2022), Operational Data Portal Ukraine Refugee Situation.

89 Statistik Austria (2022), Bevölkerung nach detaillierter Staatsangehörigkeit und Bundesland. For more information see also Austrian Integration Fund (2022), Ukrainische Bevölkerung in Österreich.

90 BMA (2022), Online-Arbeitsmarktinformationssystem AMIS.

91 Statistik Austria (2022), Bildungsstatistik.



The immigration of people from Ukraine since late February 2022 is different in several ways from the refugee movement into Austria and other European countries in 2015/2016. However, it is also similar in some ways. Ukrainians are fleeing a war occurring in Austria's direct vicinity. Similarly to the refugees from the war in Syria, many Ukrainians fled within their own country or to neighbouring states with the hope of returning home as quickly as possible. However, the flight of the displaced persons from Ukraine took them to Austria not through several safe states or third countries, but through at most three.

Like other European countries, Austria is providing neighbourly assistance to Ukraine – which was already in a strategic partnership with the EU in the framework of the EU's neighbourhood policy⁹². Additionally, as there is no visa requirement Ukrainians can enter the Schengen area legally and choose which state to reside in.

Already on 4 March 2022, the interior ministers and justice ministers of the EU states agreed in the Council of the European Union that people fleeing Ukraine due to the war were to receive immediate and collective temporary protection without having to undergo an asylum procedure. This emergency mechanism, prescribed in the Temporary Protection Directive,⁹³ grants affected persons a temporary right of residence in EU states for one year, with the possibility of extension. The right of residence is documented with an "ID for displaced persons" (= Blue Card). After registration with the police, the Blue Card is sent by mail. The Blue Card gives displaced persons access to the Austrian labour market without prior labour market assessment, to public health insurance and to the education system. This creates very different legal conditions than during the refugee movement in 2015/2016. The legal status of displaced persons granted to people fleeing Ukraine differs both from that of recognized refugees and from that of persons entitled to subsidiary protection with regard to residence, access to the labour market and social support.

⁹² European Parliament (2021), *European Neighbourhood Policy*.

⁹³ EUR-Lex (2022), *Council Directive 2001/55/EC of 20 July 2001*.

There are also differences in the demographic composition between the groups of persons who fled to Austria. Since February 2022, it is mostly women, children and older men arriving from Ukraine to Austria and other EU states. Ukrainian men up to the age of 60 may generally not leave Ukraine as they are obligated to provide military defence. In contrast, in 2015/2016 the arrivals at first were mostly male adolescents and young men.⁹⁴ The reunification of women and children only began in 2016 and increased in 2017. With regard to the current refugee movement, it is unclear if and to what extent there will be a subsequent family reunification of men with the Ukrainian refugees who stay in Austria.

In the current situation, it is difficult to estimate whether and when the refugees from Ukraine will have the possibility to return. Many of them express the desire to return as quickly as possible.⁹⁵ This desire is also reflected in the reports that many displaced persons who had found temporary shelter in Austria and other EU countries have already returned to Ukraine, even if only temporarily (as of 21/06/2022: 2.8 million border crossings into Ukraine since 24/02/2022). However, experience of past refugee flows also shows that as the length of stay in the host country increases, the number of people who actually return to their country of origin decreases. In the case of Ukraine, the desire to return and the actual possibilities of doing so will also depend on how long the war continues, how severe the destruction in the country will be, what the political situation will be like, what areas remain occupied by Russia in the longer term and whether circumstances actually allow those desiring to return to resume their normal lives. The wish to return clearly expressed by many Ukrainians currently living in Austria should definitely be taken seriously. Measures to support the displaced should therefore consider several possible scenarios: some will certainly wish to return to Ukraine as quickly as possible, while others, for various reasons, and at different times, will decide to remain in Austria. For both groups, collaboration between Austrian and Ukrainian authorities is advisable to organise supporting measures and if necessary enable people to return.

This situation poses a particular challenge for Austria's integration policy: on the one hand, measures to promote integration should be implemented as early as possible; on the other, these measures should not hinder the opportunities of individuals to return. In many regards, the experience gained from dealing with the refugee movement in 2015/2016 can be drawn on to design the integration policy. The persons displaced from Ukraine are being received by well-established structures, such as language courses and varied advisory offerings, that ease their arrival in Austria.

Initial reception, accommodation, securing essential needs: even if many of the refugees who have arrived in Austria since February 2022 belong to the Ukrainian middle class and have some financial resources (or had some before the war), due to the war they frequently were and are dependent on social benefits or volunteer support from civil society, especially in the early stages.

Since displaced persons, unlike persons entitled to asylum, do not have access to the much higher social assistance, the raising of the allowances for basic welfare support to refugees announced in early June 2022 is a welcome development.⁹⁶ Of the Ukrainians registered in Austria, some 55,000 were basic welfare recipients in June 2022. Conversely, this means that many displaced persons are still surviving without government assistance, are staying with friends or acquaintances and/or have sufficient resources of their own. In the past, reports have noted that the

⁹⁴ While in 2015/2016 only 26% of adult asylum seekers were women, the percentage amongst displaced persons from Ukraine is 83% (Source: Eurostat and Federal Ministry of the Interior).

⁹⁵ See e.g. Razumkov Centre (2022), *Ukrainian Refugees: Attitudes and Assessments*.

⁹⁶ BMI (2022), *Karner zur Grundversorgung: Erhöhte Kostensätze werden umgesetzt*.

disbursement of assistance is frequently delayed due to bureaucratic hurdles. Since then, the procedural problems have been overcome, ensuring that access to basic welfare support to refugees is assured.

Access to healthcare for persons from Ukraine seeking protection has been ensured through integration into the health insurance system, implemented in short order by the Austrian health insurance in collaboration with the federal government. The principle of benefits in kind grants the people seeking protection the right to the same level of healthcare as any person living in Austria with valid health insurance.⁹⁷

The existing integration structures need, or needed, to be adjusted to the new target group of displaced persons. In light of the expected higher average level of qualifications of the displaced persons and of other factors that facilitate their integration process, existing measures have to be tailored and adapted. In this regard, the Expert Council for Integration welcomes the establishment of the (Mobile) ServicePoints, at which displaced persons from Ukraine can obtain information in one place and in their language about integration offerings like German courses, the labour market and the education system.

Following a phase of establishment and initial integrations steps, it is necessary to obtain additional information on the target group and its needs. Research projects being undertaken to study the situation of persons fleeing from Ukraine to Austria (intention of remaining, progress in German language acquisition, challenges in the labour market, in the education system and in everyday life) are therefore welcomed. Building on the findings, existing measures can then be assessed and adjusted and new, targeted measures can be developed.

INTEGRATION INTO THE LABOUR MARKET

Due to their status as displaced persons, Ukrainians have the possibility of rapidly entering employment in Austria. Many of the arrivals have a level of education or qualifications that are in demand in the Austrian labour market, for instance in IT or other MINT subjects or in the care sector. Many Ukrainians have a pedagogical training, and so they can rapidly be used as assistant teaching staff for Ukrainian pupils. At 82% per school year (2018), the ratio of university students in Ukraine is high. The enduring influence of the Soviet education system means that MINT subjects are traditionally strongly represented, including among women.⁹⁸

⁹⁷ ÖGK (2022), *Ukrainische Flüchtlinge – Krankenversicherung*.

⁹⁸ Deutscher Akademischer Austauschdienst (2021), *Ukraine, Daten & Analysen zum Hochschul- und Wissenschaftsstandort 2021*, pp. 10 and 24–25.

With the ID card for displaced persons (Blue Card), Ukrainians are granted access to the labour market; employers require an employment permit, but no labour market review is carried out. Bureaucratic requirements must be kept low and the necessary administrative procedures should be quick.

To ensure successful integration into the labour market, competence checks should be carried out as quickly as possible to determine the qualifications of potential employees. Educational and professional degrees should be rapidly recognised, while acknowledging the differences in the education systems. The Expert Council for Integration also proposes that possibilities for recognition should also be foreseen in cases where original documents cannot be submitted due to the circumstances of a person's flight, and it accordingly welcomes the amendment of the Austrian Recognition and Evaluation Act (AuBG).⁹⁹

Many of the displaced persons from Ukraine have some knowledge of English, some also of German. But for many others, learning at least basic German is necessary for successful integration into the labour market. The Austrian Integration Fund has created the possibility for course providers to offer up to 35,000 additional places in German courses as required. The large majority of supported German course projects offer childcare options. Care should be taken to ensure that the number of places in language courses is increased according to need, and that they are available in those parts of Austria where the displaced persons live. Qualified and highly qualified persons from Ukraine require intensive language courses, as otherwise they can only rarely make their skills available to the Austrian labour market. The Expert Council for Integration therefore proposes offering more intensive and job-specific language courses along the lines of the existing subject-specific language courses offered by the Austrian Integration Fund in collaboration with the Vienna Chamber of Commerce. It is commendable that the Austrian Integration Fund offers evening classes to enable people who have already found a job to (further) learn German and so increase their chances of professional development. Furthermore, in May online German courses were initiated, managed by German language institutes and language learning centres in Ukraine. The courses were specifically designed as entry-level German acquisition courses for Ukrainian refugees in Austria.¹⁰⁰

Austrian companies have expressed a strong interest in and readiness to employ displaced persons from Ukraine. However, it is unclear how willing they will be to invest in training and further development given the Ukrainians' temporary residence titles. It should also be considered that there is currently no direct transition from the status of displaced person into a regular migration category. The Public Employment Service, as the central mediation office, helps displaced persons from Ukraine find suitable employment with over 3,800 job offers on its job platform (as of mid-June 2022). Companies have the option to note in their job postings whether these are (also) directed at displaced persons. The search function allows filtering for such offers.¹⁰¹ In addition, private initiatives have set up several online platforms with job offers specifically for displaced persons from Ukraine.¹⁰² By mid-June 2022, some 6,700 displaced Ukrainians had entered employment – especially in the hospitality sector, in commerce and in agricultural and gardening positions. In OECD countries with solid data, around one tenth of displaced persons were in employment by early June. In those countries too, women occupied more low-skilled positions.¹⁰³

99 RIS (2022), *Bundesrecht konsolidiert: Anerkennungs- und Bewertungsgesetz § 8*.

100 More details at <https://www.integrationsfonds.at/newsbeitrag/oeif-schafft-zusaetzliche-online-deutschkurse-fuer-ukraenerinnen-mit-den-universitaeten-lemberg-drohobych-und-uschhorod-13448/>.

101 AMS (2022), *Labour Market in Austria for refugees from Ukraine*.

102 See e.g. <https://www.jobs-for-ukraine.at/>, <https://austrianjobs-for-ukraine.at/>, <https://www.ukrainejobs.at/>.

103 Liebig, Thomas (2022), *Geschlechtsspezifische Aspekte der Flüchtlingsintegration: Fokus Ukraine*, p. 4.

With regard to the demographic structure of the group of displaced persons from Ukraine, it is especially important that provided German language courses and other measures supporting labour market integration provide childcare, as this is the only way to ensure that female displaced persons, who usually do not have in-family childcare options, can participate. The online offerings developed during the pandemic were used as a flexible means to begin German language training and satisfy the need for language courses, which could not be covered by in-persons courses in the short term.

Although many of the displaced Ukrainians have good qualifications for the labour market, further qualification for the specific requirements of the Austrian labour market may be necessary. The Public Employment Service provides corresponding offerings; these may have to be adjusted to this specific target group. In light of the large size of the population of Ukrainians in Austria, which is likely to grow further given the current situation in their country of origin, the Expert Council for Integration recommends increasing the training of qualified staff especially in the areas of language training, interpreting, social work and (trauma) pedagogy and in general in shortage occupations.

The process of labour market integration should not lose sight of the possible return of the displaced persons. It should be considered that Ukrainians benefit from qualification measures whether they remain in Austria and work here or return to Ukraine and participate in the country's reconstruction. Measures that consider circular migration appear to offer much promise. Displaced Ukrainians could for instance take up apprenticeship occupations or complete traineeships in Austrian companies that would be of use in the eventual reconstruction of their country of origin, should they return. The interests of Austrian companies should also be kept in mind: possible collaboration models with Ukrainian companies could be beneficial for both parties. Regarding the refugees who are considering remaining in Austria for a longer period, it is important that they find employment consistent with their level of education.

However, it should also be considered that not all displaced persons from Ukraine are immediately available to the labour market. In addition to having to care for children, elderly or sick persons, their psychological state as a result of war and flight may not allow immediate entry into employment. These people should be provided adequate social support in line with EU provisions.

INTEGRATION INTO THE EDUCATION SYSTEM

The displaced Ukrainians include a large number of children and adolescents (36% as of mid-June 2022). To empower them to live their lives independently in the future, it is necessary to integrate them as quickly as possible into Austria's kindergarten, school and higher education system. By mid-June 2022, some 11,000 Ukrainian refugees were in the Austrian school system. The introduction, at least temporarily, of German support classes is one means of enabling pupils to attend regular classes as soon as possible by acquiring German language skills. The aim is the rapid integration of children and adolescents into regular classes. Besides integrating them into classes held in German, an integration that considers both the possibility of return to Ukraine and the possibility of remaining in Austria should also include elements in the Ukrainian language, provided for instance by Ukrainian assistant teaching staff.

The circumstances of the pandemic represented a severe challenge to the entire Austrian education system over the past years and required many sacrifices from teachers and students alike. With staffing also being low, taking on a large number of displaced persons in school classes is an additional burden. A higher number of school registrations by Ukrainians is expected this autumn. For all these reasons, it seems advisable to integrate the Ukrainian teachers and educators displaced in Austria alongside Ukrainian-speaking and, if necessary, Russian-speaking teaching staff that are already established in Austria. Existing online offerings in Ukraine could be a useful addition in this regard. The Federal Ministry of Education, Science and Research has established an online platform to support refugee families and students as well as educators.¹⁰⁴

The Expert Council for Integration also recommends drawing on the pool of displaced childcare professionals for kindergarten education; together with the staff already working in pre-school institutions, they could participate in the integration of Ukrainian children. The possibility of adjusting the acceptance criteria for the corresponding positions in such a way that any required German skills can be acquired in parallel and tested at a later date should be investigated. In the meantime, these persons could already provide childcare for Ukrainian- and Russian-speaking children.

In general, accepting the displaced persons from Ukraine will lead to a greater need for childcare. Women from Ukraine who came to Austria with children can only work if adequate childcare is provided. The expansion and development of childcare offerings at the pre-school level have acquired greater urgency due to the immigration flow. The Expert Council for Integration calls for the development of programmes to quickly and unbureaucratically employ women from Ukraine in childcare, e.g. as childminders in day-care settings. With the right prior education, they could be employed, initially even without German skills, to care for refugee children; this would provide these with a safe environment in their early phase in Austria while allowing their mothers to work.

¹⁰⁴ See <https://www.bmbwf.gv.at/Themen/schule/beratung/ukraine/schulen.html>.

The war situation in Ukraine and the fleeing experience have likely traumatised many of the displaced. Children in particular will suffer psychologically under the difficult circumstances. The Expert Council for Integration notes that a sufficient offering of psychosocial care and psychological counselling, support and treatment should be established and the information about them be made available to those affected in a suitable, easy-to-access way (see also chapter D). This is a particular challenge because the corresponding psychological offerings for children and adolescents were already limited prior to the coronavirus pandemic, and the consequences of the pandemic have resulted in increased demand. For pre-schools and schools, information should therefore be developed that sensitises the educators, teachers and specialists to issues of psychological health and informs them of corresponding help offerings.

SUPPORTING WOMEN

The majority of immigrated women are alone with their children, some even with other relatives in need of care. During the war in Ukraine, during their flight and during the time of their arrival in Austria, they have had to shoulder enormous responsibilities for their families. They are in a particularly vulnerable situation that may have been made even worse by trauma, anxieties and emotional instability. This specific vulnerability may be abused by others, for instance in the form of exploitative labour relations, sexual exploitation or human trafficking. It is therefore necessary to highlight these dangers to women in an appropriate manner, to inform them of where they can find assistance and counselling, and, where necessary, to provide concrete assistance. For instance, counsellors at the hotline for Ukrainian displaced persons run by the Federal Agency for Reception and Support Services have been sensitised to signs of human trafficking. Furthermore, the potential of the women already living in Austria should be used by integrating them into existing offerings.

SOCIAL INVOLVEMENT IN THE FORM OF NEIGHBOURHOOD ASSISTANCE

The willingness of many people in Austria to help the displaced persons from Ukraine is great. Many have already provided an exceptional level of support through the donation of money and items, the provision of accommodations, and the reception of Ukrainians in their own homes. The interpersonal aspect of civil society engagement is particularly important, as it enables the displaced persons to arrive in Austria despite their worries about the situation in Ukraine and their relatives and friends who may remain there. The Austrian Integration Fund is providing a new promotion tool to financially assist civil society initiatives supporting Ukrainian displaced persons in Austria. One very promising initiative is the Buddy Programme for young Ukrainians from 12 years of age, which was launched in May 2022. Volunteer Buddies help the young displaced persons in their everyday lives, whether in learning German or by giving tips on school and university. The young Ukrainians are in constant contact with their Buddies from the majority society.¹⁰⁵

However, in matters such as accommodation in particular, private volunteers cannot be a long-term replacement for own accommodations. The already tense housing market situation can only become more difficult as more displaced persons are received in Austria. The particular difficulties that displaced persons face in quickly finding suitable accommodations should be addressed as much as possible by cor-

¹⁰⁵ See <https://www.integrationsfonds.at/buddy-programm/>.

responding support offerings. In the care sector too, a sufficient offering for displaced persons should be assured, for instance by ensuring that long-term care spots for people with disabilities and treatment possibilities for people with chronic suffering are provided.

Religious institutions and municipalities have shown strong social commitment. For example, since the start of the war the Greek Catholic Church of St. Barbara and the Orthodox Metropolis of Austria in Vienna have been collecting donations for the suffering population in Ukraine, caring for displaced persons and providing spiritual assistance.

The displaced persons from Ukraine received in Austria include people of Jewish origin. These are being supported in particular by the Israelite community in Vienna (Israelitische Kultusgemeinde, IKG) and by the various local Jewish communities and are receiving specific counselling regarding accommodation and employment options. The IKG has counted more than 1,000 persons receiving its support. One helpful aspect is that a Jewish community with Russian roots that has gradually become established in Vienna since the 1970s due to emigration from the former Soviet Union is now supporting the Ukrainian refugees of Jewish origin. The Austrian state has a historical responsibility to provide adequate financial support to the IKG and the Jewish communities as they fulfil this task. In light of this, the IKG, with funding from the Austrian Integration Fund, has established a package of measures to support Jewish-Ukrainian displaced persons.

It will be necessary to provide help for a long time. Even when the actual fighting stops, hopefully as quickly as possible, in the period after the war the displaced persons in Austria and those who return to Ukraine will still require support. The Expert Council for Integration believes that measures taken towards integration in the labour market, the education system and Austrian society will also be of use to those who return to their country of origin with new qualifications, knowledge and experience. This could be a further foundation stone of future economic and cultural exchanges with Ukraine.

HEALTH IN THE CONTEXT OF INTEGRATION



Health in the context of integration

Safeguarding the health of the Austrian population is a major political aim. The World Health Organisation (WHO) defines health not only as the absence of disease and infirmity, but as the condition of full physical, psychological and social wellbeing.¹⁰⁶ The preamble to the Constitution of the WHO further states that health is a fundamental right of every person, without differences in race (ethnic-cultural origin), religion, political views or economic or social status. Preserving people's health is the responsibility of their governments, which must take adequate health-related and social measures. The preamble to the Constitution of the WHO also states that preserving people's health is a precondition for their ability to participate in social and economic life in all its dimensions.

Just how seriously the Austrian government takes this duty was shown by its reaction to the coronavirus pandemic in the past years. With the measures taken to fight the pandemic and to maintain the healthcare system significant restrictions to economic, social and cultural life were accepted and these measures lead to a heavy financial burden on the state and greatly restricted individual freedoms.

The pandemic revealed to us how important a properly functioning healthcare system and a health-conscious population are. It showed that in addition to adequate technical means, the qualification and commitment of the workers in the healthcare system are of central importance. In Austria, some 376,100 people worked in the healthcare, care and social sectors in 2020. This represents 9% of the labour force. Of these, 181,400 (48%) were in academic and related health professions, with another 63,300 (17%) in support professions in healthcare and 131,400 (35%) in care. Compared to other countries, Austria is in the European middle range in the share of the labour force in the healthcare and care sectors (EU27: 9%). The share of the labour force in healthcare professions is much higher in the Nordic countries, followed by the United Kingdom, the Netherlands and Switzerland; the share is significantly lower in the eastern central European countries like Poland, Bulgaria, the Baltic states and Romania. The composition of the various occupational groups varies strongly between the countries. While in the Nordic countries the care professions form the largest group of healthcare professions, followed by academic and other highly qualified workers, in Germany for instance the support professions form the largest pillar of healthcare provisions, followed by academic and other health specialists. In contrast, academic and associated health professions form the largest occupational group in Austria, followed by care workers.

In most OECD countries, women are more than 75% of the labour force in the healthcare and care sectors.¹⁰⁷ The share of women is lowest among physicians – around 50% in Austria in 2020, near the OECD average; as the level of qualifications decreases, the share of women increases greatly.

The share of migrants varies in the different categories between countries, depending on the institutional structure, the costs of education and the migration regimes.

¹⁰⁶ WHO (2002), *Preamble to the Constitution of the World Health Organization*.

¹⁰⁷ OECD (2021), *Health at a Glance 2021*.



For example, the share of physicians with a migrant background in 2019, according to OECD health data,¹⁰⁸ was highest in the traditional immigration countries, reaching 43% in New Zealand, followed by Australia (33%); in Norway (41%), Switzerland (36%) and the United Kingdom (30%) the share of migrants among physicians is similarly high. In contrast, eastern central European countries like Poland (2%) and Slovakia (3%), but also the Netherlands (3%), have a very low share of migrants among their physicians. Austria is situated towards the lower end of the middle range at 6%, while France (12%), Belgium (12%) and Germany (13%) are in the middle range. The share of migrants among nurses is lower than among physicians in most OECD countries; in 2020 it was frequently well below 10%, with the exception of New Zealand (29%), Switzerland (26%) and Australia (18%), where it was much higher.

WORKING POPULATION IN THE HEALTHCARE SECTOR

2020, percentage of total labour force

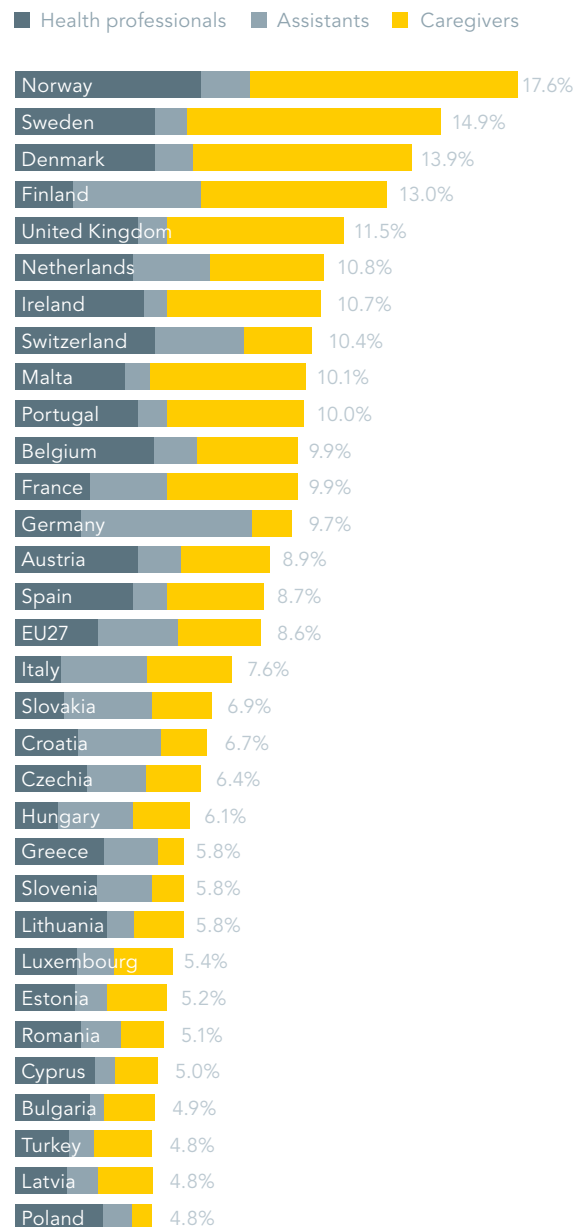


Fig. D1; Source: Eurostat (2022), Population by educational attainment, Age and European socio-economic group; own representation

But migrants are not just workers in the healthcare sector, but also consumers or recipients of healthcare services. Immigration from other countries has increased both the share of migrants in the population and ethno-cultural diversity. This has resulted in a diversification of the requirements of the healthcare system. Health in the context of integration should therefore be viewed from two angles: as the share of migrants in the various healthcare professions increases, intercultural communication both within the healthcare system and between the system and the migrant population gains in importance; in addition, the transmission of health literacy should address not just the native population, but also migrants - every country and culture has, over the course of its history, developed its own health behaviours as a reaction to the respective institutional infrastructure and provision system. Migrants must first acquire the health literacy that is relevant in Austria; this requires support from the receiving society. This means that from an integration policy perspective, health policy should not just make healthcare institutions accessible to migrants but also equip healthcare workers with migration-specific skills while simultaneously strengthening the health literacy of the migrants.

MIGRANTS IN HEALTHCARE OCCUPATIONS

The data on employment in the Austrian healthcare system is fragmented. This is a consequence of the large number of actors at the various legislative and administrative levels on the one hand (federal government, federal provinces, municipalities) and the self-administration of social security institutions on the other. The federal structure and the integration of self-administration result in information from various data sources having to be combined to obtain insights into the degree of integration of migrants into the employment system of the healthcare sector. The coronavirus pandemic allowed the whole population to see the different areas of responsibility and the associated coordination-related challenges. But it is not just the ensuring of an adequate level of care that requires a high degree of coordination between the involved institutions. The various data, for instance on employment, health histories, consumption of medication or, most recently, vaccination behaviour must also first be coordinated, because not all data flows into one institution - partially for data protection reasons.¹⁰⁹

In 2021, according to data from the social security institutions 143,300 persons were non-self-employed in the healthcare sector, some 13,300 (+10%) more than in the previous year. Of these, 16% had a foreign nationality (22,200). Of the non-self-employed, 75% were women, of which 16% (17,100) were foreign nationals. Amongst men, the share of foreign nationals was slightly lower at 15% (5,100).

As Fig. D2 shows, almost half of non-self-employed workers in healthcare work in hospitals (43%), largely women (74%), of which 14% are foreign nationals. In the various doctors' practices (general medicine, specialists, dentists), the share of women often exceeds 90%; these are mostly in support professions, with a share of foreign nationals between 12% and 23%. Amongst men, the share of foreigners lies between 15% and 30%.

¹⁰⁹ More on this in Degelsegger-Márquez, Alexander (2021), *Gesundheitsdaten in Österreich – ein Überblick*.

In the healthcare sector in the narrow sense, around half the staff is female (52%) – of which 15% are foreigners; the share of foreign nationals is 13% in total.¹¹⁰

According to the OECD statistics, some 100,000 ‘practicing nurses’ (nurses exercising their profession) work in Austria; they work in municipal and provincial healthcare services as well as in public and private healthcare institutions.

Besides the non-self-employed workers, more than 100,000 workers in the health and social sector are self-employed.¹¹¹ The Austrian Medical Association counts some 47,700 members; this figure conforms to the OECD’s figure for “practicing doctors” (doctors who are exercising their profession).

In Austria, healthcare outside hospitals is provided by contractual doctors of the Austrian Social Health Insurance Fund. At the start of 2022, there were some 3,900 general practitioners on contract with social security¹¹² and around 3,300 specialists on contract with social security,¹¹³ whose services are settled by the social security institutions. The data does not indicate how many contractual physicians have a migrant background.

Amongst self-employed workers in the healthcare and social sector, the share of foreign workers varies strongly by category: in 24-hour care, which in Austria is designated a free trade in personal care (Section 159 Trade Regulation Act – Gewerbeordnung, GewO), over 90% of the 60,000 or so workers are foreign nationals. These are largely women (92%), most of whom commute from central and eastern European countries, predominantly from Romania and Slovakia, without being permanent residents here. They travel from their countries of origin, usually work for two continuous weeks in Austria, and then return to their countries of origin for two weeks. During their stay in Austria they usually live together with the elderly persons whom they care for (live-in model of care).¹¹⁴ These foreign workers are not counted as immigrants.

WORKING POPULATION

2021 by sector, nationality and sex

	Total	of which women	of which foreigners
Non-self-employed	143,325	108,112 75.4%	22,221 15.5%
Hospitals	62,216	45,891 73.8%	9,080 14.6%
General practitioner practices	11,980	11,202 93.5%	1,455 12.1%
Specialist medical practices	25,297	22,109 87.4%	4,449 17.6%
Dental practices	14,285	13,537 94.8%	3,355 23.5%
Healthcare	29,547	15,373 52.0%	3,882 13.1%
Self-employed	100,399	82,594 82.3%	60,993 60.8%
Healthcare	17,636	9,327 52.9%	1,233 7.0%
Social sector (excluding care homes)	82,763	73,267 88.5%	59,760 72.2%
Marginally employed persons (healthcare)	20,203	16,671 82.5%	4,508 22.3%
Freelance contracts (healthcare)	1,445	1,013 70.1%	272 18.8%

Fig. D2; Source: BMA (2022), Online labour market database AMIS; own representation

110 The non-self-employed at higher levels of care are not fully recorded in the Amis database (data of the Main Association of Austrian Social Security Institutions), because some of the healthcare staff work with the municipal and provincial healthcare services. These institutions are not part of social security institutions but rather are under the responsibility of the provinces and municipalities.

111 Practicing doctors are probably also only partially recorded in the statistics of the Ministry of Labour (Amis database).

112 ÖGK (2022), *Ärzte und Ärztinnen für Allgemeinmedizin*.

113 ÖGK (2022), *Fachärztinnen und Fachärzte*.

114 Aulenbacher, Brigitte et al. (Eds.) (2021), *Gute Sorge ohne gute Arbeit? Live-in-Care in Deutschland, Österreich und der Schweiz*.

In contrast, of the close to 50,000 practicing doctors in Austria, of which around half are women, 11% are actually immigrants. The most common country of origin of migrant doctors in Austria is Germany, followed by Italy and Hungary.¹¹⁵ The situation is similar amongst nurses, of which some 80% are women: barely one tenth have a foreign nationality. Foreign workers with nursing degrees also largely come from Germany, followed by persons from the former Yugoslavia, Czechia, Poland, but also Slovakia and Hungary. Persons from non-European countries also work in the care sector, for instance women from the Philippines, and recently also women from the main refugee countries of origin of 2015/2016.

In Austria, there are some 5.3 practicing doctors per 1,000 inhabitants. This represents a high density of care by international standards – only Greece has a higher density.¹¹⁶ The OECD average is 3.6 doctors per 1,000 inhabitants. In contrast, the relation between practicing nurses and the population is in the lower middle range at 10.4 nurses per 1,000 inhabitants. The highest density is found in Switzerland and Norway, with 18 nurses per 1,000 inhabitants. This data indicates that additional recruitment is necessary in the (higher levels of the) care sector. Initiatives like “migrants care”, which aims to train migrants as nurses and is implemented by the BAG institutions Caritas, Diakonie, Hilfswerk, Red Cross and Volkshilfe in collaboration with the Austrian Integration Fund, are therefore welcome developments.¹¹⁷ In light of the below-average share of migrants in this field by international standards, from an integration and health policy perspective it would be useful to increase efforts to motivate women with a migrant background to enter this profession. Perhaps forms of scholarships should also be considered.

HEALTH OF MIGRANTS

It is not that simple to determine how healthy migrants are compared to persons without a migrant background. Individuals can be asked if they feel healthy or not. But self-assessments are only partially helpful in determining how healthy someone is, as many factors influence human wellbeing. Besides individual predispositions and age, socio-economic factors also affect health; these include the level of education, the work conditions, housing conditions, as well as individual health behaviour. The latter refers amongst others to the nutrition and movement behaviour, smoking and alcohol consumption and making use of healthcare services and preventive measures, which include screening and preventive examinations as well as vaccinations. Socially disadvantaged population groups – which include people with a low level of education and/or income, persons at risk of poverty or exclusion, and the unemployed – are much more likely to assess their health as poor; they are also more frequently affected by chronic illnesses.¹¹⁸

¹¹⁵ Ärztekammer (2021), *Ärztstatistik für Österreich zum 31.12.2020*.

¹¹⁶ OECD (2021), *Health Statistics*.

¹¹⁷ BAG = National Association Freie Wohlfahrt, <https://www.freiewohlfahrt.at/ueberuns>.

¹¹⁸ Statistik Austria (2015), *Lebensbedingungen in Österreich*; Statistik Austria (2020), *Soziodemographische und sozioökonomische Determinanten von Gesundheit*; Eurostat (2016), *Self-perceived health statistics*; Eurostat (2016), *Self-perceived health statistics. Statistics Explained*.

SUBJECTIVE ASSESSMENT OF HEALTH

As can be seen in Fig. D3, the share of people over the age of 16 in Austria who claim to be in very good or good health is 74%, in the upper middle European range, only significantly exceeded by Switzerland (83%) and Ireland (84%) and somewhat exceeded by southern European countries like Greece (79%), Cyprus (78%) and Malta (76%) as well as the Netherlands (78%), Sweden (77%) and Belgium (75%). These countries differ widely in terms of the share of migrants in the population.

According to the respective self-assessment, migrants in Austria have poorer health than the native population,¹¹⁹ while in the EU27 average there is almost no difference between the two groups. In 2015, 71% of the native population of Austria (adjusted for age) stated that their health is good or very good, while only 62% of migrants born abroad said the same. In the EU27 average, the difference was smaller, with values of 68% of the population without a migrant background and 70% of the population with a migrant background.

By 2019, this difference in Austria had resorbed somewhat. As can be seen in Fig. D4, 76% of the Austrian population without a migrant background, but 69% of the Austrian population with a migrant background, assess their health as good or very good. Migrants from the pre-2004 EU states/EFTA are in better health, according to their self-assessment, than migrants from the states that joined the EU since 2004. Persons from the former Yugoslavia (excluding EU) and Turkey in particular more frequently assess their health to be poor or very poor. These findings indicate that the living and working conditions, on average less advantageous, and in part also a lower level of education, of the persons with a migrant background from the prior countries of origin of guest workers, and to a lesser degree from the eastern central EU states, are determinant for the poorer health assessment.

HEALTH-RELATED WELLBEING

2020, Subjective assessment of persons aged 60 and older

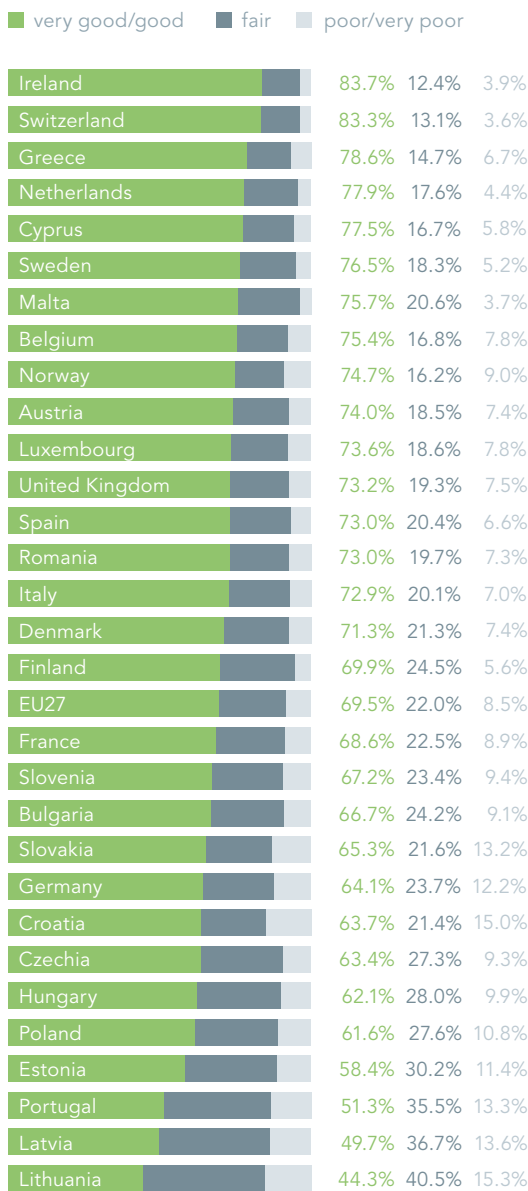


Fig. D3; Source: Eurostat (2022), Health according to own perception by sex, age and degree of urbanisation; own representation

119 OECD (2015), Indicators of Immigrant Integration 2015.

SUBJECTIVELY PERCEIVED HEALTH STATUS

2019 by migrant background

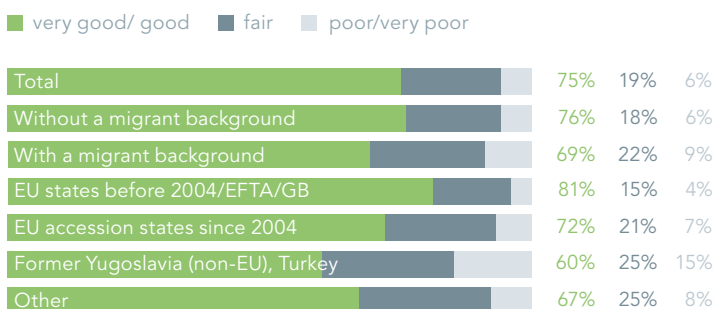


Fig. D4; Statistik Austria (2020), Austrian Health Interview Survey 2019; own representation

Women frequently assess their health to be poorer than men do. This holds for all migration groups with the exception of migrants from Turkey, amongst whom there is almost no difference between the sexes. The share of people with a very good or good health is highest among the young. With advancing age, health challenges increase; poverty, a low level of education, high job uncertainty and an uncertain residence status additionally influence health.¹²⁰

LIFE EXPECTANCY BY MIGRATION BACKGROUND AND GENDER

Despite more difficult work, migrants hardly have a lower life expectancy than the native population. This is what the demographic indicators in Austria for 2020 reveal (Fig. D5). The situation is even better for migrants in Germany, where a study by the German Federal Office for Migration and Refugees (BAMF) found that “the mortality of adult foreigners aged 20 to 60 is lower than that of adult Germans.”¹²¹ Similar results are found by studies in the United States of America¹²², France¹²³, the Nordic countries¹²⁴ and others.

According to these analyses, the health of migrants at the time of immigration is better than that of people of the same age in the country of origin and in the receiving country due to a process of self-selection – only young and healthy people emigrate – and to selective immigration policies. As the period of stay in the country of destination increases, however, the so-called ‘healthy migrant’ effect¹²⁵ dissipates and the health of migrants approaches that of the receiving population.¹²⁶ In the literature, this is explained by the work and living conditions, but also the adoption of unhealthy behaviours in the receiving country, for instance an unhealthy diet, lack of exercise, smoking and/or drinking alcohol, and the loss of the traditional social, ethno-cultural environment as well as a lower use of the healthcare infrastructure of the receiving country, for instance preventive examinations.¹²⁷

¹²⁰ Statistik Austria (2020), *Soziodemographische und sozioökonomische Determinanten von Gesundheit*, p. 33.

¹²¹ Kohls, Martin (2011), *Morbidität und Mortalität von Migranten in Deutschland*, p. 11.

¹²² Riosmena, Fernando et al. (2017), *Explaining the Immigrant Health Advantage*, pp. 175–200.

¹²³ Wallace, Matthew et al. (2019), *Mortality advantage among migrants according to duration of stay in France*, p. 327.

¹²⁴ Wallace, Matthew et al. (2021), *The impact of the mortality of international migrants on estimates and comparisons of national life expectancy*.

¹²⁵ Biffl, Gudrun (2005), *The Socio-Economic Background of Health in Austria*.

¹²⁶ Neuman, Shoshana (2014), *Are immigrants healthier than native residents*, p. 108.

¹²⁷ Antecol, Heather and Bedard, Kelly (2006), *Unhealthy assimilation*.

LIFE EXPECTANCY OF THE POPULATION

2020 by sex and nationality or country of birth

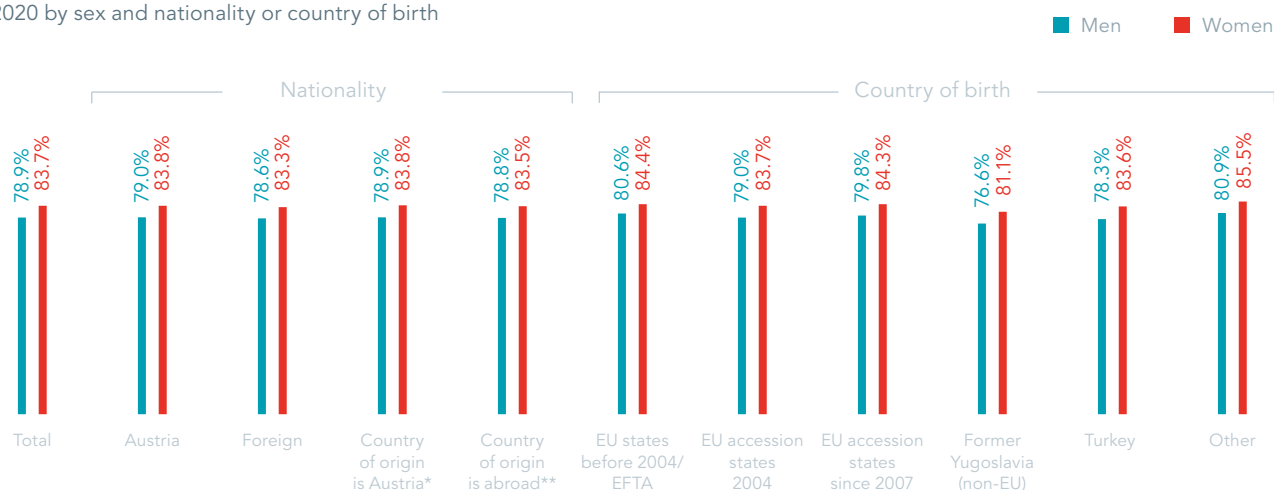


Fig. D5; * Austrian nationals born in Austria, ** Non-Austrian nationals and Austrian nationals born abroad. For the calculation, specific death rates by nationality or respectively Austria/foreign country of origin were used for the federal provinces up to the age of 79; for the age group 80 and older, the general death rate for that federal province and sex was used; Source: Statistik Austria (2021), Demographic tables; own representation

INTERACTION BETWEEN MIGRATION AND HEALTH

The interaction between migration and health is a complex issue. The life course model of migration and health developed by Spallek and Razum¹²⁸ examines the interaction of life circumstances and migration-specific factors that may result in poor health as a consequence of psychological stress due to migration, especially refugee migration, integration into the receiving society, and social disadvantages. In addition to differences in physical as well as psychological predispositions, the situation in the country of origin affects the individual health of migrants. This includes factors such as climate and hygiene, the level of healthcare provision, health-specific behaviours in relation for instance to diet and exercise, or experiences of war or persecution.

The migration process itself represents a critical event in the life of migrants. It is associated with a loss of the social environment, feats of adaptation during migration, and traumatic experiences, e.g. due to the reason for flight (war). Consequently, the migration experience influences health. But the arrival in the destination country is also associated with effort and conditions that affect individuals' health. These include class-specific factors: if migrants find themselves in socially disadvantaged positions, this may negatively influence their health. This is compounded by factors that can be referred to as 'acculturation stress', such as changed habits or conflicts based on different values. On top of this, the legal situation in the destination country may influence access to healthcare, and so the migrant's health.

Barriers to healthcare include insufficient language skills, primary orientation towards the majority society, but also experiences of discrimination. But it can also be the case that life in the receiving country results in improved health of the migrants, especially if the level of healthcare and the hygienic conditions are better and personal safety is assured. Social security institutions, particularly the Austrian Social Health Insurance Fund (Österreichische Gesundheitskasse, ÖGK), offer care programmes for various diseases and programmes to promote health literacy adapted to the needs of people with a migrant background. In these projects, information and documentation is provided in several languages to overcome the language barrier.¹²⁹

128 Spallek, Jacob and Razum, Oliver (2008), *Erklärungsmodelle für die gesundheitliche Situation von Migrantinnen und Migranten*, p. 283.

129 ÖGK (2022), *Gesundheitsförderung*.

PERMANENT ILLNESSES OR CHRONIC HEALTH PROBLEMS

One criterion for assessing health is the extent of permanent illnesses or chronic health problems like high blood pressure, depression, back pain or diabetes. According to the health survey conducted by Statistik Austria in 2019¹³⁰ on average two thirds of the Austrian population suffer from at least one chronic illness, with women and men equally affected. Older persons are more frequently affected than young ones.

Migrants in Austria from the states that joined the EU from 2004 are slightly less affected by chronic physical illnesses than persons without a migrant background or migrants from the EU prior to 2004/EFTA (63% compared to 66%). In contrast, migrants from the former Yugoslavia outside the EU and from Turkey more frequently suffer from at least one chronic illness (women 74%, men 69%). For allergies, the migrant background plays a role mainly amongst men from the European Economic Zone – allergic diseases are more common in highly industrialised countries than in less industrialised ones. An analysis of the data for migrant women, adjusted for socio-economic factors, shows that high blood pressure (especially in older women), chronic neck pain and headaches are significantly more frequent than in women from the native population, especially amongst women from the former Yugoslavia (outside the EU) and Turkey.

PREVALENCE OF AT LEAST ONE CHRONIC CONDITION

2019 by migrant background, age and sex

	15 – 29 Years		30 – 44 Years		45 – 59 Years		60 – 74 Years		over 75 Years		Total	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Total	65.9%	65.5%	67.4%	66.3%	61.9%	64.2%	69.3%	73.8%	60.4%	60.5%	65.7%	66.1%
Without a migrant background	43.6%	42.2%	53.7%	48.8%	34.7%	35.6%	39.6%	39.6%	26.5%	35.6%	42.0%	41.2%
EU states before 2004/EFTA	54.6%	53.5%	61.0%	58.4%	45.2%	54.5%	51.5%	65.6%	54.6%	51.3%	53.9%	55.1%
EU accession states since 2004	72.7%	70.1%	62.5%	71.9%	71.9%	74.3%	82.1%	86.5%	70.4%	76.2%	73.2%	71.8%
Former Yugoslavia (non-EU), Turkey	83.1%	86.0%	84.7%	75.1%	83.5%	75.7%	94.9%	90.1%	93.5%	57.4%	84.1%	85.5%
Other	87.9%	90.2%	88.5%	89.1%	90.5%	97.9%	91.2%	N/A	55.6%	N/A	88.3%	90.7%

Fig. D6; Source: Statistik Austria (2020), Austrian Health Interview Survey 2019; own representation

Migrants more often face restrictions to everyday activities due to health problems (Fig. D7). Migrants from the previous countries of origin of guest workers in particular, but also, to a lesser degree, from the states that joined the EU after 2004, suffer more frequently than the average from musculoskeletal disorders, high blood pressure, chronic headaches, chronic anxiety or depression.¹³¹ On the one hand, this is explained by the fact that many of them are active in jobs with high levels of physical stress as well as psychological stress, for instance in the form of shift work. On the other hand, persons from the former Yugoslavia are also often war refugees from the break-up of Yugoslavia who have therefore been subjected to extraordinary psychological and physical stress.

HEALTH INDICATORS

2019 by migrant background

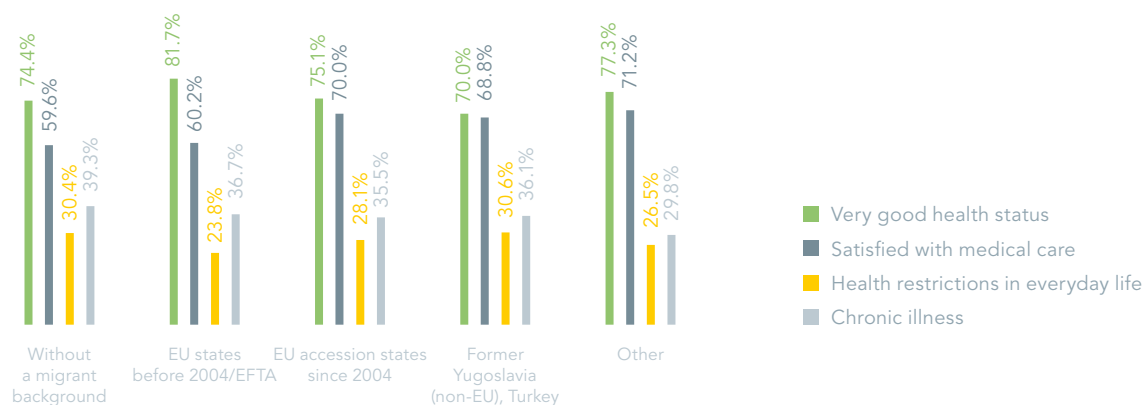


Fig. D7; Source: Statistik Austria (2020), Austrian Health Interview Survey 2019. Population living in private households aged 15 and older. Projected figures; own representation

PAIN AND ORAL HEALTH

Pain is more frequent among women with a migrant background than among women from the native population. The frequency increases with age; the difference between women from the former Yugoslavia (outside the EU) and Turkey and women without a migrant background is particularly stark.

Oral health, i.e. healthy teeth and gums, is also an important indicator of overall health. It also has a highly symbolic effect, reflecting positively on psychological and social health. It has been found that low income, a low level of education and a migrant background strongly correlate with poor oral health. This combination of factors indicates that poor oral health may be associated with the costs of dental care, which can be quite high in Austria, as not all dental services are covered by social security.

¹³¹ Hofmarcher, Maria and Singhuber, Christopher (2021), Migration in Österreich: Gesundheitliche und ökonomische Aspekte.

PSYCHOLOGICAL DISORDERS

Persons with a migrant background, independently of their place of origin, are significantly more frequently affected by psychological disorders such as chronic anxiety or depression¹³² than persons without a migrant background. Depressive disorders are particularly frequently associated with anxiety symptoms, substance-related disorders, pain and a series of somatic illnesses like diabetes, as well as chronic illnesses and malign tumours. Back pain and similar symptoms may also not necessarily be due to hard physical work and painful postures but rather to psychosocial factors. According to the European Agency for Safety and Health at Work, there are three different mechanisms through which psychosocial factors affect muscle and skeletal disorders: the first is of a physiological nature and results in organic changes, the second influences the feeling of pain, and the third is socio-psychological in nature and influences the ability to handle illness or pain.¹³³ According to the 2019 health survey,¹³⁴ 7.5% of the population above the age of 15 reported having depression in the 12 months before the survey; the figure for confirmed medical diagnoses was 6%. Among persons without a migrant background, the prevalence was a little lower at 7% (medical diagnosis 6%) and among persons with a migrant background higher at 10% (medical diagnosis 7%).

This data conforms quite closely to that of the 2019 Depression Report of the Ministry of Health (data mainly from 2015): according to that data, some 7% of the adult Austrian population suffer from a depressive disorder at any time. Women (7%) are more affected than men (6%). Turkish migrants are particularly affected. In contrast to the overall trend in Austria, Turkish men (11%) more frequently show symptoms of depression than Turkish women (10%).

Refugees are particularly affected – according to estimates, some 30 to 40 per cent suffer from depression.¹³⁵ These estimates are approximate, as the diagnosis of psychological problems must also consider the cultural context. However, besides genetic and biological markers, empirically determined risk factors for the development of a depression also include psychosocial factors, particularly difficult life circumstances, acute stress such as loss or death of important persons, and chronic situations of extreme stress. The situation may be exacerbated by specific work stress induced by high time pressure, overworking, low professional autonomy and little support from colleagues or the social environment.¹³⁶ Depressive disorders are associated with increased morbidity as well as reduced quality of life. According to information from the Austrian Association of Psychotherapists (ÖBPV), people with depressive disorders additionally see a twentyfold increase in the risk of suicide.

132 Nowotny, Monika et al. (2019), *Depressionsbericht Österreich*.

133 European Agency for Safety and Health at Work (1999), *Work-related neck and upper limb musculoskeletal disorders*.

134 Statistik Austria (2020), *Österreichische Gesundheitsbefragung 2019*.

135 Nowotny, Monika et al. (2019), *Depressionsbericht Österreich*, p. 21.

136 Biffl, Gudrun et al. (2012), *Psychische Belastungen der Arbeit und ihre Folgen*.

HEALTH BEHAVIOUR AND HEALTH LITERACY OF MIGRANTS

Given that migrants do not represent a uniform group, different behaviours towards illness and different lifestyles are expected. Migrants arrive from various countries of origin with different socio-economic statuses and different migration experiences. Class- and migration-specific influencing factors impact both health and health behaviour and literacy. In Austria, persons with a migrant background are much less likely to take advantage of screening and preventive examinations, are less likely to have a complete vaccination status and are more likely to not visit a doctor or dentist when they have a problem.¹³⁷ One major explanation could be a lack of knowledge about the Austrian health system and its services. This is compounded by certain barriers to access to the healthcare system as well as insufficient language skills, a lack of self-confidence and weak intercultural communication skills.

HEALTH FACTORS

2019 by migrant background

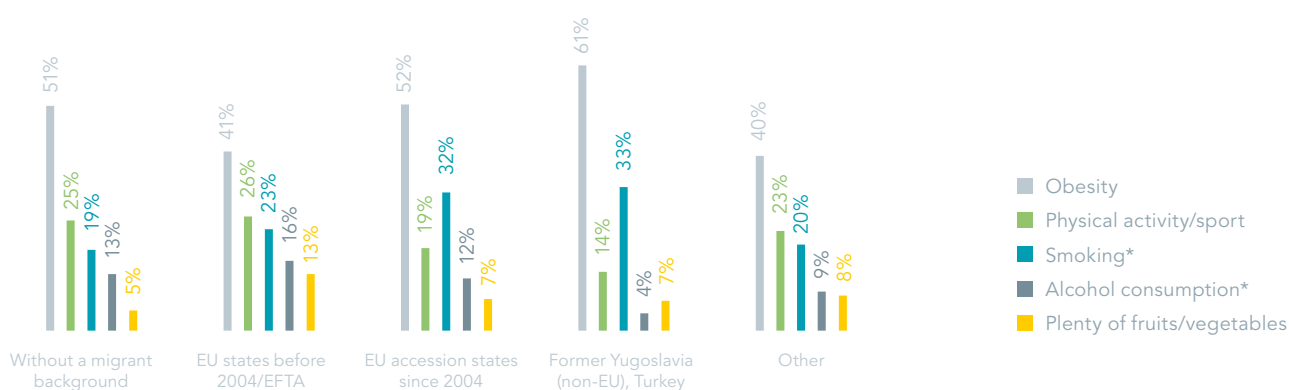


Fig. D8; * daily; Source: Statistik Austria (2020), Austrian Health Interview Survey 2019. Population living in private households aged 15 and older. Projected figures; own representation

The Austrian health survey in 2019 examined detrimental health behaviour such as poor diet, insufficient exercise, obesity, smoking and excessive alcohol consumption. These behavioural patterns are among the major influencing factors for non-transmittable chronic diseases. Alone, but especially in combination, they are risk factors that have a significant influence on quality of life, healthy aging and mortality. On average, persons with a migrant background more frequently smoke daily than Austrians (25% compared to 19%), with differences based on country of origin. Especially migrants from the former Yugoslavia excluding the EU states and from Turkey smoke more than the average population in Austria, but they drink less alcohol (in part due to many of them being Muslims). The results of the survey also show that obesity is more frequent in migrants than in persons without a migrant background. The difference is especially large in persons from the former Yugoslavia (excluding EU) and from Turkey, particularly in men. Among these, the probability of being obese is twice as high as among men from the native population. The main cause of obesity is an unhealthy lifestyle, influenced by socio-economic, socio-demographic and psychosocial factors.¹³⁸

¹³⁷ Statistik Austria (2020), Österreichische Gesundheitsbefragung 2019.

¹³⁸ Statistik Austria (2020), Soziodemographische und sozioökonomische Determinanten von Gesundheit, p. 125.

Fig. D8 also shows that there are clear differences in diet and exercise between persons with and without a migrant background, and also within the population with a migrant background. The (age-adjusted) analysis of the sporting activities (of 18 to 64-year-olds) in their free time shows that persons from the former Yugoslavia (excluding EU) and from Turkey in particular have a higher health risk due to insufficient exercise like bicycling, jogging, football or swimming.¹³⁹ According to the WHO, insufficient exercise increases the risk of chronic diseases like cardiovascular diseases, diabetes, but also breast or colon cancer.

The only aspect where migrants live more healthily than Austrians, in particular if they come from EU14/EFTA states, is the consumption of enough fruits and vegetables. Health-relevant behaviours like diet patterns or sports are influenced not just by the economic and cultural capital, but also by group belonging and social relations: it has been empirically demonstrated that social isolation is associated not just with increased nicotine consumption, but also with unhealthier diets and physical inactivity.¹⁴⁰ It should also be noted that diets have cultural aspects, influenced both by religious taboos and by customs and rituals.¹⁴¹

DISEASE PREVENTION

Migrants make less use of screenings and health offerings than the native population. This is especially true for visits to dentists (63% of persons with a migrant background, compared to 73% of the native population) and mammographies (68% compared to 75%). This may be due to certain barriers to migrants' access to healthcare, or it could be due to insufficient consideration of specific behaviours and needs of migrants by the healthcare system.¹⁴² The social security institutions, especially ÖGK, are trying to increase acceptance of mammographies amongst women with a migrant background by providing information material in their languages.¹⁴³

The 2019 health survey also asked about the acceptance of certain vaccines, specifically complete vaccination (flu, tetanus, diphtheria, polio, FSME), as well as about certain cancer screenings (mammography, pap smear, colonoscopy). The analysis of the data reveals that the risk of not having complete vaccination increases as the levels of income and education decrease. The probability of not having complete vaccination against the cited diseases is highest in men and women from the former Yugoslavia (excluding EU) and from Turkey (Fig. D9).

UPHELD VACCINATION PROTECTION FOR SELECTED VACCINATIONS

2019 by migrant background and sex

	Without a migrant background		EU states before 2004/EFTA		EU accession states since 2004		Former Yugoslavia (non-EU), Turkey		Other		Total	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Tetanus	80.8%	75.6%	76.0%	79.8%	66.2%	62.2%	57.3%	52.0%	51.5%	51.3%	76.7%	71.7%
Diphtheria	67.0%	66.1%	62.0%	69.8%	50.4%	50.7%	35.4%	41.1%	41.9%	43.7%	62.1%	61.8%
Polio	63.9%	63.6%	58.9%	66.3%	45.3%	48.7%	32.5%	38.5%	40.9%	42.9%	59.1%	59.3%
FSME	68.4%	70.0%	55.1%	56.3%	43.4%	40.3%	31.6%	35.6%	36.1%	36.6%	61.7%	63.2%

Fig. D9; Source: Statistik Austria (2020), Austrian Health Interview Survey 2019; own representation

139 For a detailed presentation of the prevalence of physical activity by age, gender and migration background, see Statistik Austria (2020), *Soziodemographische und sozioökonomische Determinanten von Gesundheit*, pp. 138–139.

140 Meyers, Simone (2008), *Soziale Ungleichheit, soziale Beziehungen und Gesundheitsverhalten*.

141 Adam, Yvonne and Stülz, Magdalena (2009), *Brauchen wir spezifisches Wissen in der medizinischen Versorgung von Migrant/inn/en?*

142 Biffi, Gudrun (2012), *Access to Health Care in the European Union*.

143 ÖGK (2022), *Früh Erkennen*.

The coronavirus vaccination rate is also lower amongst migrants than in the native population, as Fig. D10 shows. But there are significant differences based on country of origin. While the vaccination rate of Austrians is 73% and that of foreign nationals is 56%, it is 76% for Iranians, closely followed by Chinese (72%), Germans (69%), Italians (67%) and Turks (62%). The lowest vaccination rate was amongst nationals of the Russian Federation (37%), followed by Romanians (38%). Amongst migrants who have already obtained Austrian citizenship, the vaccination rate was consistently higher. On average, it was ten percentage points above that of foreign nationals (66%).

CORONA VACCINATION RATE

March 2022 by sex and nationality and country of birth

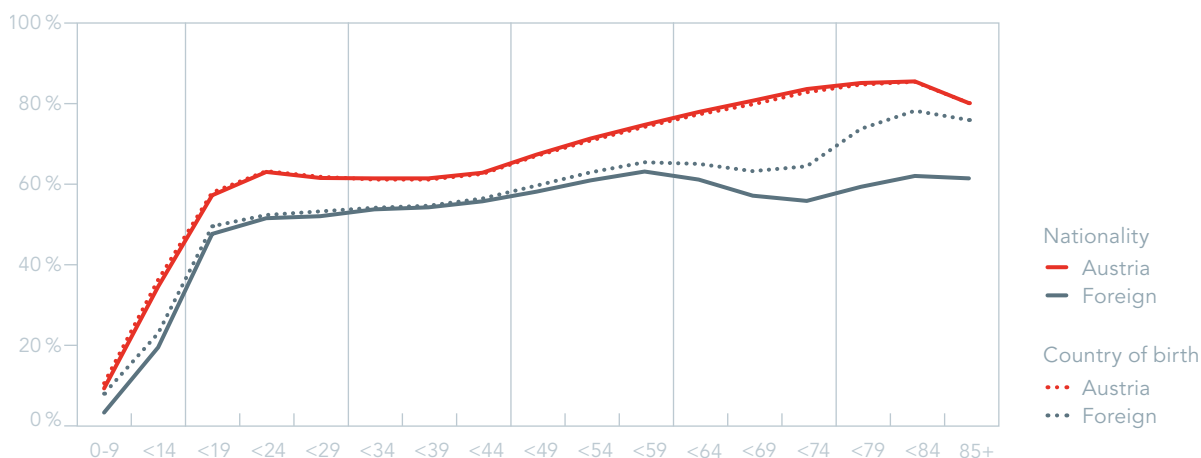


Fig. D10; Source: Statistik Austria (2022), COVID-19: „Geimpft/Genesen“-Status nach Alter und Staatsangehörigkeit bzw. Geburtsland in Prozent; own representation

Regarding participation rates in cancer screening by migrant background, a clear difference between women with and without a migrant background is found. While a little over half of Austrian women underwent a pap smear in the year before the survey, the figure for women from the former Yugoslavia (excluding EU) or Turkey was almost 13 percentage points lower. 42% of Austrian women aged 50 and above had a colonoscopy in the five years before the survey, while this was the case for only 34% of their coevals from the former Yugoslavia (excluding EU) and Turkey and for just 31% of their coevals from countries that joined the EU since 2004.

SOCIAL INEQUALITY AND HEALTH

Leoni looked at the extent to which social inequality is associated with different behaviour with regard to resorting to healthcare offerings (access to healthcare) in Austria.¹⁴⁴ He applied the synthetic health index developed by Jürges¹⁴⁵, in which subjective health assessments are connected to objective information. According to these calculations, Austria ranks in the upper middle range in Europe. This means that in Austria too, the average health index increases with increasing household income, but this trend is below-average to average compared to other European countries. The distribution of the use of healthcare services varies depending on the type of service. While there are no differences in the use of family medicine and stationary healthcare services based on income, socially weaker groups more rarely go to specialists. This can result in the emergence of preventable diseases and health costs. These findings are of particular relevance when explaining the differences in the health behaviour of migrants.

HEALTH LITERACY

Health literacy is described by Sørensen et al. as the ability and motivation to acquire the required skills and knowledge through adequate health behaviour in order to place disease prevention, disease treatment and health promotion at the service of maintaining a lifelong quality of life for the family and the environment.¹⁴⁶ The term “health literacy”, which was introduced in the 1970s, aims to reflect the complexity of the requirements of maintaining health in modern societies marked by socio-cultural and political transformation.

Internationally as well as in Austria, a migrant background is frequently associated with low health literacy, although there is not much data on the subject. Nonetheless, in light of their vulnerability and the fact that they are more affected by certain diseases, the health literacy of immigrants is of particular significance, for them as well as for public health. That is why in 2013 and 2014 the relevant data for Austria was collected (Health Literacy Survey – Austria: HLS-Ö).¹⁴⁷ These surveys show that the health literacy of migrants as well as that of the general population depends, after age, primarily on socio-economic status (education, professional status, social status, income poverty), but not on the migrant background per se. However, language skills play a comparatively large role in the use of the healthcare system, especially care and health promotion. These findings conform to those in the international literature.¹⁴⁸ The social security institutions, especially ÖGK, are striving to lower the language barriers for persons with a migrant background in order to increase their health literacy by providing information materials in several languages, and so also to promote participation in projects.¹⁴⁹

144 Leoni, Thomas (2015), *Soziale Unterschiede in Gesundheit und Inanspruchnahme der Gesundheitsversorgung*, pp. 649 ff.

145 Jürges, Hendrik (2007), *True health vs. response styles*.

146 Sørensen, Kristine et al. (2012), *Health literacy and public health*.

147 Ganahl, Kristin et al. (2016), *Gesundheitskompetenz bei Personen mit Migrationshintergrund aus der Türkei und Ex-Jugoslawien in Österreich*.

148 Kreps, Gary L. and Sparks, Lisa (2008), *Meeting the health literacy needs of immigrant populations*; Andrus, Miranda R. und Roth, Mary T. (2002), *Health Literacy: A Review*; HLS-EU consortium (2012), *Comparative report of health literacy in eight EU member states*.

149 To date there are a few Austria-wide programmes, for example *Therapie Aktiv*, *REVAN*, the breast cancer screening programme or preventive health checks, whose information materials explicitly target persons with a migrant background.

According to the HLS-Ö survey, 48.4% of the Austrian population had a limited (inadequate or problematic) general health literacy, but only 34% of the Turkish migrants and 25% of the immigrants from the former Yugoslavia (excluding EU) did. This may appear surprising, given that education and income are important indicators of health literacy. Low health literacy in the sample of Turkish migrants is frequently associated with daily tobacco consumption, and in the group from the former Yugoslavia with an unhealthy diet.¹⁵⁰

The major factors that are determinant for health literacy and self-responsibility also apply to the Covid-19 vaccination rate. From an integration perspective, one key is therefore to promote the health literacy of migrants to enable them to make competent decisions regarding their own health and to assess fake news in ethno-cultural communities.¹⁵¹ One promising path towards implementation, according to Harsch and Bittlingmayer, lies in integrating health into language courses and values and orientation courses.¹⁵² After all, health literacy is about more than the linguistic ability to communicate; it is also about developing self-confidence, acquiring skills regarding the recognition and prevention of diseases, the ability to protect or restore one's own health, but also about understanding medical information, finding one's way in the healthcare system, and access to prevention and healthcare – so more generally about improving knowledge about health. Achieving this requires a number of supporting measures, such as workshops for migrants on health issues presented by trained health mentors speaking the language of origin. These act as knowledge mediators and multipliers and can ensure practice-oriented know-how transfer to interested persons in exploratory workshops. Initiatives like "MiMi – Health and health literacy with migrants, for migrants", a project implemented by the association Volkshilfe and in which intercultural health guides raise awareness about the varied topic of health at information events, can be valuable contributions in this direction.

Generally speaking, a variety of settings should be considered, such as dialogue events in mosques and associations, in municipalities and community centres, in health centres and counselling centres. The practical implementation can be designed to facilitate access. Women in particular can play a role as multipliers.

Approaches to improve health literacy should not just focus on addressing migrants, but also healthcare institutions. Brach et al. (2012)¹⁵³ have identified 10 attributes of healthcare institutions that make it easier for people to orient themselves in the healthcare system, understand health-related information and use the services that help them take care of their health. These attributes include training of the staff (intercultural communication skills, availability of interpreters), implementation of strategies to deal with persons with a low level of health literacy (interpersonal communication that ensures that things that are said are really understood, especially in critical health-related situations (medication, treatments etc.), easy access to information on health and information on the costs of care that are covered by social security or that have to be covered by the person. Vogt and Gehrig make a similar argument.¹⁵⁴

150 Ganahl, Kristin et al. (2016), *Gesundheitskompetenz bei Personen mit Migrationshintergrund aus der Türkei und Ex-Jugoslawien in Österreich*, p. 19.

151 Perlot, Flooh and Filzmaier, Peter (2021), *Mediennutzung in der Corona. Pandemie Informationsverhalten von Personen mit Migrationshintergrund zum Thema Corona*.

152 Harsch, Stefanie and Bittlingmayer, Uwe H. (2018), *Improving Health Literacy of Migrants*.

153 Brach, Cindy et al. (2012), *Ten Attributes of Health Literate Health Care Organizations*.

154 Vogt, Dominique and Gehrig, Saskia Maria (2021), *Bedeutung und Stärkung von Gesundheitskompetenz/Health Literacy in der Prävention und Gesundheitsförderung*.

ADOLESCENT HEALTH IN THE CONTEXT OF INTEGRATION

Due to the fragmentary nature of the data, there is no clear picture of the health of children and adolescents in Austria. Medical progress in neonatology and in the treatment of transmissible diseases has continuously decreased the morbidity and mortality of new-borns and children over the past decades, but there is no overview of the whole span of childhood in relation to migrant background. This may seem surprising, given that Austria has had a school doctor system for over 150 years and the Mother-Child Booklet since 1974. However, the results of these routine preventive health checks are not electronically recorded and are not available for epidemiological studies, partly due to the lack of a legal foundation.¹⁵⁵ To learn more about the health of children and adolescents, during the Austrian health surveys in 2014 and 2019 parents were therefore asked about the general health, health problems, the vaccination status and the need for care of the children and adolescents aged from 0 to 17 living in their households.

It should be noted that while a number of factors affect health, age is the most significant one by a wide margin. This means that children and adolescents form the healthiest population groups. However, chronic diseases (neurodermatitis, cancer and diabetes), psychological disorders (anxiety, depression) and behavioural and developmental disorders (such as ADHS) also occur in children and adolescents.¹⁵⁶ Additionally, socio-economic status also has an influence on the health and health behaviour of children and adolescents. Health inequalities result from a range of material and social circumstances; they arise from different physical and psychological requirements and resources, a different level of health care and differences in lifestyle. According to empirical studies, these four factors alone account for more than two thirds of the differences in health.¹⁵⁷ According to the 2019 health survey, a migrant background alone has no influence on the health of children and adolescents.

The wellbeing or quality of life of children aged between 3 and 17 was investigated using a series of questions covering six areas (regarding the body, the psyche, self-esteem, family, friends, and school/kindergarten) (Fig. 11). These six indicators were compressed into an overall value of health wellbeing lying between 0 and 100. For the entire age group the value lay around 85, with almost no differences between the sexes.¹⁵⁸ However, the overall value of wellbeing in 3 to 17-year-old boys without a migrant background (85) is around the same as that of boys with a migrant background (85), while for girls with a migrant background (86) it is a little higher than for girls without a migrant background (85).

One noteworthy finding is that wellbeing in boys aged 3 to 6 without a migrant background is higher in practically all factors, except for the role of the family, than in coeval boys with a migrant background. This difference becomes smaller in boys aged 7-10, although self-esteem of boys without a migrant background remains significantly higher than that of boys with a migrant background, while the role of school in wellbeing increases in importance for boys with a migrant background compared to boys without a migrant background.

¹⁵⁵ For more details on the various surveys on health-related subjects see Griebler, Robert et al. (2016), *Österreichischer Kinder- und Jugendgesundheitsbericht*.

¹⁵⁶ *Ibid.*, page III (summary).

¹⁵⁷ *Ibid.*, p. 205.

¹⁵⁸ Statistik Austria (2020), *Soziodemographische und sozioökonomische Determinanten von Gesundheit*, p. 203.

INDICATORS FOR THE WELLBEING OF CHILDREN

2019 by migrant background, age and sex

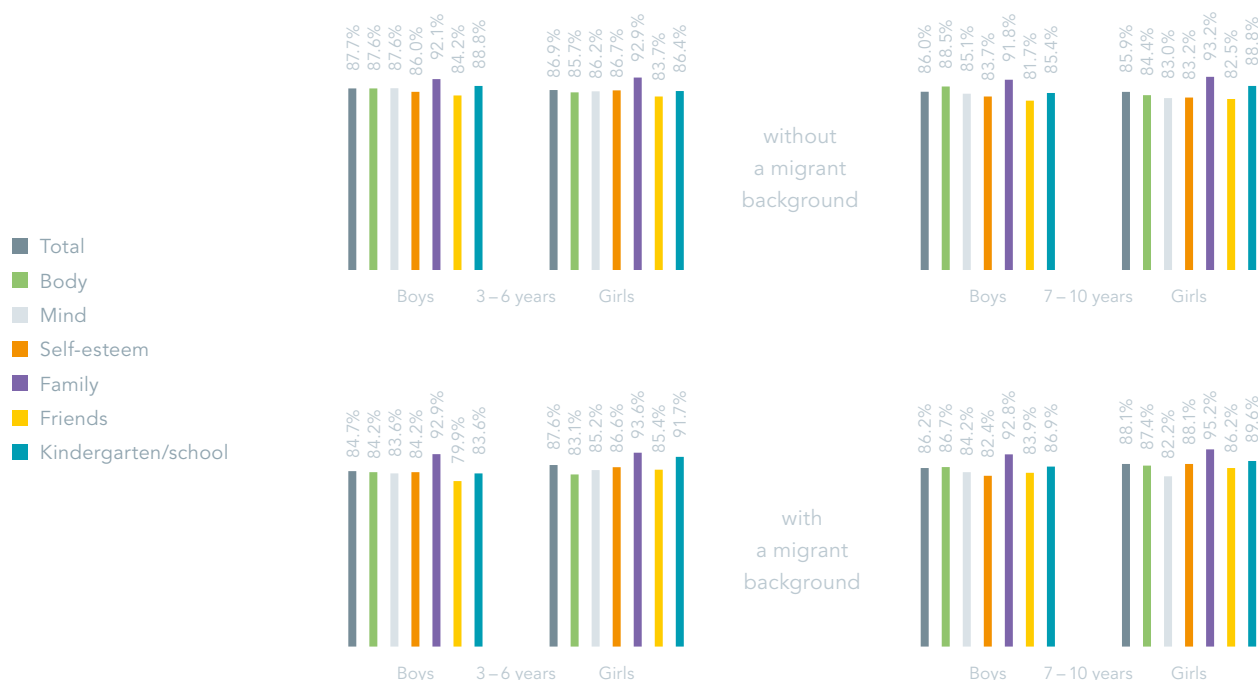


Fig. D11; Source: Statistik Austria (2020), Austrian Health Interview Survey 2019; own representation

For girls, the situation is a little different: the role of kindergarten is much more important for the wellbeing of girls aged 3-6 with a migrant background than for girls without a migrant background. It is of note that among the female primary school pupils, the overall value of wellbeing is higher among girls with a migrant background than among girls without a migrant background.

According to the HBSC (Health Behaviour in School-aged Children) studies conducted between 2010 and 2018, the share of overweight boys increased slightly since 2010 (from 17.8% in 2010 to 20.2% in 2018); the level among girls was lower, but the increase a little steeper (from 10.9% to 13.4%). The share of girls with a positive body image caught up to that of boys (around 50%). Migration experiences are associated both with increased body weight (overweight) and with poorer body image. Furthermore, it was found that school children with a migrant background are much less frequently physically active and use electronic media more intensively than school children without a migrant background.

A health-conscious diet becomes more important with age, both in male and female children and adolescents. However, school children with a migrant background more often consume sugar-rich lemonades and "junk food"; but their consumption of healthy foods is similar to that of school children without a migrant background. The percentage of victims of mobbing has gone down since 2010, more so among boys than among girls (to 9.1% and 7.4%, respectively), as has the share of perpetrators in mobbing.

The study on the cost of schooling conducted by SORA¹⁵⁹ demonstrates that psychosomatic symptoms in children increased with every lockdown. It found that there were almost no differences based on family income. The most common symptoms were tiredness/low energy (54%), followed by despondency (44%), sleeping problems and headaches (both at 32%), back pains (27%), anxiety (25%) and stomach aches (21%).

An impact analysis conducted by the University of Krems on the impact of Covid-19 on the psychological health of adolescents with and without a migrant background¹⁶⁰ found that adolescents with a migrant background had poorer psychological health than adolescents without a migrant background; this is reflected in a higher occurrence of depressive symptoms (65% vs. 57%), anxiety (54% vs. 46%) and insomnia (32% vs. 21%). These findings suggest that easily accessible and available, culturally sensitive and language-specific health promotion as well as prevention strategies for migrant adolescents with psychosomatic problems should be developed.

The intersectionality of migration and disability in children and adolescents is an important topic, but one that has not received sufficient attention in Austria. It is hardly mentioned in the Austrian National Action Plan on Disability.¹⁶¹ Yet it would be important to discover why the share of children and adolescents with a migrant background and a disability is relatively low, while the share of children and adolescents with a migrant background in special needs schools is above average. From an intersectional integration or inclusion perspective, it is necessary to first obtain quantitative data about the size and structure of the group of children and adolescents with a disability and a migrant background and so to complement qualitative data in order to provide professional support to migrant families that have a child with a disability.

GENDER-SPECIFIC HEALTH ASPECTS IN THE CONTEXT OF INTEGRATION

Gender in the health context is both a biological category and a social one. The latter influences behaviour and gender roles. Empirical findings demonstrate that there are differences between men and women not just in mortality and morbidity, but also in health behaviour.¹⁶² Migration medicine takes this into account, as it considers gender-specific aspects (gender medicine), but also categories such as cultural and religious context, language or sexual orientation.¹⁶³ The intersection of migration and gender also relates to knowledge about diseases in the countries of origin that are rare in Austria (e.g. sickle-cell anaemia), as well as to gender-specific health behaviour in the country of origin and in the host country.

Women in general are typically better protected from metabolic, cancer and cardiovascular diseases when young due to the female sex hormones. However, during the menopause the hormones change, and as a result various health risks increase (for instance osteoporosis)¹⁶⁴. There are therefore many differences in the diseases of men and women during the reproductive period, which then dissipate in part with age. The same applies for women with a migrant background.

159 Schönherr, Daniel et al. (2021), AK-Schulkosten-Studie 2020/21.

160 Pieh, Christoph et al. (2022), *The Impact of Migration Status on Adolescents' Mental Health during COVID-19*.

161 Federal Ministry for Labour, Social Affairs, Health and Consumer Protection (2017), *Österreichische Behindertenpolitik 2008–2016*.

162 BMASGK (2019), *Gender-Gesundheitsbericht*.

163 Binder-Fritz, Christine and Rieder, Anita (2014), *Zur Verflechtung von Geschlecht, sozioökonomischem Status und Ethnizität im Kontext von Gesundheit und Migration*.

164 Binder-Fritz, Christine (2005), *Transkulturelle Perspektiven auf die Wechseljahre*.

The Austrian health report 2019, from which this present report derived health indicators by gender and migrant background, shows that there are not just differences between women and men, but also different manifestations for women from the various countries of origin. In Austria, women from the former Yugoslavia (excluding EU) and from Turkey of the same age, the same level of education and the same income as women without a migrant background have a significantly poorer outlook than women without a migrant background or with a migrant background from a pre-2004 EU member state.

The multidimensional influences of gender and migration on health (especially psychological disorders such as depression) imply intersectional collaboration in the fields of prevention and preventive care, the promotion of migration-sensitive individual and institutional health literacy, and gender-specific and migration-sensitive treatment and care. This means pushing forward the interactions between the National Action Plan for integration in the field of health and the National Action Plan for women's health and the National Action Plan for disability.

In the context of psychological disorders, it should be emphasised that experiences of violence and an environment that diminishes self-esteem is a depression risk particularly for women. 35 per cent of the gender difference in diagnosed depressions is due to the high rates of sexual violence towards women and girls. Patriarchal family structures play an important role as triggers. Migrant women and women raised bi-nationally are exposed to increased risk in this regard. In light of this, it should be noted that some 40 per cent of male perpetrators of violence come from abroad or from a culture in which women have a lower status.¹⁶⁵

Furthermore, restrictive and patriarchal male norms favour aggressive, violence-prone behaviour and violence towards women; but they also have negative effects on the psychological wellbeing of men. The promotion of traditional ideas of masculinity is associated with a series of problematic relationship behaviours, such as fear of intimacy, low relationship satisfaction, and negative views of the father role and the father's involvement in childcare. It varies depending on the cultural context and the social location of the individual.¹⁶⁶ The internalisation of "typically masculine" norms such as self-reliance, risk-taking, power over women, low emotionality and homophobia can lead to psychological problems. Men who greatly value self-reliance and power over women are especially affected by depression.¹⁶⁷ Such norms of masculinity also rarely allow men to seek help, as they equate this with a personal defeat. The subjectively perceived humiliation may then strengthen depressive tendencies.

The negative aspects of masculinity can be exacerbated by migration and the integration process. The loss of a privileged status and of the ethnic, traditionally anchored separation of the sexes, as well as of the feeling of belonging in a male world, generates stress and may, in the new cultural and social environment, lead to a disorientation of values, drive disinhibition and/or increased authoritarian behaviour in relations with female family members. These behaviours serve to protect the threatened masculine identity: the first through devaluation of women and the avoidance of connection, the second through the attempt to hold on to the traditions of the original culture.¹⁶⁸ When countering such sources of stress, the lack of stress management strategies may trigger unhealthy behavioural patterns like gambling, excessive consumption of alcohol or drugs, or similar risk behaviours.

¹⁶⁵ Haller, Birgitt (2014), *Tötungsdelikte in Beziehungen*; BMASK (Eds.) (2017), 3. Männerbericht.

¹⁶⁶ See Levant, Ronald F. und Wong, Y. Joel (2017), *The Psychology of Men and Masculinities*.

¹⁶⁷ See Mahalik, James R. et al. (2003), *Development of the Conformity to Masculine Norms Inventory (CMNI)*; Gerdes, Zachary T. and Levant, Ronald F. (2018), *Complex Relationships Among Masculine Norms and Health/Well-Being Outcomes*.

¹⁶⁸ Charlier, Mahrokh (2017), *Ost-westliche Grenzgänge. Psychoanalytische Erkundungen kultureller und psychischer Differenzen zwischen „Orient“ und „Okzident“*.

Another defence mechanism is withdrawal into the community, where restrictive ideas of masculinity can continue to be lived and passed on.

Experiences of violence in private and public spaces are a great health risk not just for women, but also for children.¹⁶⁹ That is why protecting women and children from violence is so important. One major warning signal is the rise in the numbers of femicides in Austria. Female migrants are not sufficiently aware of the possibilities of getting assistance against violence, and cultural as well as language barriers hinder communication. Preventive campaigns and information on institutions that provide assistance should therefore be multilingual and should be targeted at especially vulnerable groups such as female migrants. As stated in the National Action Plan for women's health¹⁷⁰, raising awareness within the healthcare system for victims of violence within relationships and of sexualised violence is important; in particular, the healthcare staff should be trained to handle these women adequately and perhaps direct them towards institutions that provide protection from violence.

¹⁶⁹ FRA (2014), *Gewalt gegen Frauen: eine EU-weite Erhebung*.

¹⁷⁰ Federal Chancellery (2018), *Aktionsplan Frauengesundheit*.

CONCLUSION

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Conclusion

HEALTH IN THE CONTEXT OF INTEGRATION

The coronavirus pandemic focused the public's attention on the healthcare sector – topics like infectious diseases, vaccinations and the healthcare system are discussed broadly today. The analysis of health issues in the context of integration, which is the thematic focus of this year's Integration Report, highlights some aspects that deserve consideration in the context of health policy from an integration perspective (or integration policy from a health perspective). When working to ensure the health of the population, a main goal of policy, the special requirements of the population with a migrant background should be taken into account to achieve this goal.

This approach should consider that migrants in Austria, according to their self-assessments, have poorer health and more frequently suffer from psychological disorders than persons without a migrant background. However, there are major differences based on the country of origin. Empirical findings suggest that the poorer living and work conditions, on average, and the lower level of education – again on average – of persons with a migrant background from the previous countries of origin of guest workers, and to a lesser extent from the EU states of eastern central and south-eastern Europe, are the main reasons for their poorer health.

Furthermore, people with a migrant background take advantage of preventive screening examinations and have full vaccination far less frequently than the majority population. Despite various health problems, they are much less likely to visit a doctor. In this regard too, the health behaviour differs based on the country of origin. In addition, behaviour that negatively affects health (alcohol consumption, smoking, diet) is, on average, more common among persons with a migrant background than among those without a migrant background.

In light of this, a central aim of health and integration policy must be to improve access to the institutions and offerings of the Austrian healthcare system for people with a migrant background. The publishing of information on preventive screening programmes such as mammographies, colon cancer screening and pap smears for women, on health promotion programmes and on nutrition for children in several languages by the social security providers – especially ÖGK – is an important step in this direction. This facilitates the access of migrants to the services of the social security providers. It should eventually result in more migrants taking advantage of the services and participating in the projects and improving their health literacy. Furthermore, the social security providers, especially ÖGK, offer preventive screening programmes for various diseases and programmes to promote health literacy that are adapted to the needs of persons with a migrant background. One such project is "Durchblicker*in", implemented by the Institute for Women's and Men's Health and co-financed by ÖGK. These adult education qualification measures aim at improving the health literacy of persons with a migrant background (but not just them).¹⁷¹ In these projects too, information and documentation is offered in various languages in order to overcome the language barrier.

171 ÖGK (2022), *Durchblicker*in. Health literacy for women and men in adult education*

Facilitating access to information on healthcare services and offerings by providing versions in several languages is just one – necessary and welcome – element in health policy viewed from an integration perspective. Generally, improving the language skills of migrants is also key to improving their ability to communicate in the field of health – whether when talking to the family doctor, at the hospital, in pharmacies or in the event of necessary treatments.

However, health literacy involves more than just the ability to communicate in a language. It also involves the development of self-confidence, the acquisition of skills with regard to recognising and avoiding diseases, and the ability to protect or restore one’s own health. Understanding medical information and the ability to orient oneself in the healthcare system and to know how preventive health services and screenings are obtained are also of central importance. The health knowledge of persons with a migrant background needs improvement, and migrants from certain countries of origin should be particularly targeted.

The Expert Council for Integration recommends that such health knowledge be integrated even more closely into language courses, but also into values and orientation courses. The Austrian Integration Fund already offers its own in-depth courses for women and men on the subjects of psychological and physical health. Furthermore, courses just for women are offered on the subject of protection from violence and autonomy. Health mentors who are speakers of the languages of the countries of origin and are trained in health issues could act as knowledge mediators and multipliers and transmit practice-oriented health knowledge to interested persons in exploratory workshops. Initiatives like “MiMi – Health and health literacy with migrants, for migrants”, a project implemented by the association Volkshilfe and in which intercultural health guides raise awareness about the varied topic of health at information events, are valuable contributions and can serve as best-practice models.

The multidimensional influences of gender and migration on health (especially psychological diseases such as depression) imply intersectional collaboration in the fields of prevention and preventive care, the promotion of migration-sensitive individual and institutional health literacy, and gender-specific and migration-sensitive treatment and care. This means pushing forward the interactions between the National Action Plan for integration in the field of health, the National Action Plan for women’s health and the National Action Plan for disability.

Another important point is to strengthen the healthcare system and specific abilities of the healthcare staff in handling the increasing diversity of Austria’s population. People in health professions who themselves have a migrant background could play a particularly important role in breaking down various barriers to access. From an integration and health policy perspective, increased efforts to motivate women with a migrant background in particular to enter a health profession would be a good idea. Corresponding information events of the Austrian Integration Fund, subject-specific language courses and the integration of multipliers could support this aim. Forms of scholarships could also be considered.

CURRENT AND FUTURE CHALLENGES OF INTEGRATION POLICY

The hosting in Austria of some 72,000 people (as of June 2022) who fled the war in Ukraine has created additional difficult integration tasks. These will likely continue into the coming years, depending on the developments in Ukraine. Austria is able to exploit the institutional integration structures that have become well established over the past years, as well as the numerous integration measures, such as values and orientation courses, language courses, counselling offerings and competence checks. In addition to the direct provision of essentials to the displaced persons, the existing integration structures have by and large demonstrated that they work well, and capacities could be rapidly expanded.

It was also possible to quickly extend the legal framework of integration, for instance the Integration Act and the Austrian Recognition and Evaluation Act (AuBG), to cover the target group of refugees from Ukraine. One feat that deserves to be highlighted is that it was possible to expand language courses that offer childcare as well as specific information offerings in a very short time. The establishment of (Mobile) ServicePoints facilitated access to important information on integration offerings, the labour market and the school system.

The admittance of children and pupils from Ukraine into Austrian schools was also quick and largely unbureaucratic. This was largely enabled by the personal commitment of people both within and outside the education institutions. At the same time, however, the influx drew attention to the limitations in the number of care staff, premises and similar issues; in part, these problems already existed before the arrival of the Ukrainians and could not be quickly resolved.

One important next step is integrating the refugees from Ukraine into the labour market as quickly as possible; given their special status once the temporary right of residence has been granted through the Blue Card, this should in principle happen quickly. At the same time, many Ukrainians are expected to find good opportunities in the Austrian labour market due to their relatively high level of education. However, this is conditional on the existence of full-day childcare options, as the majority are women and many have come with minor children. Of vital importance for integration into the labour market and the associated financial independence is the quick recognition of degrees and the rapid acquisition of German language skills. The online formats for German courses that were developed during the pandemic are a useful addition to tried and tested in-class formats, which should be expanded in the future.

In 2021 alone, the Austrian Integration Fund held more than 1,600 online courses in which almost 100,000 participants could improve their German skills for free. A diverse and flexible offering contributes to cover the needs as best as possible.

The group of persons who fled the war in Ukraine differs from groups from previous migration and refugee flows. It is also governed by another legal framework. Nonetheless, the experiences gained from the integration of the displaced persons from Ukraine will also be usefully applied to integration policy regarding future migrants. This includes for instance the greater bundling of information to complete essential administrative procedures. The increased offering of language and integration courses with childcare options is important for the integration of women with children regardless of their origin.

In light of the tens of thousands of refugees from Ukraine and the number of asylum applications, which is on the rise again since 2021, it should not be forgotten that the integration of the refugees who arrived in 2015/2016 is far from complete. This

is shown for instance by the figures on labour market integration presented in this report. Some two thirds (61%) of women with Syrian citizenship and around one third of Syrian men (35%) were registered as unemployed last year. The integration of migrants who have been in Austria for a longer period is also an ongoing task. This is reflected, amongst others, in a rising share of the long-term unemployed (for more than one year); this can only be countered through targeted labour market and integration policy measures.

The general trend in the labour market is towards an increasing need for labour, especially skilled labour, in various sectors. This should in principle offer migrants good opportunities to find employment or develop professionally. Qualification offerings that consider the needs and opportunities of the labour market should also and especially be targeted at job-seekers with a migrant background.

The arrival of Ukrainians fleeing the war has, in some areas, also highlighted challenges that existed and will continue to exist regardless of the new refugee flow. Pre-school and school institutions were already under tremendous pressure due to earlier waves of refugees and the Covid-19 pandemic. Healthcare institutions are also working at or beyond capacity due to a shortage of staff and additional demands occasioned by the Covid-19 pandemic. The integration of immigrants – whether regular immigrants from other EU countries and third countries, displaced persons from Ukraine or persons entitled to asylum or subsidiary protection from various countries of origin – represents an additional challenge for these institutions: language instruction, catching up on learning contents, social integration, psychological support and also treatment if necessary. These institutions must be supported and maintained in the future, in the interest of integration, but also in the interest of the overall population.

Education and training are major foundations for a future career. Through them, all children, adolescents and young adults living in Austria learn fundamental knowledge, social skills and basic values, but also qualifications that can be exploited in the labour market. The major preconditions for entry into the labour market must be fulfilled by the education system.

Empirical data shows that children and adolescents with a migrant background and a language other than German as their everyday language currently do not learn fundamental qualifications to a sufficient extent. This is a growing challenge, as the share of pupils with German as their everyday language has decreased steadily over the past decade while that of those with an everyday language other than German has increased. Due to demographic dynamics, this development will continue in the coming years.

Besides the insufficient learning of competences, available data also shows that pupils with a migrant background and an everyday language other than German attend upper secondary schools at a rate significantly below the average. This is reflected in a lower level of education, poorer career opportunities and a higher rate of inactivity amongst adolescents and young adults (NEET).

Educational segregation increases the risk of solidifying ethno-social oppositions within society. The demographic trend and the already manifest shortage of skilled workers should lead us to better exploit the potential talent that is already here. One important condition for this would be to transmit to the growing number of children and adolescents with a migrant background and an everyday language other than German the fundamental contents of education and labour market-relevant core competences to a sufficient extent. The goal should be that a greater number of children and adolescents with a migrant background and an everyday

language other than German attend upper secondary schools, obtain their Matura (school-leaving exam) or complete an apprenticeship.

To achieve this goal, afternoons should also be used for teaching. In particular, German support classes should partially be moved to the afternoon to use the mornings for common instruction of all school children and enable greater interaction between school children with and without sufficient German skills. The summer holidays should also be used more intensively than is the case now for support programmes – especially for German – that are especially beneficial to school children with a migrant background and an everyday language other than German. The summer schools, which were introduced in 2020 and have been well received, should, in light of the urgent need, be extended both in their duration (from 2 to 6 weeks) and in their capacity. The offerings of extra-curricular youth work that focus on transmitting language and educational skills should provide additional support.

As in previous years, the Expert Council for Integration recommends strengthening the role of the kindergarten as a central institution of early education. To support children with a migrant background and an everyday language other than German as early as possible, the introduction of a second obligatory kindergarten year as well as kindergarten attendance from the third year of life if possible would be important building blocks to improve their education opportunities.

The handling of a multicultural school environment should be better integrated into teacher training in light of the composition of the school children. Active teaching staff should be provided with corresponding further education measures. Supporting multilingualism amongst the teaching staff and the targeted motivation of school graduates with a migrant background to become teachers could help strengthen the multicultural competence of schools.

Learning German remains a cornerstone of successful integration, and this is true regardless of the country of origin. A common language is a precondition not just for personal success at school, in training or in the labour market, but also for social integration. The fact that not just professional teachers but also many volunteers are working on language transmission is a very welcome development. In light of the high immigration numbers, the societal tasks of integration are likely to increase in the coming years.

ANNEX

From the National Action Plan
to the Integration Report 2022

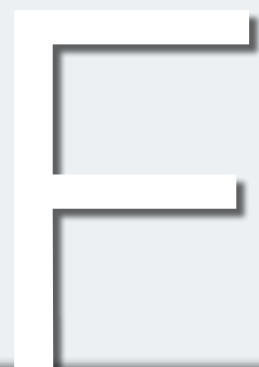
The members of the Expert Council
for Integration

The Expert Council's concept
of integration

List of abbreviations

Glossary

List of references

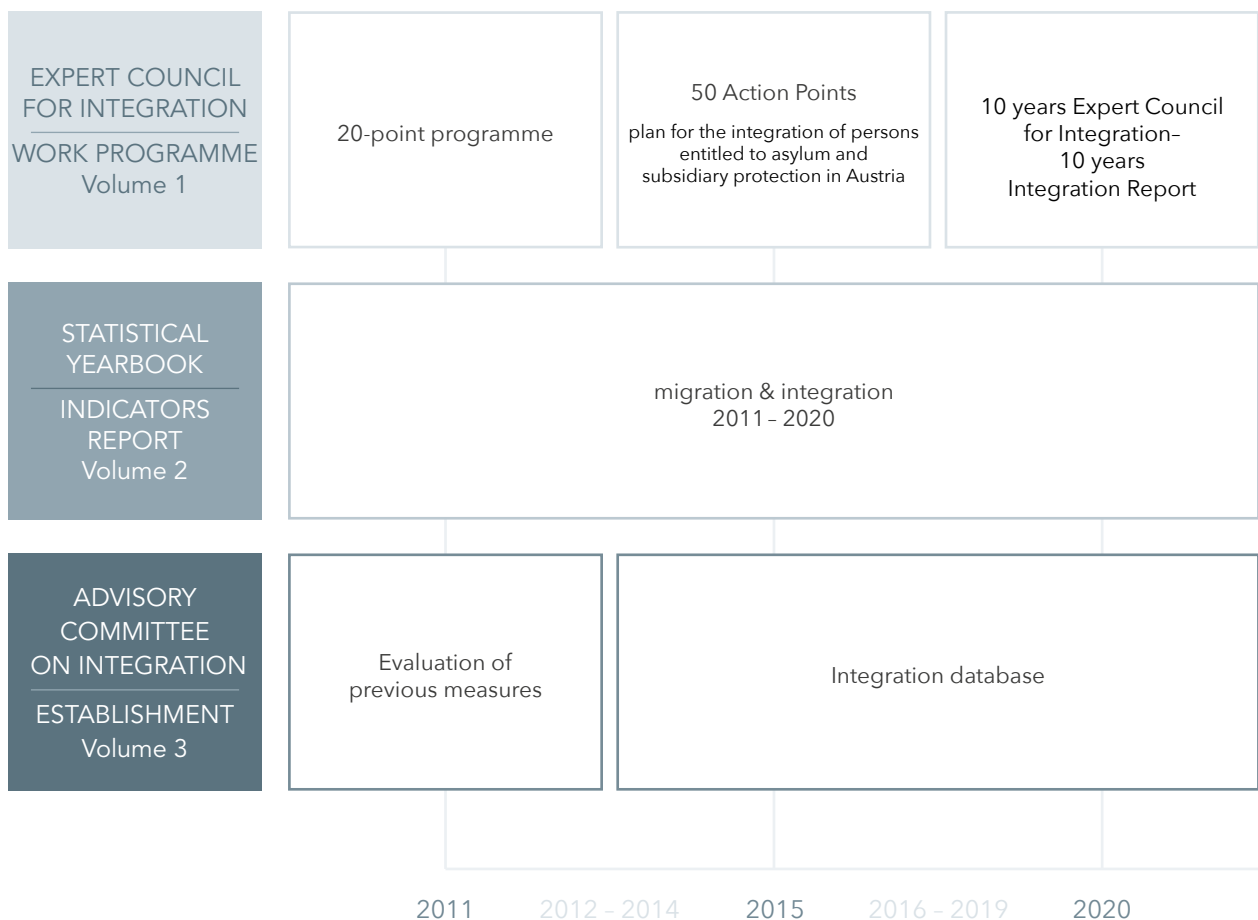


From the National Action Plan to the Integration Report 2022

CREATION
PROCESS

DIALOGUE > EXPERT DISCUSSIONS > CITIZENS' DISCUSSIONS > STEERING GROUP

NATIONAL ACTION PLAN FOR INTEGRATION (NAP.I)





The members of the Expert Council for Integration

CHAIRPERSON



Univ.-Prof. Dr. Katharina Pabel

After holding positions at the universities of Bonn, Graz and Vienna University of Economics and Business, from 2010 to 2020 Dr. Pabel was university professor for public law at Linz University and (from 2015 to 2019) Dean of the Faculty of Law. Since 2020 she is university professor at the Institute for European and International Law at Vienna University of Economics and Business. She is the author of numerous publications on various aspects of constitutional and administrative law; one focus of her research is on the national and international protection of human rights. She has been chairperson of the Expert Council for Integration since February 2018.

MEMBERS



Univ.-Prof. iR. Mag. Dr. habil. Gudrun Biffi

Prof. Biffi is an associate member of the Department for Migration and Globalization at the Danube University Krems. From 2008 to September 2017 she was chair for migration research and head of the Department Migration and Globalisation, and from 2010 to 2015 she was dean of the Faculty of Economics and Globalisation. From 1975 to 2009 she worked as a researcher at the Austrian Institute for Economic Research (WIFO). Her research focuses are in labour market, education, migration, gender, industrial work relations, institutional change and work-related illnesses. Since 2010, Prof. Biffi has been a member of the statistics council of Statistik Austria, from 2015 to 2020 as its chair; she is a member of the scientific council of the Sir Peter Ustinov Institute for studying and fighting prejudices, a member of the scientific council of the OÖ Zukunftsakademie and a member of the "expert group on migration" of the OECD.



Rasha Corti

Rasha Corti, born on 20 July 1982 in Raqqa. After graduating from school in Raqqa she studied literature in Aleppo and trained as a TV moderator in Cairo. While studying she worked at the French Cultural Centre in Damascus and produced documentaries about Syria through various networks (BBC, Al Jazeera). In 2009 she moved to Vienna, where she works as a tour guide and translator. She is also actively involved in various integration projects and as a fellow at the Geneva Center for Security Policy (GCSP).



Mag. Dr. Eva Grabherr

Mag. Dr. Grabherr majored in History and Jewish Studies at the universities of Innsbruck and Vienna and did her doctorate at the Department for Hebrew and Jewish Studies of the University College London. From 1989 to 1990 she was a lecturer at the University of Hull (GB) and from 1990 to 1996, she was the director for the set-up of the Jewish Museum in Hohenems. From 1996 to 2001 she conducted research and taught in Vienna, London, and Innsbruck and organised exhibitions and projects on Jewish studies, museology, Austrian history and contemporary politics. Since 2001 she has worked as director of the province-wide project office “okay.zusammen leben” for immigration and integration in Vorarlberg. She also holds conferences and seminars, including for the migration management course at Danube University Krems.



Dipl.-Soz. wiss. Kenan Güngör

Kenan Güngör, Dipl. Soz., owner of the Büro für Gesellschaft | Organisation | Entwicklung [think.difference] in Vienna. One of the most renowned experts on issues of integration and diversity in Austria, he counsels and supports public and non-governmental organisations at the federal, provincial and municipal level. Amongst others, he has headed many studies and integration-related mission statement processes at the provincial and municipal levels. As strategic consultant, he supported the city of Vienna over many years on integration and diversity issues and was guest professor at Vienna University. Furthermore, he is a member of the Independent Expert Council for Integration of the Austrian government. He was chairperson of the expert forum on prevention, deradicalisation and democratic culture of the city of Vienna and in this role accompanied a comprehensive prevention programme for violence- and fear-free schools in Vienna. Primary areas of focus: social shift, integration, participation, diversity, integration policy strategic development & communication, organisational development, urban sociology, youth, identity, conflict analysis, devaluation and radicalisation.



Prof. MMag. Dr. Ilan Knapp

Prof. Knapp, born in Tel Aviv, Israel, completed a music pedagogy degree in Israel and Vienna as well as a degree in business administration, economic education and business psychology at the Vienna University of Economics and Business. Founder and director of important public institutions including in education (JBBZ Jüdisches berufliches Bildungszentrum 1995) and research (ÖIBF Österreichisches Institut für Berufsbildung Forschung 1970). Lecturer at TU Wien. He has been the official representative of the Jewish Agency for Israel (Sochnut) in Austria since 2014. Prof. Knapp also taught for many years at Vienna University, WU Vienna and FU Berlin. He has also directed EcoPlus and the NÖG Niederösterreich and was a parliamentary advisor for labour market, economic, youth, social and education issues. In 2018, Prof. Knapp was awarded the Austrian Cross of Honour for science and art 1st class.



Prof. Dr. Klaus Lugger

Prof. Dr. Klaus Lugger, born on 07/03/1948, was managing director of NEUE HEIMAT TIROL Gemeinnützige WohnungsGmbH (114 million euros construction volume p.a., 34,000 managed units of which 17,571 rental and ownership apartments) from 1989 to 2016 and director of the commercial subsidiary INNSBRUCKER STADTBAU GMBH from 2004 to 2016. From 1995 to 2016 he was chairperson of the supervisory board of the Austrian association of non-profit building associations (Österreichischer Verbands gemeinnütziger Bauvereinigungen - Revisionsverband) and Austrian representative at CECODHAS HOUSING EUROPE, the EU lobby for non-profit housing construction. For many years, Prof. Dr. Lugger was also a parliamentary advisor on housing law issues and a lecturer at the University of Innsbruck and the University of Applied Sciences Krems and University of Applied Sciences Kufstein. He has authored many publications on housing law, history of housing law and housing law statistics.



Univ.-Prof. Dr. Wolfgang Mazal

Prof. Mazal, born in Vienna, studied law at Vienna University, graduating in 1981. Since 1992 he is a professor there, at the Institute for Labour and Social Law. In addition to wide-ranging teaching, research and publication activities amongst others in Vienna, Graz, Linz, Innsbruck, Beijing and Kyoto on topics of labour law, social law, medical law and family affairs, Prof. Mazal is currently vice-chairperson of the Institute for Labour and Social Law at Vienna University, Head of Department of the Austrian Institute for Family Studies (Österreichisches Institut für Familienforschung) at Vienna University and vice-president of the board of the agency for quality assurance and accreditation AQ.Austria.



Dir. Dr. Arno Melitopulos

Dr. Melitopulos, born in Innsbruck, completed his degree and doctorate studies in law in Innsbruck. Since January 2020 he has been director of the area health system and economics at Österreichische Gesundheitskasse, from August 2011 till 2019 he was director of Tiroler Gebietskrankenkasse (TGKK). He is also the coordinator of Zielsteuerung Gesundheit in Tyrol. Previously he was director of Gesundheit Österreich GmbH (GÖG) in Vienna from 2008 to 2011. Between 2005 and 2008, Dr. Melitopulos was the head of the department for strategy and law at TGKK, as well as being the managing director of the Tiroler Gesundheitsfonds (TGF) from 2006. Between 2003 and 2005 he was advisor to the Health Minister for the health reform of 2005. Dr. Melitopulos is a university lecturer for social law, public health and health system studies and has lecturing positions at the Medical University of Innsbruck, at the Management Center Innsbruck as well as at UMIT TIROL.



Univ.-Prof. Dr. Rainer Münz

Rainer Münz currently teaches at the Diplomatic Academy in Vienna and at the Central European University in Budapest/Vienna. From 2015 to 2019 he was Senior Advisor for Migration and Demographics at the European Political Strategy Centre, the think tank of EU Commission President Jean-Claude Juncker. From 2015 to 2019 he was chairperson of the Migration Advisory Board of the UN Organisation for International Migration (IOM) and since 2014 he is one of the people responsible for the World Bank programme "Global Knowledge Partnership on Migration and Development" (KNOMAD). Previously, Rainer Münz headed the research department at Erste Group and was Senior Fellow at the Brussels think tank Bruegel, at the Hamburg Institute of International Economics (HWWI) and at the Migration Policy Institute (Washington DC). In 2000-2001 he was member of the commission to reform immigration policy of the German federal government (Süssmuth Commission). From 2008 to 2010, Rainer Münz was member of the reflection group "Horizon 2020-2030" of the European Union (so-called "EU Eminent Council")



Prof. Emina Saric, MA

Emina Saric, prof., MA born in 1969 in Banja Luka, Bosnia and Herzegovina, studied German language and literature in Sarajevo, completed Montessori training at the Pädagogische Hochschule in Graz, and gender studies at the University of Graz. Chairperson of the supervisory board of the Austrian Fund for the Documentation of Religiously Motivated Political Extremism. Many years of project work in German as a second/foreign language and in intercultural learning. In 2011, cofounder of the women-focused counselling centre Divan, where she worked until 2018 as counsellor and deputy project manager. She currently teaches at the Training Centre for Social Professions (Ausbildungszentrum für Sozialberufe), works as a lecturer and education manager at Private Pädagogische Hochschule Augustinum in Graz and is active in the association for men and gender issues in Graz as project manager of the project "Heroes Steiermark" and as an independent consultant. She has been awarded the Intercultural Achievement Award 2020, the special prize "Integration in Österreich", the Human Rights Award of the Federal Province of Styria 2021 and the Golden Award of the Province of Styria for her work.



Ao. Univ.-Prof. DDr. Christian Stadler

Prof. Stadler is a doctor of law and a philosopher. Since 2000 he has been visiting university professor at the Institute for Legal Philosophy of the Faculty of Law of Vienna University. He is a member, amongst others, of the science commission (strategic security council) at the BMLV. Prof. Stadler regularly holds guest lectures at the security academy of BM.I (.SIAC, Vienna or Wiener Neustadt), at Theresianische Militärakademie military academy (MilAk, Wiener Neustadt) and at the Landesverteidigungsakademie defence academy (LVAK, Vienna). He is currently director of the research project "Polemologie und Rechtsethik" at the Landesverteidigungsakademie defence academy in Vienna (in collaboration with Vienna University). The focus of his work includes: political philosophy of modernity (rationalism, idealism, political romanticism), ethics of public security, political philosophy of international relations, polemology and geopolitics and European legal and constitutional culture.



Dr. Hans Winkler

Hans Winkler is a freelance journalist, columnist for the daily Die Presse and guest author for Kleine Zeitung and other media. From 1995 to 2007 he was head of the Vienna edition and deputy chief editor of Kleine Zeitung. He studied law at Graz University.



Mag. Renate Winter

Mag. Renate Winter was appointed judge in 1981 in Austria. Her areas of expertise include women's and youth rights, war crimes, crimes against humanity, gender issues, organised crime and restorative justice. As part of the UN mission in Kosovo (UNMIK), Mag. Winter served as an international judge in Kosovo's supreme court. In 2002 she was appointed to the special tribunal for Sierra Leone, also holding its presidency. In 2013 she was appointed member of the UN Committee for the Rights of the Child (CRC) and was elected president of this Committee. Mag. Winter also served as consultant in legal issues for governments and international bodies in more than 40 countries. Until February 2021 she was president of the CRC and team leader of an EU project to promote the rule of law in Georgia. Today Mag. Winter is a member of the Residual Court of Sierra Leone (RSCSL) and a consultant for the Ministry of Education, Children and Adolescents of Luxembourg, where she is promoting the development of a new youth protection and criminal system.

The Expert Council's concept of integration

The Expert Council for Integration views integration in the immigration society as the empirically quantifiable participation in the central areas of social life, which must be internationally supported and based on equality as much as possible. These areas of social life include preschool facilities, scholastic education, occupational training, employment and living space. This is done through voluntary work, policy, the various protective and precautionary systems in the constitutional and welfare state, and recognition of and identification with Austrian values.

Integration-promoting measures are all efforts to enable ideally equal-opportunity participation and to counter existing fears and prejudices. German language skills, educational and professional qualifications, but also explanatory and symbolic political measures are important to increase the opportunities of immigrants to participate. On the other hand, the Expert Council for Integration views the increasing integration competence of the institutional basic structures of the state, which should also be intentionally promoted, as a further important precondition for successful integration. School, the Public Employment Service, the authorities, hospitals, civil society and other important institutions should increasingly be enabled to develop intercultural (communication) skills.

The Expert Council for Integration thus locates the concept of integration not in a semantic scale between assimilation on the one hand and integration as a patchwork of different population groups, each possessing and living their own cultural and value systems, on the other hand, but rather places itself above this. In its understanding of the concept, the Expert Council for Integration also moves aside an unclearly defined and ideologically burdened concept of culture. A static and essentialist concept of culture would not live up to the reality of a pluralistic and changing immigration society. The end goal is neither a perfectly assimilated society, nor an alienated patchwork of various social groups, but a pluralistic coexistence that needs to be permanently renegotiated. Both sides in an immigration society must therefore develop something like a pluralism competence in addition to an acceptance and integration competence, because over time society is becoming both more similar and more diverse. Accordingly, integration continues to be viewed as a mutual process whose functioning requires effort.

The immigrants are as responsible for successful integration as the population that is already here. Both sides of the immigration society act within a framework defined by governmental policy, which can promote or prevent processes. The required adaptation effort is not symmetrically distributed; from the logic of quantity alone, the immigrating population is more challenged than the host society. This needs to be stated to avoid illusory misunderstandings. However, it is also true for the host society that "making space" is the precondition for "taking space". Without a willingness for openness on both sides and without mutual acceptance of the supposed "other", the integration process cannot work. This is something that a goal-oriented integration policy must always bear in mind.

List of abbreviations

AHS Academic secondary schools	EU European Union
AMIS Arbeitsmarktinformationssystem [Labour market information system]	EUROSTAT European Statistical Office
AMS Arbeitsmarktservice, [Austrian Public Employment Service]	GB United Kingdom of Great Britain and Northern Ireland
BCS Bosnian/Croatian/Serbian	ICMPD International Centre for Migration Policy Development
BHS Berufsbildende höhere Schule [higher vocational school]	IntG Integration Act
BKA Bundeskanzleramt, [Austrian Federal Chancellery]	NAP.I Nationaler Aktionsplan für Integration, [Austrian National Plan for Integration]
BMA Bundesministerium für Arbeit, [Austrian Federal Ministry of Labour]	NEET Not in Education, Employment or Training
BMBWF Bundesministerium für Bildung, Wissenschaft und Forschung, [Austrian Federal Ministry for Education, Science and Research]	MS Middle school; since the schoolyear 2020/2021 MS has replaced the new secondary school (NMS)
BMI Bundesministerium für Inneres, [Austrian Federal Ministry of the Interior]	OECD Organisation for Economic Co-operation and Development
BMS Berufsbildende mittlere Schule, [intermediate vocational school]	ÖIF Österreichischer Integrationsfonds, [Austrian Integration Fund]
Covid-19 Coronavirus disease 2019	UNHCR United Nations High Commissioner for Refugees
EEA European Economic Area	WHO World Health Organization
EFTA European Free Trade Association	

Glossary

RESIDENCY TITLES

Third-country nationals who reside or wish to reside in Austria for longer than six months or as holders of an "ICT" residence title from another member state require a residence permit. However, if they are entitled to residence under European Union law, they do not require a residence title. Nationals of an EU/EEA state or of Switzerland do not require a residence title. However, they must apply for a certificate of registration within four months of their arrival. Residence titles are always granted for a specific purpose.

NON-REGULAR PUPILS

See German support classes and German support courses.

ENTITLED TO ASYLUM OR RECOGNISED REFUGEES

People entitled to asylum or recognised (convention) refugees are persons whose asylum application had a positive conclusion. Asylum applications are to be concluded positively when the conditions of the Geneva Refugee Convention are satisfied. If asylum applicants can credibly assert that they are threatened with individual persecution in their country of origin due to their race, religion, nationality, affiliation with a specific social group or due to their political beliefs, and they are unable to rely on protection from their home country, they are to be recognised as persons entitled to asylum. They are granted an initial three-year residence permit ("temporary residence") in Austria. This is extended indefinitely if the requirements for revocation proceedings are not met, or if such proceedings are discontinued. For example, asylum status must be revoked if the reasons for flight are no longer applicable or if the individual has committed a serious crime. Persons entitled to asylum are equal to Austrian citizens in many ways, such as with regard to labour market access, access to welfare benefits, or access to higher education.

ASYLUM PROCEDURE

At the start of the asylum procedure a check is made to see whether Austria or another EU state is responsible for processing the asylum application (eligibility procedure or Dublin procedure). If Austria's responsibility is confirmed, the matter must be continued in Austria. An accelerated process ("fast track" process) is utilised when an asylum seeker submits an asylum application from a safe country of origin. Safe countries of origin are states in which no political persecution or inhumane or degrading punishment occur.¹⁷²

¹⁷² Austrian Federal Office for Immigration and Asylum (BFA) Information Brochure "Asylum procedure in Austria", p. 18.

ASYLUM APPLICANT

The term “asylum seeker” refers to an individual undergoing the asylum process. For the duration of the process, asylum seekers are residing in Austria legally, whereby they must remain within the district assigned to them during the admission procedure.

BLUE CARD

Displaced persons from Ukraine have a temporary right of residence in Austria. This right of residence currently applies until 3 March 2023 and can be extended. The right of residence is documented by an “ID for displaced persons” (= Blue Card). The Blue Card is sent by mail following registration with the police as a displaced person. The Blue Card gives displaced persons access to the Austrian labour market, to health insurance and to the education system.

GERMAN SUPPORT CLASSES AND GERMAN SUPPORT COURSES

Pupils for whom it is not possible to follow classes due to insufficient knowledge of the language of instruction may be assigned the status of “non-regular pupil” following a standardised test. The categorisation as non-regular pupil is possible for at most two years. Non-regular pupils with lacking knowledge of the language of instruction receive intensive language lessons during this time in accordance with a separate schedule, but they also attend regular classes in selected subjects (e.g. sports, art, music etc.) depending on individual and organisational conditions. After the first semester of such a German support class, the language level is evaluated again.

THIRD-COUNTRY NATIONALS

Third-country nationals are persons who are neither EU citizens nor citizens of other EEA states (Iceland, Liechtenstein, Norway) nor Swiss.

NATURALISATIONS

Austrian citizenship can be obtained through birth, by being granted, and by extension of the granting. For Austrian citizenship to be granted, at a minimum the general conditions for naturalisation must be fulfilled and an application submitted. The additional conditions for granting depend on whether the nationality is to be granted based on a legal right or within the decision competency of the responsible authority.

HEALTH LITERACY

Health literacy describes the abilities and motivation to acquire the necessary skills and knowledge about adequate health behaviour in order to place disease prevention and management and health promotion at the service of maintaining a life-long quality of life for the family and the environment. The term “health literacy” describes the complexity of the requirements to maintain health in modern societies marked by socio-cultural and political transformation.

INTEGRATIONSGESETZ (INTG) – AUSTRIAN INTEGRATION ACT

The Integration Act governs, in the fields of language and orientation, the central conditions for the integration of persons entitled to asylum and subsidiary protection, legally resident third-country nationals, and displaced persons. It governs integration offerings and duties of collaboration. Integration offerings for people entitled to asylum and subsidiary protection include German and values courses, while legally resident third-country nationals must provide evidence of their German skills as part of the integration agreement and displaced persons can attend German and orientation courses.

INTEGRATION MONITORING

The Integration Act of 2017 introduced Integration Monitoring, according to which the responsible members of the Advisory Committee on Integration provide legally prescribed non-personal data every year for the purpose of interdisciplinary connection. The data cover the areas of asylum and residency, school and adult education, welfare benefits, labour market, German courses, values and orientation courses and science. In the Integration Report the Expert Council for Integration addresses and contextualises annual developments based on the Integration Monitoring.

TEMPORARY PROTECTION DIRECTIVE

On 3 March 2022, the member states of the EU activated the Temporary Protection Directive (2001/55/EC) for the first time to provide protection to refugees from Ukraine. Temporary protection is a mechanism that can be applied in the event of a mass movement of people in order to immediately and collectively (i.e. without prior verification of individual applications) grant protection to persons who cannot return to their country of origin. In Austria, the Temporary Protection Directive was implemented through the federal government’s decree on a temporary right of residence for displaced persons from Ukraine (Displaced Persons Decree).

MIGRANT BACKGROUND: FIRST AND SECOND GENERATION

According to Statistik Austria, persons have a migrant background when both parents were born abroad. This group can then be divided into an immigrating generation (persons who themselves were born abroad, first generation) and a second generation (children of two parents born abroad but who themselves were born here). This definition of migrant background follows the “Recommendations for the 2020 censuses of population and housing” of the United Nations Economic Commission for Europe (UNECE).¹⁷³

173 Statistik Austria (2022), *Bevölkerung in Privathaushalten nach Migrationshintergrund*.

NATIONAL ACTION PLAN FOR INTEGRATION (NAP.I)

The National Action Plan for Integration presents the integration strategy of the Austrian federal government. Its objective is to optimise, consolidate and systematically develop the measures for successful integration taken by the federal government, federal provinces, cities, local authorities, social partners and civil society organisations. The National Action Plan is the basis for further measures in the seven key action areas: language and education, work and profession, rule of law and values, health and social affairs, intercultural dialogue, sports and leisure, housing and the regional dimension of integration.

ENTITLED TO SUBSIDIARY PROTECTION

When a person cannot credibly claim persecution within the meaning of the GRC (see entitled to asylum and recognised refugees), their asylum application should be rejected. Due to the European Human Rights Convention (EHRC), which was ratified by Austria and is anchored in its constitution, a person can nonetheless not be expelled if their life and health are threatened in their country of origin due to war or torture ("non-refoulement"). Such persons are designated as entitled to subsidiary protection and receive a residency permit restricted to one year and that can be (repeatedly) extended by two years. The status can be revoked under certain circumstances (e.g. because of a crime). People entitled to subsidiary protection do not necessarily have the same rights as people entitled to asylum; in individual cases they have fewer rights.

DISPLACED PERSONS

Displaced persons, within the meaning of Austrian law, are persons who are granted temporary residence on the federal territory for the duration of an armed conflict or other circumstances affecting the safety of entire population groups. In the wake of the war in Ukraine, and to implement the EU's Temporary Protection Directive, displaced persons from Ukraine are granted such temporary protection, which is documented after registration with an ID card for displaced persons (Blue Card).

VALUES AND ORIENTATION COURSES

At the centre of the values and orientation courses is the transfer of Austrian values and lifestyle to third-country nationals - in recent years especially people entitled to asylum and subsidiary protection from the refugee cohort of 2015/2016. The taught contents include the fundamental values of the Austrian constitution, such as gender equality between men and women, human dignity, the separation of religion and state, democracy, freedom of opinion, the rule of law, but also everyday knowledge of life in Austria. Since June 2017 participation is obligatory by law. The three-day values and orientation courses are held in all federal provinces in the new Integration Centres of the Austrian Integration Fund.

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