Healthy Ageing and the need for long-term care systems accessibility, sustainability, quality and ageism

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Ageism - Misperceptions

Care dependency ratio
Families are the backbone of care
To care for older people you don’t need training
Unpaid care $\leftrightarrow$ institutional care
Cultural Norms and Views

The value of family and paid care
The role of women
The value of older people
Terminology

- Informal and formal care
- Paid and unpaid care
- Organized and unorganized care
- Trained and untrained
- Regulated and unregulated
Populations are getting older

Percentage aged 60 years or older:
- Dark blue: 30% or more
- Light blue: 10 to <30%
- Gray: <10%

2015

World Health Organization
Global strategy and action plan 2016-2020

“Every country should have a LTC-system”

Strategic Objective on Long Term Care

“Establish and continually improve the foundations for a sustainable and equitable long-term-care system

Build workforce capacity and support caregivers

Ensure the quality of person-centred and integrated long-term care"
Long-Term Care:
from service-oriented to person-centred approach
Healthy ageing and long-term care

- High and stable capacity
- Declining capacity
- Significant loss of capacity

Functional ability
Intrinsic capacity

long-term care
What is Long-Term Care?

“...the activities undertaken by others to ensure that people with, or at risk of, a significant ongoing loss of intrinsic capacity can maintain a level of functional ability consistent with their basic rights, fundamental freedoms and human dignity"

WHO 2015
Focus of Long-Term Care on:

- Peoples’ needs
- Focus on trajectory of functional ability
- Not merely taking over, but stimulating to do as much possible themselves
- Not only focusing on meeting older people’s basic needs for survival, but also people’s abilities:
  - to move around,
  - to build and maintain relationships,
  - to learn, grow and decide, and
  - to contribute to their communities

People have the right and deserve the freedom to realize their continuing aspirations to well-being, meaning and dignity, and a good life, even in the event of significant loss in intrinsic capacity.
Long-term Care

Can be delivered in a range of settings:
- at home
- communities
- hospitals
- care homes

Can be delivered by a range of caregivers:
- Family, friends, volunteers, paid help, professionals
- Paid or unpaid
- Trained or untrained

Can be financed thru different mechanisms
LTC-systems: Current Global Situation

Many countries rely almost entirely on families
  - **Challenge is to start from scratch**

Some countries (JP, NL) have well established systems
  - Generous set of services
  - Mandatory insurance schemes, tax revenues, own contributions
  - **Challenge is continuous improvement (f.i. integration) and sustainability**
UNIVERSAL HEALTH COVERAGE
Challenges

- Accessibility to paid and unpaid care
- Financial sustainability
- Quality of care
Accessibility of unpaid care

- Many older people have no family
- Women are increasingly aspiring to other economic and social roles

Changing social structures: less children, children move to urban areas for work

Engagement of:
- males, non-family members
- other generations
- volunteers, peers
Accessibility of paid care

Lessons from the field

Volunteer provision of long-term care for older people in Thailand and Costa Rica
Peter Lloyd-Sherlock, Anne Margriet Pot, Siriphan Sasat & Fernando Morales-Martinez

Role of cultural norms and views for accessibility

Bulletin of the World Health Organization
Volume 95, Issue 11, November 2017
Financial sustainability
**Healthy Ageing** is an investment, not a cost

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Quality of care: Support for unpaid caregivers

Supporting: f.i. caregiver training, respite, payment/vouchers

Complementing: f.i. home-based care

Supplementing: day-care or nursing home care
Quality of care: 
Building the paid workforce

- Ensuring supply
  increasing pay and benefits, improve working conditions (training, career opportunities, appropriate workloads, flexible work hours, giving care workers authority to make decisions)

- Training and accreditation
  person-centred care, supervision, licensing, care standards and guidelines, etc.

- Improve image and status
Women on the Move
Migration, care work and health

World Health Organization
LAYING THE FOUNDATIONS FOR A LONG-TERM-CARE SYSTEM IN EVERY COUNTRY

Older people and care givers get the care and support they need to live with dignity and enjoy their basic human rights.

This priority will support countries to develop effective, sustainable and equitable systems and services that improve care for older people with significant losses in intrinsic capacity and reduce the burden on caregivers. There are three key areas for action:

i. Building understanding and commitment to developing long-term-care systems through global, regional and local policy dialogues to catalyse change.

ii. Mapping the current situation in long-term-care provision in countries to inform country action and serve as a baseline with regard to the need, unmet need, type and quality of existing services, legislation, human resources and financing mechanisms.

iii. Providing guidance, tools and technical assistance for countries at all levels of socioeconomic development, on building sustainable and equitable systems to meet the needs of older adults with significant losses of capacity.
Just launched
Percentage of the population aged 65–74 years and aged 75 years or older with a limitation in one or more of five basic activities of daily living (ADL), by country (eating, bathing, dressing, getting in and out of bed, and using the toilet).