Task Force on Long-Term Care statistics

16th meeting of the UNECE Standing Working Group on Ageing

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Background

- In September 2020, the European Directors of Social Statistics discussed the set-up of a dedicated **Task Force on Long-Term Care statistics (TF LTC)**.

- On 7 September 2022, launch by the EC of the **European Care Strategy** for "*high-quality, affordable and accessible care services with better working conditions and work-life balance for carers*"

- Council Recommendation on "access to affordable high-quality long-term care" adopted on 8 December 2022 (2022/C 476/01).

  - Art.12: "*The Council welcomes the Commission's intention to: …(d) work with Member States to enhance the availability, scope and relevance of comparable data on long-term care at Union level, building on the forthcoming results of the* **Commission task force on long-term care statistics**;…"

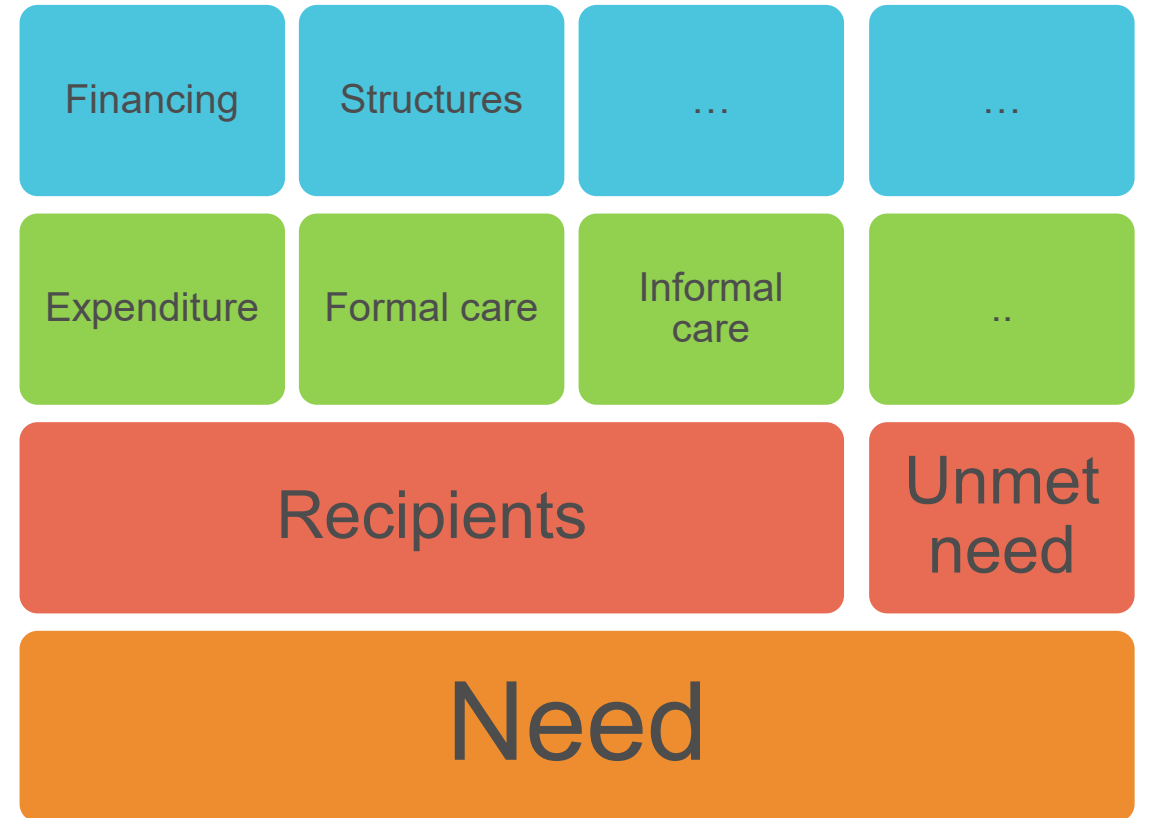- Overall aim: to develop **comparable EU statistics on long-term care**.

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Set-up of the TF LTC

- TF LTC formally a *subgroup* of the Commission Expert Group "European Directors of Social Statistics (DSS)" (E01552/4).

- Current composition:

    - Chair: Eurostat. Other Commission services also following the work (EMPL, ECFIN).

    - Members: 12 EU countries (BE, CZ, DE, EE, IE, FR, IT, LV, NL, PT, SI, and FI).

    - Observers: ILO, OECD, WHO, Eurofound.

- Varied expertise and institutions.

- Kick-off meeting of the TF LTC in February 2023. Conclusion of work: end 2024.

Areas of work

- *"To study solutions and provide methodological guidance in"*:

(1) to produce guidelines on the boundaries and scope of long-term care: beneficiaries, providers (institutional settings, households,…), treatments, financing, amongst others,

(2) to improve availability, quality and coverage of long-term care statistics:

    (a) for long-term care health and social expenditure based on the System of Health Accounts 2011,

    (b) for health long-term care, non-expenditure such as data on health activities, health employment, physical resources,

    (c) for non-health long-term care providers and activities,

    (d) for exclusion from long-term care health and social services, due to financial burden and non-affordability of LTC.

(3) to investigate links across different domains and methodologies,

(4) to support the cooperation at national level amongst the different national institutions and bodies involved in the provision of LTC related statistics,

(5) to support the discussions in the different technical groups in order to support member states in developing methods of estimation:

    (a) the informal long-term care services provided by households,

    (b) the long-term care services financed from households budget,

(6) to investigate the feasibility for a potential legal basis for a data collection dedicated to long-term care.

Financing	Structures	…	…
Expenditure	Formal care	Informal care	..
Recipients			Unmet need
Need			

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First topics addressed

- What is the statistical definition of 'long-term care'?

- How many persons need long-term care?

- How many persons are 'working' in this domain?

- How much is spent in assistance for the independent living of persons in need of long-term care?

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Some issues discussed in definitions

- Which level of activity limitation (ADLs) / participation restriction (IADLs) would require long-term care – should 'mild' to 'moderate' be included?

- Coverage of IADLs in the case of no limitation in ADLs?

- Relation with concepts such as disability, frailty, etc. and other international conceptual frameworks

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Need of long-term care

- Various measures considered, all derived from EU social surveys:

  - Global Activity Limitation Indicator (GALI), Total Activities of Daily Living (TADL), Need of Care in Total Activities of daily living (NCTA), Budapest Initiative Mark 2 (BIM2), Conditional Self-Assessed Need of long-term care (CSAN),…

- Some issues related:

  - Population under-coverage (persons not living in private households)

  - Incomplete age profiles (age threshold)

  - Frequency of surveys

  - Relation with measures of related concepts (e.g., disability)

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LTC caregivers

'Formal'

- Identification using a cross-classification ISCO / NACE of EU Labour Force Survey data

- Classification of additional categories of workers (in the broad sense)

- Terminology clarified

'Informal'

- Identification using survey data (EHIS)

- Possible coverage of additional categories of non-professional LTC caregivers not belonging to the family of the care recipient (e.g., volunteers)

- Potential link with households' satellite accounts (unpaid household work)

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Social component of LTC expenditure

- One of the main topics of the TF LTC

- Improvements needed on the System of Health Accounts (SHA) variable HCR.1 ("LTC social")

- National expertise is even more fundamental

- Discussion to be continued

- Possible revision of guidelines

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Thank you

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