

NO ONE LEFT BEHIND! DIALOGUE ON THE FUTURE OF LONG-TERM CARE

12 November, Brussels – Two years on from the adoption of the European Care Strategy (ECS), participants gathered to discuss progress – reforms, policies, strategies, tools, investments – on the path to higher quality, easily accessible, more affordable long-term care (LTC) systems.

As Europe is ageing, demand for long-term care is rising. The number of people in the EU needing LTC is projected to rise from 31.2 million in 2022 to 33.2 million in 2030 and 37.8 million in 2050. LTC models relying predominantly on informal carers (i.e. usually family members) are becoming unsustainable as the number of informal carers is shrinking (with more women entering the labour market, changes in family structures and depopulation of certain areas).

Long-term care is offered to people who need assistance with daily activities, to help maintain their autonomy and dignity, especially in old age. LTC systems differ across the EU, but they face common challenges. To address these, the Commission proposed concrete actions – materialised in the 2022 [European Care Strategy](#) and the [Council recommendation on long-term care](#) – to help Member States boost access to high-quality, affordable care services while improving working conditions and work-life balance for carers delivering them.

The big questions

How can high-quality affordable care be delivered when budgets are already stretched? Who will fill existing and projected gaps (skills, capacity, financial) in formal care? How can governments incentivise formal care services to boost capacity? How to deal with concerns facing informal carers, gender stereotypes, training, fair working conditions, and other issues facing LTC systems? And importantly, what pathways and solutions can ensure “no one is left behind”?

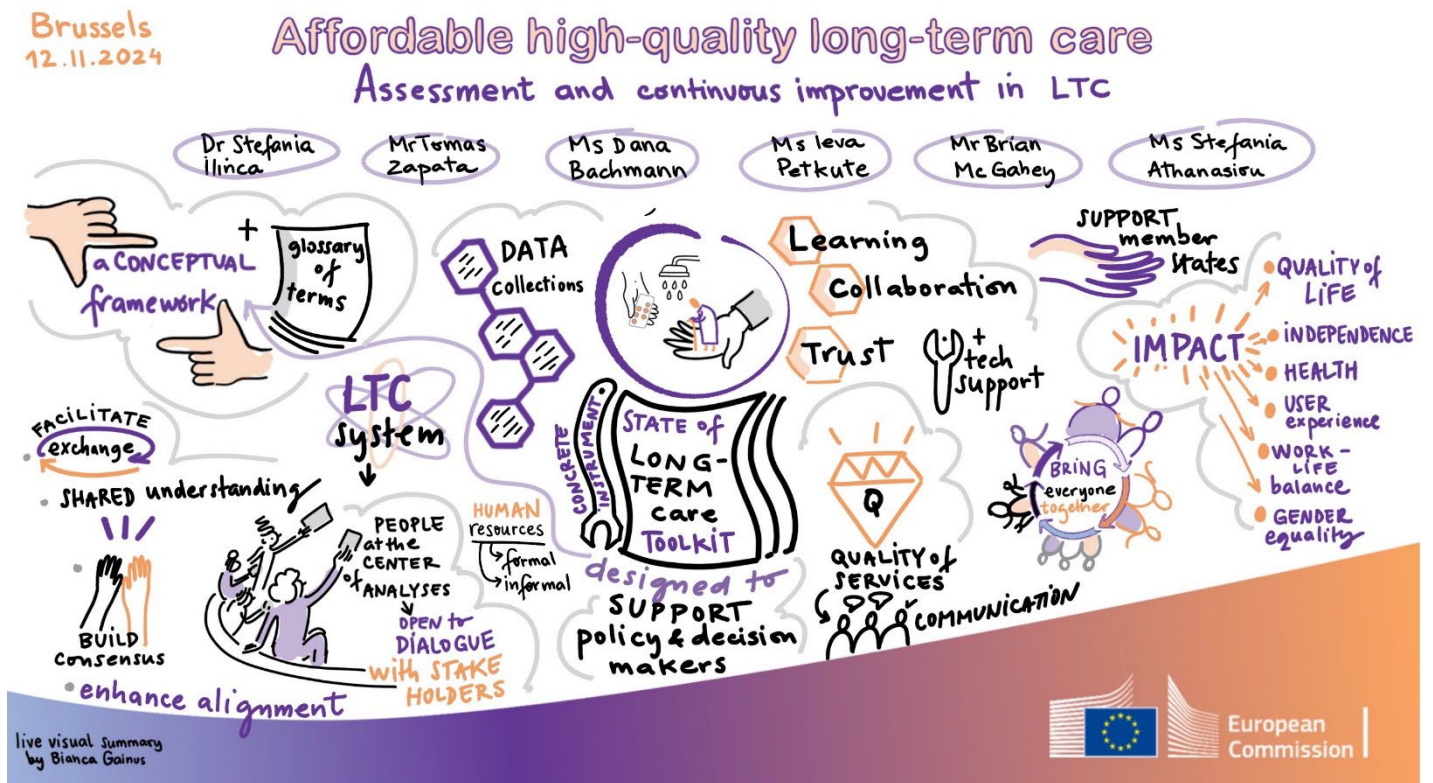
Such concerns are more than a thought experiment for the millions in Europe whose daily lives currently depend on LTC, and for the people and organisations supporting them. Today, around 6 million people work in the care sector, with 3.1 million workers specifically employed in the LTC sector in 2023 and many other domestic workers providing support to persons with LTC needs. Another 1.6 million are needed by 2050. Some 52 million people in Europe provide LTC informally, mostly women. Of the formal LTC workforce, 90% are women. The Care Strategy is focusing on improving access, quality, availability of LTC, with around EUR 6.6 billion being mobilised under the European Social Fund Plus (ESF+), alongside other funding instruments.

These and other issues were given serious reflection during the EC-hosted conference, ‘Affordable high-quality long-term care: catalysing dialogue and action under the European Care Strategy’, the aim of which was to raise awareness of EU-level actions under the Care Strategy and discuss further need for action. Member State actions and progress on implementing the Council recommendation on long-term care were also in the spotlight during the day-long event.

Long-term care providers, social partners, public authorities, policymakers, and various delegates from civil society at the EU, national, regional and international level took part in the high-level dialogue. In total, the hybrid event attracted around 100 participants in-person, and 89 participants tuned in online.

Health and LTC systems do not yet function seamlessly, remarked Natasha Azzopardi-Muscat, WHO Regional Office for Europe's Director of the Division of Country Health Policies and Systems. A more holistic approach which prevents older people being bounced from hospitals to care facilities and homecare is needed. Unless we get LTC systems right, health systems will face unprecedented pressure..

Better coordinated care and support systems are vital to the economy and society, agreed Chidi King, ILO's Chief of the Gender, Equality, Diversity and Inclusion Branch, but time is running out to fix the nexus between health, LTC and social protection systems. What happens if pension systems are not being paid into, and how to fix the gender imbalance in LTC were among the concerns raised.



State of the LTC, the 'nitty gritty' that matters

A late-morning panel session saw the launch of one deliverable under the Care Strategy – the State of the Long-term care toolkit – developed in partnership between the EC and the WHO to provide methodological support to Member States and regions to analyse their long-term care systems and identify priorities and avenues for action. Here, participants listened to testimonies from the Member States who piloted the State of the LTC' Toolkit with interventions from the Department of Health in Ireland, Ministry of Social Cohesion in Greece, and civil society in Lithuania ('Dementia Lithuania').

WHO's Stefania Ilinca explained how the Toolkit meets the need for common terminology, structured data collection, inclusive approaches (stakeholder engagement), and a framework for analysing and applying information to better policymaking and action on the ground. She outlined its main parts (guide, glossary, templates, sample reports) broken down into 25 analytical domains, and over 250 measures and indicators at population- and care-system level. In other words, the "nitty gritty" of inputs, outputs, outcomes, implementation, all then linked to "causal" and structural elements.

Tomas Zapata, WHO's Regional Advisor on Health Workforce and Service Delivery, added that the Toolkit would help his colleagues provide technical support to countries, align health and LTC services, and link ongoing work in, for example, rehabilitation, disability, etc.

Meanwhile, taking part in the pilot process helped to consolidate and frame Dementia Lithuania's understanding of LTC and informed its interaction with the government on this matter. In Ireland, the pilot provided a snapshot of the landscape, brought diverse public and private service areas together, and stimulated positive dialogue. It also helped Greece establish a common understanding and meaningful cross-sectoral engagement regarding LTC, leading to a solid foundation for building its National Action Plan.

Dana Bachmann, Head of Social Protection Unit, DG EMPL, said the Toolkit pinpoints concrete support needs, stimulates exchanges between different partners and countries, and has great potential at the regional level, mobilising regions' own reform efforts.

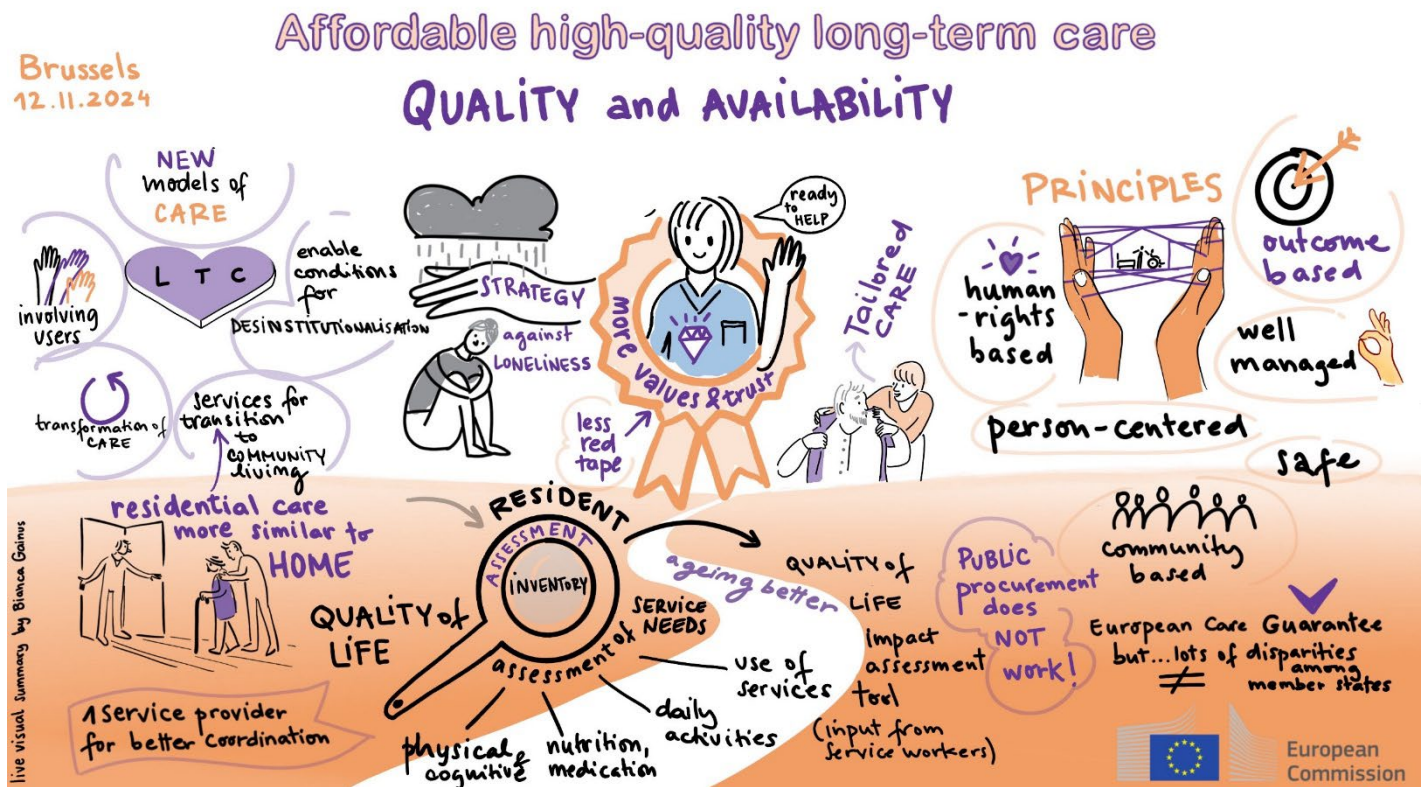
Solutions and take-aways

During the afternoon, a series of workshops explored **policy responses to key LTC challenges in Europe**, such as affordability, quality, availability, the situation of the workforce and informal carers. Each of the parallel sessions delivered key take-aways presented during a follow-up panel debate.



The 'No one left behind: pathways for making long-term care affordable for all (affordability)' session highlighted the need for effective and progressive policies and measurements regarding social protection for LTC, particularly for those most in need and with lower incomes.

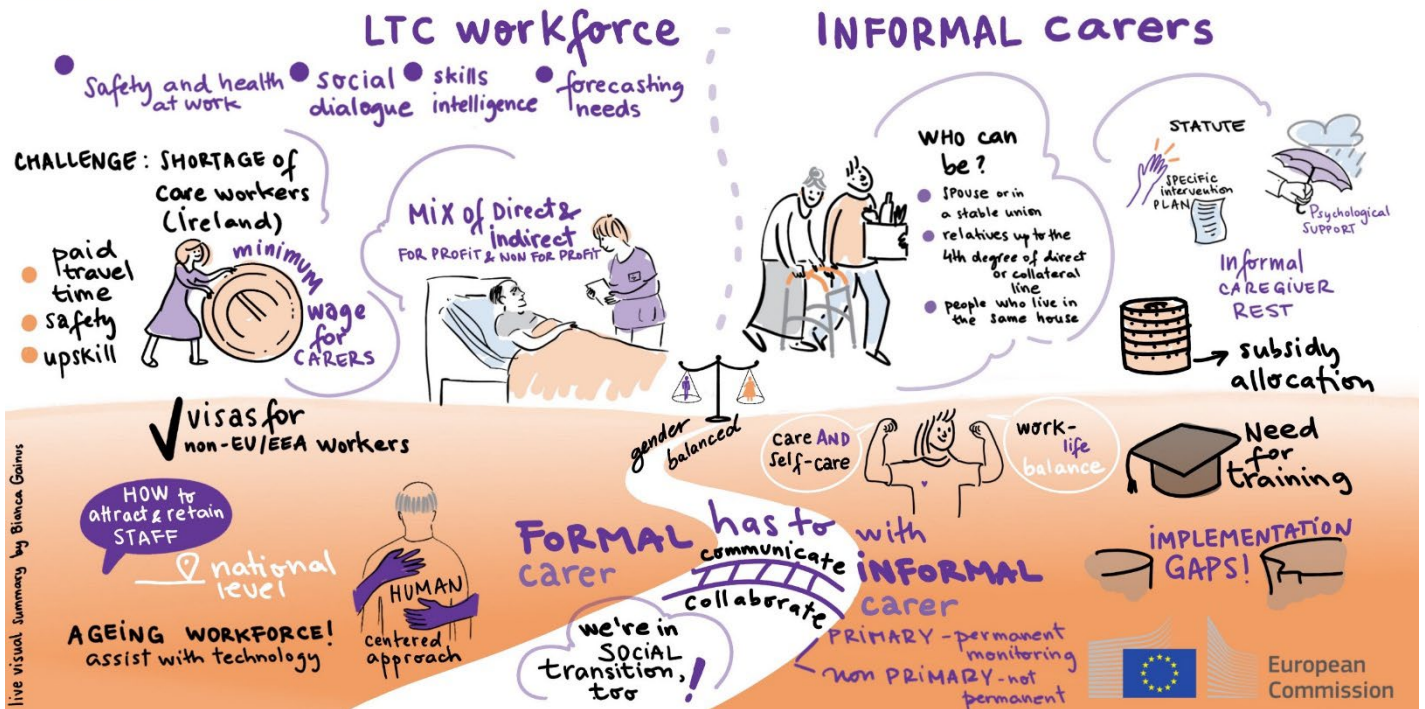
The growing demand for long-term care increases pressure on public expenditure, while also calling for improving the cost-effectiveness of long-term care provision, for example, via health promotion and preventive policies, better integration and targeting of services, and improving data and evidence. Private-sector contributions and investments in prevention and technology were explored. The session heard how Slovenia's new LTC Act introduced LTC insurance for all and rebalanced residential solutions with more home-care provision. France presented their decentralised "universal coverage" scheme. Specific attention was put on how the social economy and public procurement can better help the care sector and especially LTC.



In the 'Elevating quality: pathways to more options and excellence in long-term care (quality and availability)' workshop participants urged stakeholders to engage in discussions of what quality means in different contexts. On availability, the participants looked at the existence of quality LTC options through the examples of Spain and Estonia, which are implementing reforms to move towards more home- and community-based systems, including with the help of digitalisation, offering better quality of care and more choice. The workshop then explored person-centred care by looking at Finnish and Danish examples that provide a personal care paths and care planning (FI) and a single contact for all personal services whether cleaning, food delivery, nursing, etc (DK). Ways to ensure LTC quality were discussed, including via quality frameworks, procurement and dedicated certificates, such as EQUASS, which was presented in more detail. The discussion focused on outcomes (not abstractions), social inclusion, independence, prevention and lifelong health, and sense of purpose in life.

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Affordable high-quality long-term care



The sessions 'Pathways to supporting informal caregivers (informal carers)' and 'Pathways to improve LTC's attractiveness (workforce)' focussed on those providing care, informally and professionally.

A broad range of actors discussed pressing issues in **formal care** and potential solutions. Occupational health and safety (including mental wellbeing) can be particularly challenging to monitor for domestic or undeclared workers. Sectoral dialogue and collective bargaining are needed to improve working conditions and wages. Continuous training and upskilling as well as assistive technologies are important for long-term resilience of the workforce. These issues are of relevance in the context of increasing workforce shortages due to the ageing workforce and low retention rates in the sector. Considering best practices by Member States, the measures implemented by Ireland's Strategic Workforce Advisory Group, such as a premium minimum wage for the sector, were noted.

For **informal carers**, four areas stood out: access to information and support (such as via a toolkit for informal carers) as well as training (e.g. Austrian Red Cross programme); addressing persistent gender equalities in informal care work-life balance and the impact of the Directive); and learning from Member States' best practices and policy reforms (e.g. Portugal, Italy, Denmark, Belgian-Flanders).

Katarina Ivancovic-Knezevic, Director for Social Rights and Inclusion at the Directorate-General for Employment, Social Affairs and Inclusion of the European Commission, reminded participants that the incoming Commission hearings were taking place on the same day, and topics like the anti-poverty strategy, quality jobs roadmap, skills agenda, and European Social Pillar action plan are on the agenda, guiding future LTC developments, with emphasis on "caring for carers and for those who need it".

She spoke of the need for better coordinated long-term care and disability policy at EU and national levels, underlining concerns over unmet needs – both current and future as populations age. Priorities, she noted, are sustainable and targeted funding, better health and safety for formal and informal workers, support for the ageing workforce, emphasis on standards and qualifications, and greater use of assisted technology including AI (where appropriate) for care management, among others.

The Commission is committed to its ongoing work on LTC, she said, implementing the Care Strategy commitments in tandem with helping Member States implement the Council recommendation on long-term care. The two words that most resonate in all this, she concluded, are “ownership and implementation”.

An expanded account of the discussions/proceedings is provided in the meeting proceedings report scheduled for release in late November 2024.

More information

[Long-Term Care \(Social Protection and Social Inclusion\)](#), Policies and Activities, DG EMPL, EC