

# **LONG-TERM CARE**

Long-term care refers to care services for people who are frail, ill or disabled in order to help them with the basic activities of their daily life. Population ageing, changing family structures and women's increased participation in the labour market all contribute to the increased demand for these services. At the same time, access to affordable and good quality long-term care is already an issue in many Member States, and the financial sustainability of these services is also under pressure.

# Challenges

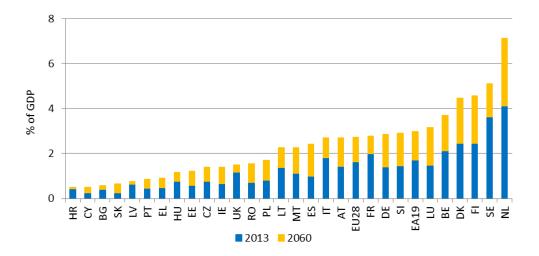
Population ageing is likely to lead to a huge increase in the need for long term care, and over the next five decades the number of Europeans aged over 80 is expected to triple. Moreover, changes in living and family arrangements, a rise in female employment rates and higher retirement ages will reduce the availability and desirability of informal care provided by family members.

In view of often unavailable or costly care provided in institutions or/and underdeveloped home care provision, informal care by families (usually provided by women) is often the only option. Family care puts a financial burden not only on those involved but it also reduces the number of those available to work, with costs for the economy and public budgets. Access to long term care services is thus important to promote work-life balance for family members with dependent relatives, especially women, so that caring responsibilities do not create an obstacle to labour market participation.

Current barriers to accessing adequate long-term care systems include insufficient coverage of certain types of care, lack of insurance coverage, high financial costs, geographical disparities in supply, lengthy waiting lists for certain treatments, lack of information, and complex administrative procedures.

Public spending on long-term care is rising across the EU and the trend is likely to continue due to the ageing of the population. Public expenditure is projected to increase by two thirds from 1.6% of GDP in 2013 to 2.7% in 2060, with the highest spenders like the Netherlands or Sweden reaching more than 5% of GDP by 2060. In order to establish and maintain access to adequate long-term care services it will therefore be important to find ways to guarantee the financial sustainability of these systems. Figure: Public expenditure on long-term care as percentage of GDP, 2013 and 2060

## Public expenditure on long-term care, %GDP 2013 and forecast for 2060



Source: 2015 Ageing Report

## Situation at EU level

The Charter of Fundamental Rights of the EU recognises the rights to human dignity to integrity and to access to health care. It also sets out principles relating to the protection of the elderly and of persons with disabilities, as well as to access to social security and social assistance and to services of general economic interest.

According to the EU Treaty, long-term care provision is a Member State's responsibility as a strand of social protection. While EU countries set their own level and organisation of long-term care provision, they have agreed in the context of the Open Method for Coordination on three common objectives, namely to guarantee access to adequate care, to promote its quality and to ensure its affordability and sustainability. The Employment Guidelines emphasise the need to improve the quality, accessibility, efficiency and effectiveness of long-term care systems, while safequarding sustainability and their role in reconciliation of family and work life.<sup>1</sup>

#### Situation in the Member States

There are more pronounced differences between Member States in the way long-term care is provided than in any other aspect of social protection. In nearly all Member States, informal family care plays a major role, but the extent to which this is complemented by formal care varies widely, reflecting perceived needs, social traditions and financial means. The way formal care is organised, financed and delivered is also very different across Europe.

#### International dimension

In addition to ILO conventions providing for old age benefits and essential health care over the life cycle<sup>2</sup>, the UN Covenant on Economic, Social and Cultural Rights recognizes the right of everyone to the enjoyment of the highest attainable standard of physical and mental health while the Council of Europe Recommendation on the promotion of human rights of older persons covers the major challenges faced by older people: autonomy and participation, social protection and employment, care, protection from discrimination and violence and abuse, and the administration of justice.

<sup>&</sup>lt;sup>1</sup> Council Deciosion 2015/1848 of 5 October 2015 on guidelines for the employment policies of the Member States for 2015

<sup>&</sup>lt;sup>2</sup> ILO Social Security (Minimum Standards) Convention, 1952 (No. 102) is the flagship of the eight up-to-date social security Conventions and is the only international Convention which defines the nine classical branches of social security and sets minimum standards for each, including medical care.