



CPB Netherlands Bureau for Economic
Policy Analysis



The ANCIEN project

A short overview and some
results

Esther Mot

CASE Economic Policy
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ANCIEN, general information

- Assessing Needs of Care in European Nations:
study long-term care for the elderly in Europe
- research for the European Commission in 7th Framework Programme
- January 2009 – August 2012
- 21 EU-countries included



ANCIEN, general information

- 20 research institutes participate
- coordination: Güldem Ökem (CEPS), Esther Mot (CPB), Peter Willemé (FPB)
- CASE: Poland, Czech Republic, Lithuania, Romania
- Results presented here are from the project as a whole with many contributors
- This selection mostly from WPs led by IHS, Nidi, FPB and CPB with important contributions by LSE and Tarki



ANCIEN, objectives

- describe and characterise systems of LTC in Europe (WP1)
- analyse the need for care (in relation to demography and lifestyle) (WP2)
- analyse developments in the supply and demand for formal and informal care (WP3 and WP6)
- analyse the potential role of technology in solving LTC problems (WP4)



ANCIEN, objectives continued

- analyse efforts to improve the quality of LTC (WP5)
- project the use of LTC on the basis of developments in need and supply (WP6)
- evaluate the performance of different types of LTC systems (WP7)



current activity



WP1: LTC systems in Europe

- description of systems
 - country reports
- development of typologies
- selection of representative countries
 - Germany
 - the Netherlands
 - Spain
 - Poland



Typology based on use and financing of care

informal care oriented, low private financing	Belgium*, Czech Republic, Germany, Slovakia * medium spender	low spending, low private, high IC use, high IC support, cash benefits modest
generous, accessible and formalized	Denmark, the Netherlands, Sweden	high spending, low private, low IC use, high IC support, cash benefits modest
informal care oriented, high private financing	Austria, England, Finland, France, Spain	medium spending, high private, high IC use, high IC support, cash benefits high
high private financing, informal care seems necessity	Hungary, Italy	low spending, high private, high IC use, low IC support, cash benefits medium



WP2: need for care in selected countries

- analysis of care needs of elderly
 - based on limitations in ADL (activities of daily living)
- projections according to different scenarios
 - demographic (based on Europop 2008 mortality forecasts)
 - risk factor (smoking and obesity)
- baseline scenario is 'Delay'
 - delay of disability is comparable to the delay of mortality



WP2: % of population 65+ with ADL-limitations

Country	2008	2020	2040	2060	ADL index 2008 - 2060
Germany	19.5	21.5	21.2	21.8	158
Netherlands	16.7	15.6	17.0	17.1	198
Spain	23.8	24.2	21.9	24.4	228
Poland	36.1	35.6	39.4	37.8	225

- source: Bonneux, Van der Gaag and Bijwaard (2012), Demographic epidemiologic projections of long-term care needs in selected European countries, Enepri research report no. 112; based on Delay scenario
- growth **number** of disabled persons in Poland 2008-2060: 125%
- from about 1.8 to about 4.2 million disabled elderly persons



High disability rate in Poland because of demography?

- preliminary WP7 results:
 - analysis % of elderly with ADL-limitations, corrected for demography (age and gender)
- conclusion: ADL-prevalence not very dependent on demography
- Poland would also have high ADL-prevalence with age and gender composition of one of the other countries



High disability growth in Poland because of demography?

- prevalence of disabled is combined with an ageing population
- growth of **number** of disabled very dependent on demography
- Poland would have (much) **higher** growth with demography of one of the other selected countries



WP6, Projections of care use, delay scenario

- Use of **residential care**, % of population 65+

	2010	2020	2030	2040	2060
Germany	3.8	4.4	4.4	4.6	5.6
Netherlands	5.6	5.3	5.8	7.2	9.2
Spain	4.7	4.8	4.7	4.7	5.7
Poland	1.1	1.1	1.2	1.3	1.3

Source: Geerts, Willemé & Comas-Herrera (2012), "Projecting long-term care use in Europe", in Geerts, Willemé & Mot (eds), Projecting long-term care use and supply in Europe, ENEPRI Research Report No. 116, CEPS, Brussels.

- Low prevalence of residential care use in Poland, but projected increase in **number** of users 2010-2060 is 152%



Projections of care use, delay scenario

- Use of **formal home care**, % of population 65+

Country	2010	2020	2030	2040	2060
Germany	4.5	5.1	4.9	5.2	5.8
Netherlands	9.0	8.7	9.2	10.0	10.6
Spain	5.4	5.5	5.3	5.2	6.2

Source: Geerts, Willemé & Comas-Herrera (2012), *ibid.*

- Not available for Poland



Projections care use, delay scenario

- Use of **informal care**, % of population 65+

Country	2010	2020	2030	2040	2060	increase 2010-2060
Germany	16.0	16.7	16.7	16.7	17.4	51%
Netherlands	3.7	3.6	3.6	3.5	3.3	66%
Spain	15.2	15.5	14.6	14.4	16.9	140%

Source: Geerts, Willemé & Comas-Herrera (2012), *ibid.*

- Not available for Poland



Role of informal care in 2006/2007

- Informal care, help with **personal care**, % of relevant elderly population

country	from outside the household	from the household*
Germany	10.2	15.4
the Netherlands	3.0	10.0
Spain	9.4	24.1
Poland	11.7	21.7

source: Share, wave 2 (weighted)

* for people with some limitation, living with others

Conclusion: informal care is very important in Spain and Poland, also for help with personal care



Impact of demography and systems on care use

- Care use % in the 65+ population, 2040 (row country: demography)

country	Germany			NL			Spain			Poland	
	HC	IC	RC	HC	IC	RC	HC	IC	RC	RC	
Germany	5.3	16.8	4.6	11.5	4.5	7.8	5.3	14.9	4.9	0.7	
Netherlands	4.5	16.1	3.4	10.1	3.7	7.2	4.6	12.7	4.7	0.6	
Spain	5.1	17	4.9	11.4	4.8	7.5	5.4	14.9	4.7	0.7	
Poland	7.8	20.3	9.4	15.6	7.2	11.9	8.6	23.7	5.8	1.3	

source: Bíró (2012), Performance of LTC systems in Europe - an assessment based on the ANCIEN results, mimeo

- residential care use is 1.3% in Poland in 2040, but would be 5.8% with the Polish demography - including disability- and the Spanish care use pattern (11.9% with the Dutch pattern!)
- with the Spanish care use pattern 8.6% of the elderly in Poland would use formal home care and 23.7% informal care in 2040



Performance of LTC systems

- preliminary results
 - WP7 not yet finished
- not possible to collect info on all performance aspects
 - due to data problems
 - comparability among countries is a big problem
 - data problems especially severe for Poland
- presentation concerns limited subset of performance aspects:
 - mostly quality of life



Performance framework to assess systems

1. quality of life *
2. quality of care
3. accessibility of care
4. affordability and robust financing at system level *
5. equity
6. support informal care givers
7. choice of setting and providers
8. integration with health care and social services and coordination
9. simplicity of the system and information
10. improving functional ability and minimizing the need for LTC*



Quality of life, preliminary results

- analysis based on SHARE (wave 2)
- SHARE = Survey of Health Ageing and Retirement in Europe
- Multidisciplinary panel of older Europeans (50 years and older)
- We are mainly interested in questions on:
 - limitations and health
 - use of LTC
 - well-being

NB: SHARE does not cover residential care



Analysis quality of life of (potential) LTC users

Based on SHARE:

1. What is the probability of getting help with difficult activities in a specific country (mobility, iADL, ADL)?
 - NB: this can be formal or informal help
2. To what extent does the help meet the needs?
 - all the time, usually, sometimes, hardly ever
3. How satisfied are elderly in the different countries with their life?



The probability of receiving help

country	AME in %
Czech Republic	-6.0*
Belgium	-9.4***
Netherlands	-9.6**
Switzerland	-10.9**
Austria	-11.2***
Denmark	-15.3***
Sweden	-15.4***
France	-17.5***
Italy	-30.3***
Spain	-31.1***
Greece	-33.4***
Poland	-37.4***

Average marginal effect of living in another country on probability of help, compared to Germany (in percentage points)

prob. < 0.001: ***

0.001 < prob. < 0.01: **

0.01 < prob. < 0.05: *

The probability of help is highest in Germany and lowest in Poland (corrected for socio-economic and health variables)

source: Faber and Mot (2012), Performance of European LTC systems for the elderly, the experience of users, draft, 23 April 2012



Help meeting the needs all the time

country	AME in %
Switzerland	16.8**
Italy	14.3**
Netherlands	9.4
Belgium	3.6
Czech Republic	2.7
Denmark	2.5
Austria	2.4
Sweden	-1.7
France	-5.4
Greece	-5.9
Poland	-7.0
Spain	-8.9

Average marginal effect of living in another country on help meeting the needs all the time , compared to Germany (in percentage points)

Few significant differences with Germany

Probability of help meeting the needs all the time highest in Switzerland and Italy and lowest in Spain and Poland

source: Faber and Mot (2012),ibid.



Unobserved properties of the LTC system

Ranking of additional country-specific effect of having a limitation (γ^c)

France

Poland

Belgium

Greece

Denmark

Sweden

The Netherlands

Spain

Switzerland

Italy

Germany

Austria

Czech Republic

Based on differences among countries in life satisfaction of elderly persons with limitations (corrected for other relevant factors and using vignettes)

France and Poland score highest on unobserved properties.

Interpretation should be careful as long-term care related quality of life was not measured in Share.

High disability in Poland plays a role?

source: Faber and Mot (2012),ibid.



Overall ranking on quality of life for the elderly

- averaging ranks is a crude method

country	probability of help	help meeting needs all the time	unobserved properties	average rank
Belgium	3	4	3	3.3
Netherlands	4	3	7	4.7
Switzerland	5	1	9	5.0
Denmark	7	6	5	6.0
Czech Republic	2	5	13	6.7
France	9	10	1	6.7
Germany	1	8	11	6.7
Italy	10	2	10	7.3
Sweden	8	9	6	7.7
Austria	6	7	12	8.3
Greece	12	11	4	9.0
Poland	13	12	2	9.0
Spain	11	13	8	10.7

source: Faber and Mot (2012),ibid.



Conclusion on QoL ranking

If we consider all aspects equally important:

- Belgium, the Netherlands and Switzerland score best
- Spain, Poland and Greece score worst
 - NB: results for Spain may be outdated because of changes since Share wave 2
- Germany is somewhere in the middle
- result for Sweden is unexpected
- Poland scores well on unobserved properties of the LTC system but not on the other aspects



Affordability and sustainability

- Projections for public expenditure and care use

Country	public exp. LTC *	public exp. LTC	residential care	home care	use informal care
	% GDP	% GDP	% Δ users	% Δ users	% Δ users
	2010	2060	2010-2060	2010-2060	2010-2060
AWG reference scenario					
Germany	1.4	3.1	102.0	79.0	51.0
Netherlands	3.8	7.9	200.0	116.0	66.0
Spain	0.8	1.5	162.0	150.0	140.0
Poland	0.7	1.7	152.0	na	na

* LTC for all age categories

sources: European Commission (DG ECFIN) and the Economic Policy Committee (AWG) (2012), The 2012 Ageing Report: Economic and budgetary projections for the EU27 Member States (2010-2060); Geerts, Willemé & Comas-Herrera (2012), *ibid.*



Preliminary and partial conclusions on Polish LTC system

- data problems are severe:
 - availability of better data would be very useful for research
- informal care plays a very important role:
 - this may be a problem for the future (with ageing and increasing labour market participation of women)
 - support for informal care givers is important (e.g. for combining work and care giving)
- the use of residential care is very low compared to other informal care oriented countries; especially considering the high disability among Polish elderly:
 - development of residential care capacity may be important for the future



Conclusions on Poland, continued

- the system is affordable in terms of public expenditure on formal care:
 - but still public expenditure on LTC as a % of GDP will more than double according to AWG till 2060
- disability is high among Polish elderly and also projected to increase strongly till 2060
- not entirely clear why the unobserved system properties turn out favourable:
 - Polish elderly are happy with the large amount of informal care they receive (following expectations) ?
 - some relation to high disability?
 - further research would be useful



Additional information on Ancien

- <http://www.ancien-longtermcare.eu/>
 - general information
 - policy briefs
 - research reports
- guldem.okem@ceps.eu (The Centre for European Policy Studies)
- mot@cpb.nl (CPB Netherlands Bureau for Economic Policy Analysis)
- pw@plan.be (Federal Planning Bureau)