Building Social Europe
Social Platform’s Flagship Conference

Study visit and workshop on long-term care

Long-term care at EU level: The views of European civil society
COFACE Families Europe

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COFACE Families Europe
• **Pluralistic** organization
• Founded in **1958**
• **58** organisations in **23** Member States
• “A better society for **all families**”
• **Values**: Non-discrimination, Human rights, Social inclusion, Gender equality, solidarity, empowerment
• **Holistic – life cycle approach**
• **Advocate** for the rights and interest of all types of families
FAMILIES AND LONG-TERM CARE IN EUROPE – STATE OF PLAY

GENDER ASPECT:
Working carers part-time work:
Women: 50%  Men: 10%  
For 31% of inactive women caring responsibilities are the main reason for dropping out the labour market

RECIPIENTS:
Persons with disabilities or chronic conditions, elderly people

Increasing need with demographic change: 1 out of 3 European will be 65+ in 2080

RANGE OF SERVICES:
ADLs/IADLs rehab, transport, housing, basic medical treatment, nursing, meals, occupational therapy, household chores, meal preparation, managing money...

SUPPLY:
Residential Care Centres  Community-based services  Domestic workers (often migrants)  Family members (80%)

FAMILIES HAVE TO INVEST GREAT AMOUNTS OF MONEY AND TIME IN LTC due to the lack of social protection, affordable services and flexible working arrangements

FINANCING:
High costs  Maketization of the sector  Fragmentation at EU level  Public financing never covers it completely

1,5% GDP is the average public spending of OECD countries on LTC but it covers just a small part of the costs of LTC leaving the rest to families

FAMILIES AND LONG-TERM CARE IN EUROPE – STATE OF PLAY
COFACE ACTIONS

TRANSITION FROM INSTITUTIONAL TO COMMUNITY-BASED CARE

FUNDING OF LTC

MIGRATION AND DOMESTIC WORK

HOLISTIC LTC ADDRESSING NEEDS OF RECIPIENTS, CARERS AND STAFF

RECOGNITION CONDITIONS AND RIGHTS OF FAMILY CARERS

A BETTER SOCIETY FOR ALL FAMILIES
2007 – 2017 EUROPEAN CHARTER FOR FAMILY CARERS

Objectives:
• Raise awareness on the situation of family carers
• Highlight the gender dimension of family care
• Give recognition to family carers
• Reference tool for civil society and EU institutions
2017 - WHO CARES? STUDY ON THE CHALLENGES AND NEEDS OF FAMILY CARERS IN EUROPE

- 16 EU countries
- 1060 answers
- 85% women aged 35-64
- 27% providing care for more than one person
- 73% is receiving no financial compensation for their caring work
- 31% receiving no help in their caring tasks
- 1 every 3 having an hard time to make ends meet and feeling social isolation
- PREFERRED FORMS OF SUPPORT: person-centred flexible solutions in-home nursing care,
- respite, personal assistance
Combining work with family care is very complicated. There is a rejection and a total incomprehension for the situation you are suffering from.

'I've lost my job because of the disability of my son.'

Caring for a person should be regarded as a REAL job even if it is done with LOVE.

'No job, no recognition from the State, therefore there isn't any remuneration.'

The conditions in which my house is, due to the fact that I cannot work and don’t have money, seriously contributes to the deterioration of my health.

'Policy makers must take us seriously, without us, everything collapses.'
## FINANCIAL SUPPORT TO FAMILY CARERS

### Countries that financially support informal care for moderate needs

<table>
<thead>
<tr>
<th>No support</th>
<th>Provide support</th>
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</thead>
<tbody>
<tr>
<td><strong>Support the care recipient</strong></td>
<td><strong>Support the informal carer</strong></td>
</tr>
<tr>
<td>Scandinavian countries</td>
<td>Belgium (Flanders), Netherlands, Czech Republic,</td>
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<tr>
<td></td>
<td>England, Iceland, Korea, Latvia, Luxembourg, Spain,</td>
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<tr>
<td></td>
<td>Slovenia, Israel, Croatia, United States, Germany</td>
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<tr>
<td><strong>Support spouse &amp; child differently</strong></td>
<td>Belgium (Flanders), Netherlands, Canada (Nova Scotia)</td>
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<tr>
<td></td>
<td>Australia, Ireland, Finland, Slovakia</td>
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<tr>
<td></td>
<td>Belgium (Flanders), France</td>
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<td></td>
<td>Both countries support adult children more than</td>
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<td></td>
<td>spouses</td>
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</tbody>
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Some countries expect the care recipient to pay the informal carer, but there is no obligation.
The societal debate on supply of care, costs, eligibility, financing, intergenerational fairness, inclusion, gender equality, tackling these issues

- **MORE FUNDING:** enlarge contributory base and develop innovative schemes
- **BETTER TARGETING:** ensure that everyone who needs LTC is able to afford it, by better testing of income and on the LTC impact on wealth
- **BETTER SPENDING:** more prevention and rehabilitation, information and coordination

**LTC SPENDING AND FINANCING**

![Image of LTC spending and financing chart](chart.png)

Source: OECD, Health Statistics, 2017
2018 – POSITION PAPER
LONG-TERM CARE: THE FAMILY DIMENSION

• Mainstream long-term care in EU policy initiatives
• Drive policy reforms in a more integrated and holistic way solving the fragmentation between the health and social sectors
• Life-cycle approach
• Tackle the needs and rights of formal carers, family carers and persons with long-term care or support needs
• European Recommendations on Family and Informal carers
KEY DEMANDS

NATIONAL LEVEL
1. Access to community-based services
2. Right to choice
3. Health prevention
4. Legal recognition and social security to family carers
5. Work-life balance policies for carers
6. Better working conditions of the LTC sector
7. Informations and support
8. Involvement, inclusion and awareness-raising

EU LEVEL
1. Policy reform towards holistic long-term care
2. Improve the social protection of persons in need of care and family carers
3. Research innovation and data collection
4. Monitoring and evaluation of national reforms
5. Transformative EU funding investments
THANK YOU!

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