# Trends in Home Care for Older People in Europe

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# Structure of the presentation

- Trends in home care: data problems
- Changes in formal care in Europe
- Deinstitutionalisation trends
- Home care trends in context
- The case of Finland
- The case of Austria
- Conclusions



# Trends in home care: data problems

- Huge problems with data remain
  - International comparability/reliability
  - Comparability over time
- These problems are caused by
  - Variety of care services
  - Development of care services
  - Changing definitions (e.g. of institutional care)
  - Lack of coherence in national statistical practices
  - → caution required in interpretation

# Changes in Nordic formal care, mid-1990s-2005/7 (Huber et al. 2009)

	Home care, mid-1990s	Home care, 2005-2007	Institutio nal care, mid- 1990s	Institutio nal care, 2005- 2007
Denmark	20.0	25.1	4.1	4.8
Finland	15.6	16.6	5.1	5.5
Iceland	19.2	21.1	11.6	9.3
Norway	18.2	19.3	5.7	5.3
Sweden	12.0	9.7	8.4	6.0



# Changes in CE formal care, mid-1990s-2005/7 (Huber et al. 2009)

	Home care, mid-1990s	Home care, 2005-2007	Institutio nal care, mid- 1990s	Institutio nal care, 2005- 2007
Austria	13.2	14.4	2.8	3.3
Germany	7.3	6.7	3.3	3.8
Netherlands	-	21.1	-	6.5
Switzerland	13.0	12.4	6.8	6.6



# Changes in SE formal care, mid-1990s-2005/7 (Huber et al. 2009)

	Home care, mid- 1990s	Home care, 2005-2007	Institutio nal care, mid- 1990s	Institutio nal care, 2005- 2007
France	2.5	4.9	2.4	3.1
Italy	1.8	2.8	2.2	2.0
Portugal	-	3.9	-	3.4
Spain	1.1	4.2	2.8	4.1



# Changes in NWE formal care, mid-1990s-2005/7 (Huber et al. 2009)

	Home care, mid- 1990s	Home care, 2005-2007	Institutio nal care, mid- 1990s	Institutio nal care, 2005- 2007
England	14.2	12.6	3.9	3.5
Ireland	5.6	6.5	4.4	3.6



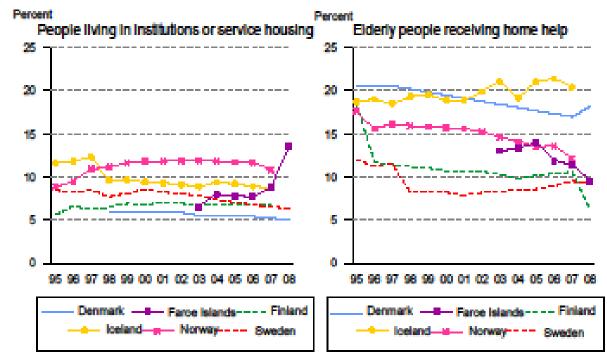
# Changes in CEE formal care, mid-1990s-2005/7 (Huber et al. 2009)

	Home care, mid-1990s	Home care, 2005-2007	Institutio nal care, mid- 1990s	Institutio nal care, 2005- 2007
Czech	8.0	7.2	3.4	3.5
Estonia	1.5	1.0	1.2	1.6
Hungary	2.0	1.9	1.8	2.2
Latvia	0.3	1.9	1.4	1.5
Lithuania	0.8	0.6	0.7	0.8
Slovenia	8.5	9.0	4.0	4.0



# Nordic formal care trends 1995-2008 (NOSOSCO 2009)

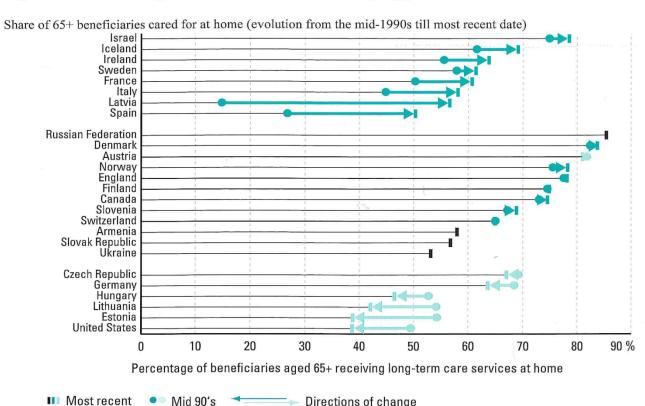
Figure 6.2.3 People living at institutions or in service housing and people receiving home help, as percentages of the age group 65 years or more, 1995-2008





# De/institutionalisation trends, mid1990s-2005/7 (Huber et al. 2009)

Figure 5.3: Moving towards more home care, staying put or increased institutionalisation





Directions of change

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## Home care in context

- It is impossible to fully understand trends in home care without understanding
  - Trends in institutional care
    - Traditional (social) care homes
    - Service housing
  - Trends in health care
    - Nursing homes/health care wards
    - Home nursing
  - Trends in informal care
    - Family care
    - Payments for care
    - Undeclared live-in (migrant) care work



# Contradicotry home care trends

### De/institutionalisation

- Deinstitutionalisation: cutting down institutional care
- (Re)institutionalisation: building new institutions
- Semi-(re)institutionalisation: boom of service housing

### De/medicalisation

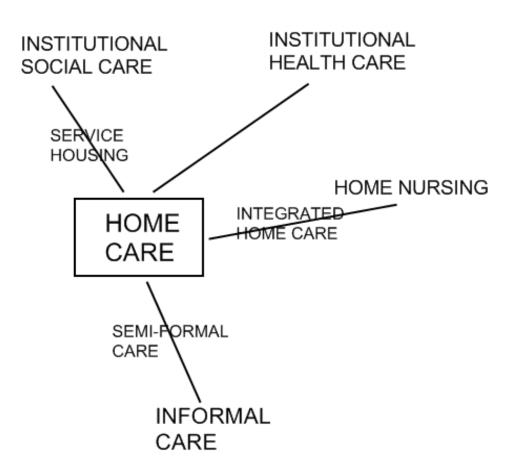
- Medicalisation: strengthening pharmaceutical approach
- Demedicalisation: 'dumping' to social care
- Semi-medicalisation: integration of social & health care

### De/familisation

- Defamilisation: welfare state expansion
- Refamilisation: welfare state retrenchment
  Semi-familisation: payments for care, undeclared (migrant) care work



# Home care in context





# The case of Finland: coverage of home care

	65–74	75–84	85+	75+	65+
	(% of age				
	group)	group)	group)	group)	group)
1990	9.3	29.0	42.3	31.4	18.6
1995	4.6	18.2	35.7	22.1	11.8
2000	3.6	15.2	34.8	19.7	10.7
2005	3.1	13.6	34.4	18.3	10.2
2010	3.2	14.4	37.3	20.4	11.2
Change (of % of age group)	-65.6 %	-50.3 %	-11.8 %	-35.0 %	-39.8 %
Change (of number of households)	-55.4 %	-31.1 %	+93.8 %	+0.2 %	-16.2 %



# The case of Finland

Table 2. Users of regular home care in Finland 1995-2009, visits per month, % and median

	1–8	9–16	17–20	21–40	41+	Total	Median
1995	49,7	18,1	4,1	15,6	12,5	100	8
1999	43,8	17,2	3,9	14,4	20,7	100	10
2005	43,8	13,0	2,9	15,2	25,1	100	11
2009	40,8	11,2	2,4	17,3	28,2	100	14
Change (%)	-17,9 %	-38,1 %	-41,5 %	10,9 %	125,6 %		

Sources: Vaarama et al. 2000, 84; Vaarama et al. 2004, 47; Counts of Regular Home-Care Clients 1999, 2005 and 2009.



# The case of Finland: coverage of support for carers

	65–74	75–84	85+	75+	65+
	(% of age				
	group)	group)	group)	group)	group)
1990	1.0	2.5	6.6	3.3	2.0
1995	0.8	2.0	5.0	2.7	1.5
2000	0.9	2.3	5.3	3.0	1.8
2005	1.2	3.0	6.0	3.7	2.4
2010	1.2	3.6	6.0	4.2	2.6
Change (of % of age group)	+20.0 %	+44.0 %	-9.1 %	+27.2 %	+30.0 %
Change (of number of households)	+62.2 %	+97.0 %	+97.5 %	+97.2 %	+86.9 %



## The case of Finland

- Semi-reinstitutionalisation
- Semi-medicalisation
- Semi-familisation & Refamilisation
- Stricter targetting
- Intensification
- Refocusing (from household to care tasks)
- Privatisation (outsourcing + vouchers)
- Attempts to taylorisation



## The case of Austria

- Undeveloped home care services (despite the incorrect data in e.g. OECD publications)
- The introduction of uncontrolled cash for care scheme in 1993 (cf. Italy): from full familisation to semi-familisation
- Support for family carers
- Emergence of undeclared grey markets of live-in female CEE 24-hour care workers (2007: attempt to legalisation of these 'personal carers')
- Source: Österle/LIVINDHOME

- There are a large number of changes going on in European home care systems but getting a full picture of the trends is difficult because
  - The data is not reliable enough
  - Home care has to be seen in a larger context
  - Trends are partly contradictory
    - Between welfare regimes
    - Within welfare regimes
    - Even within individual countries



- On a very general level, it can be said that
  - In Southern Europe, both home care and institutional care are (finally) growing
  - In CEE there are (at least) two different groups of countries: in the first group, both kinds of services are rather broadly available and stable; in the second group, neither kind of services actually exist nor are they developing
  - Also in the Nordic region, there are two different trajectories: one of decreasing coverage levels (Swe & Fin) and another of more stable and broad coverage (Den, Ice & Nor)

- On a very general level, it can be said that
  - Deinstitutionalisation is impossible if the institutions have not yet been built
  - Besides (or sometimes: instead of) deinstitutionalisation, there are strong tendencies towards re-/semi-institutionalisation
  - Both de- and semimedicalisation are taking place at the same time
  - Semi-familisation is a strong trend but defamilisation and refamilisation trends do exist, as well



- There are also many other interconnected changes going on within home care in many European countries
  - Intensification
  - Privatisation
  - Managerialisation
  - Taylorisation
  - Personalisation
  - Deprofessionalisation



- One thing is certain:
  population ageing will require increasing provisions of home-based care services
- And another thing, as well: differences between European care service systems will remain

