Ageing populations and care ecosystems: Policy complementarity, substitution and disconnect

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Background & Overview

Population Ageing

      Demographically speaking

      Structural changes

      Speed

Long Term Care (eco) systems

→ Care Models

→ Direction of developments

→ Contexts & challenges

- Old and new-comers
- Comparative perspective
  - Examples from Europe and the Middle East and North Africa (MENA region
  - Similarities & differences
  - Two-directional learning (global north & south)

- Introduce MENARAH network

What is Population Ageing?

Changes to the whole structure of a population

Measurements

Static
- Age Index
- Age dependency ratio,
- Percentage over 65+
- **Dynamic**: prospective ageing

- Societal/population level
- Linked to economic productivity (retirement)
- Individual's perception of ageing
  – What one can and can not do!
  – Expectations from and opportunities at old age
- Differentials by societal & individual factors
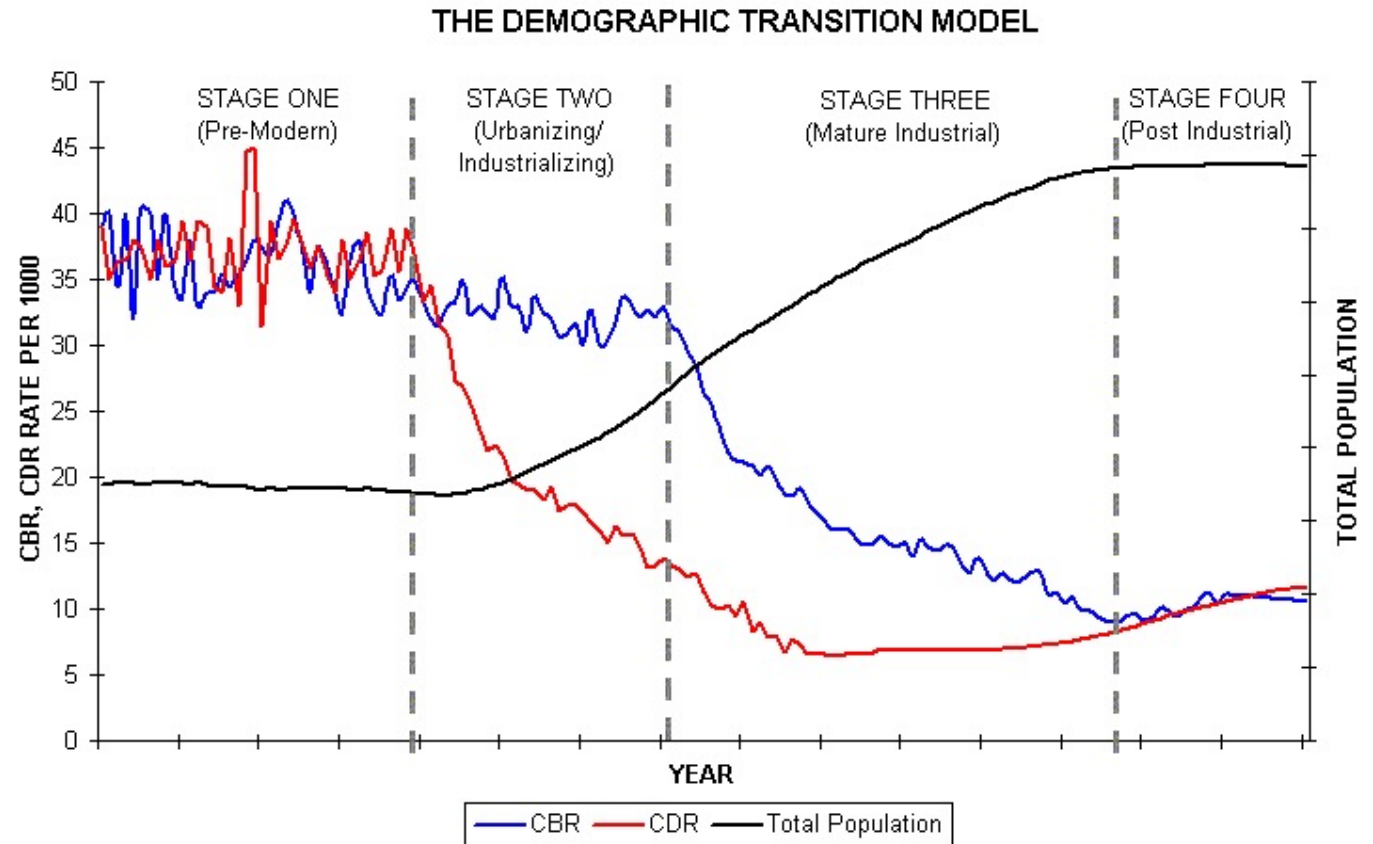- Variations in health and wellbeing at older age is not random

Demographic Transitions

Determined jointly by three demographic processes:

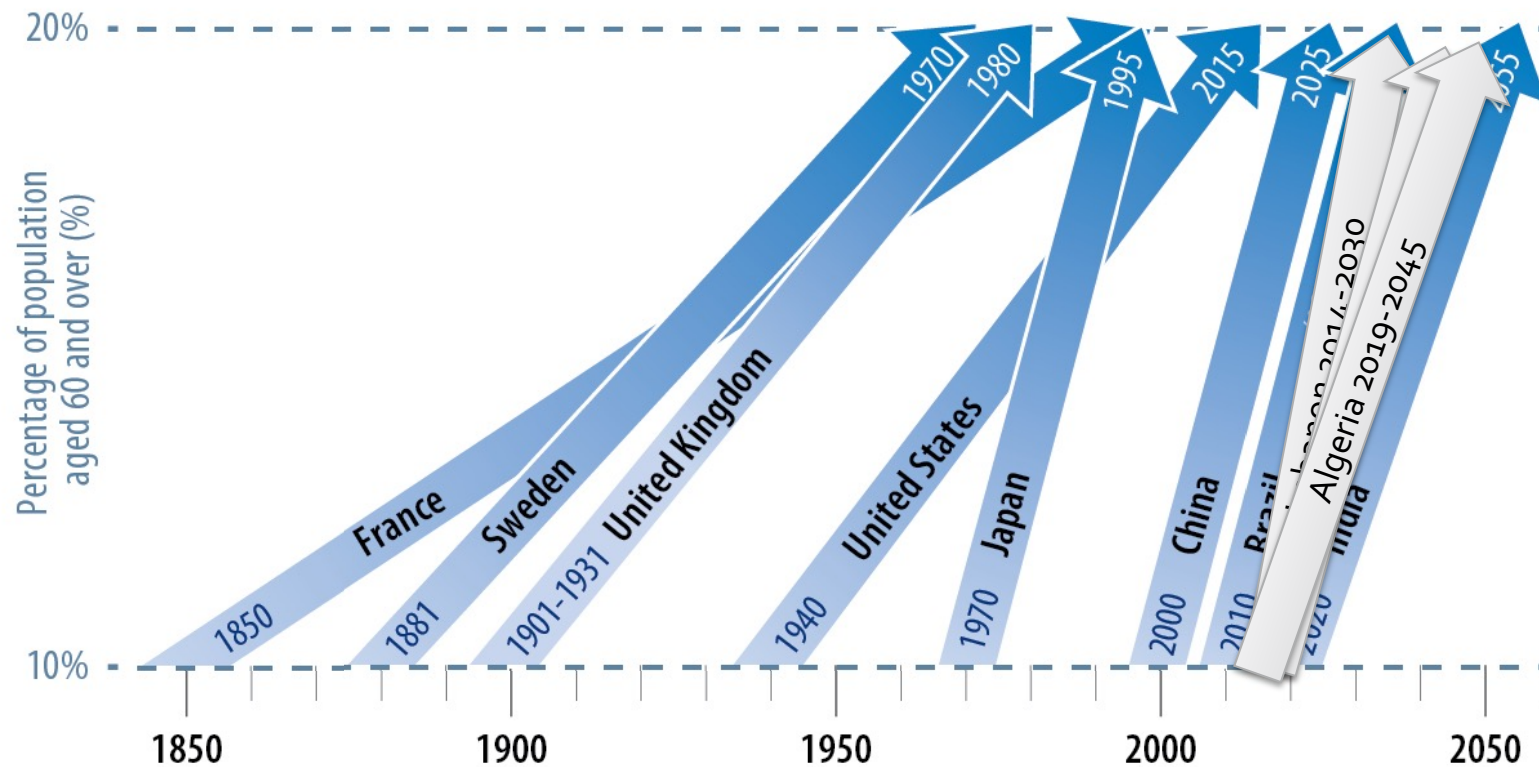   fertility, mortality and migration.

The tempo, or speed, has been different across the world

Historical and recent changes

THE DEMOGRAPHIC TRANSITION MODEL

Pace of population Ageing

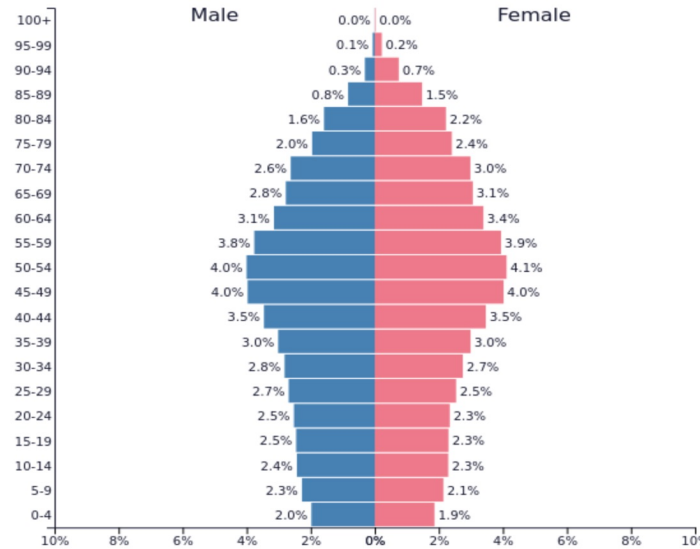By 2050, 80% of the world older people will be living in LMICs
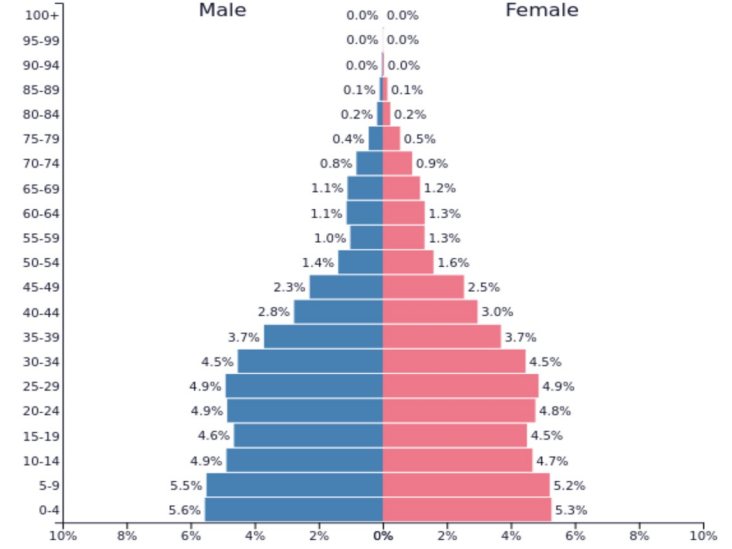
Population Structures

Changes are more pronounced in LMIC
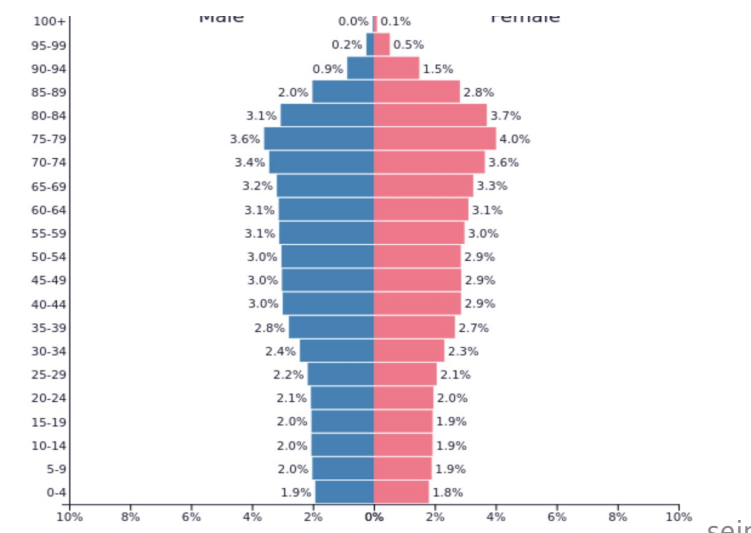
Kite vs. rectangular shapes
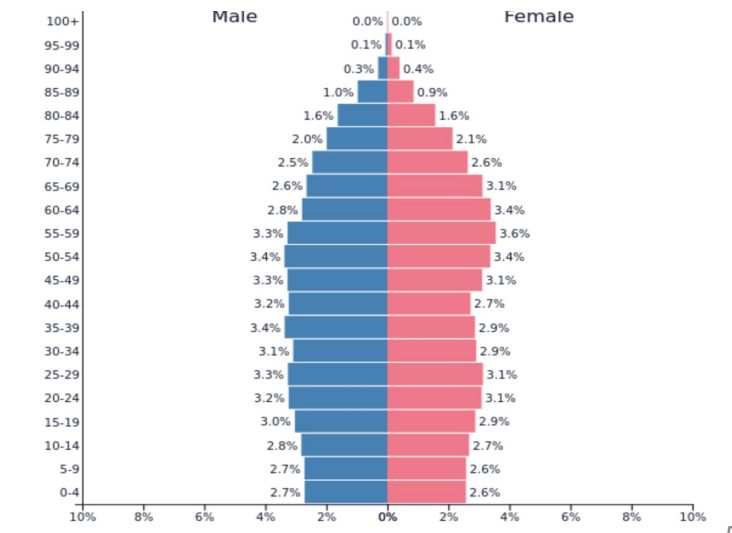

Italy 2020

Lebanon 2020

Italy 2050

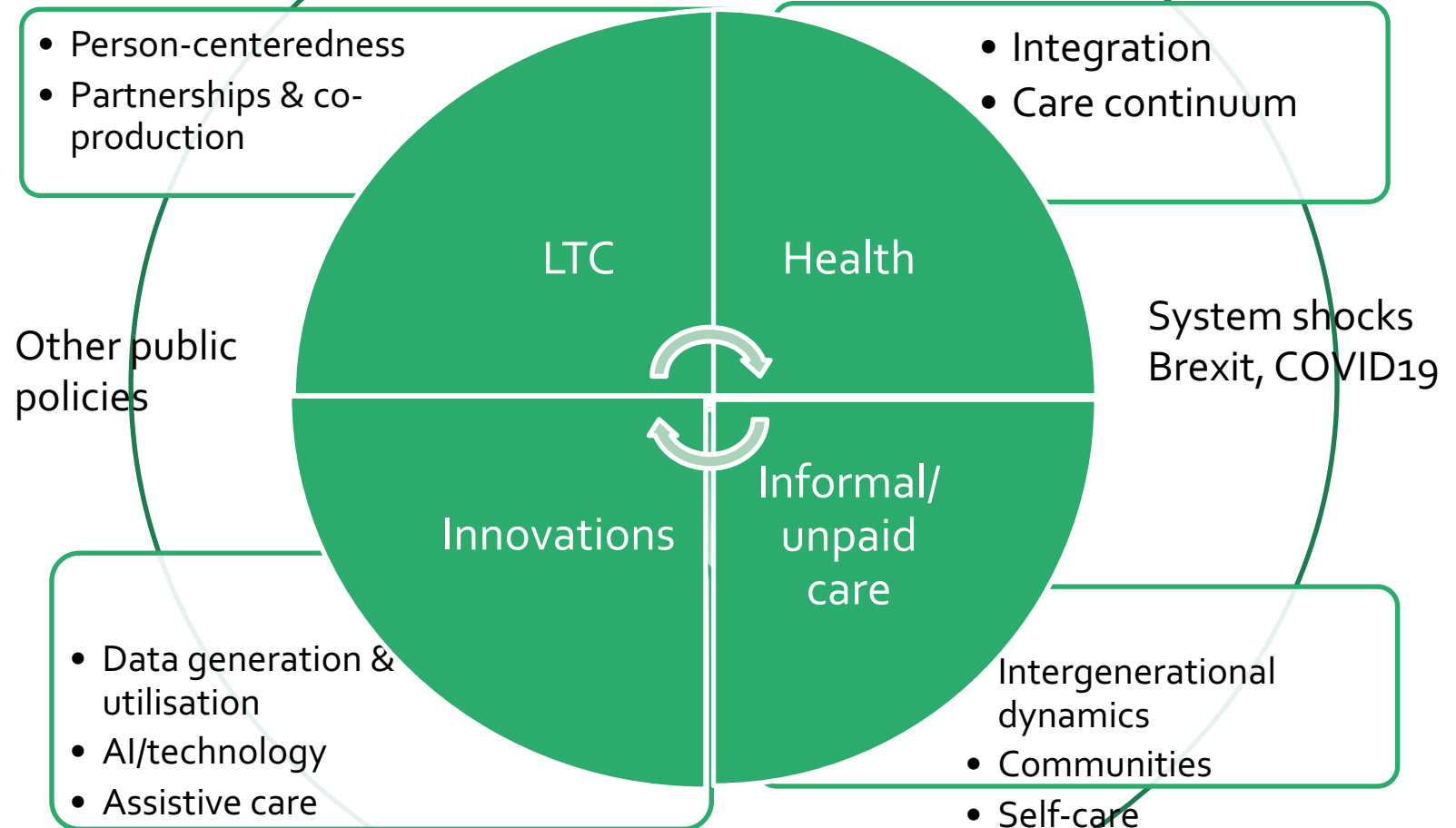Lebanon 2050

Not all years gained are healthy years

- Both life expectancy and healthy life expectancy are increasing
  - Nature longevity limit?
  - HLE not growing as fast as LE
→ High number of years lived with LTC needs
→ Significant gender, ethnic & socio-economic differentials
→ Differentials within and across countries

	LE- M	LE-F	HLE-M	HLE-F
France	79.8	85.1	71.1	73.1
Germany	78.7	84.8	69.7	72.1
Italy	80.9	84.9	71.2	72.6
Netherlands	80.4	83.2	71.4	71.5
Norway	81.1	84.1	71.1	71.6
UK	79.8	83.0	69.6	70.6
Algeria	76.2	77.5	66.7	66.1
Egypt	69.6	74.1	62.3	63.7
Iran	75.7	79.1	66.0	66.5
Lebanon	74.0	79.2	65.1	67.1
Morocco	71.7	74.3	63.7	63.7
Turkey	76.4	80.7	67.8	69.0

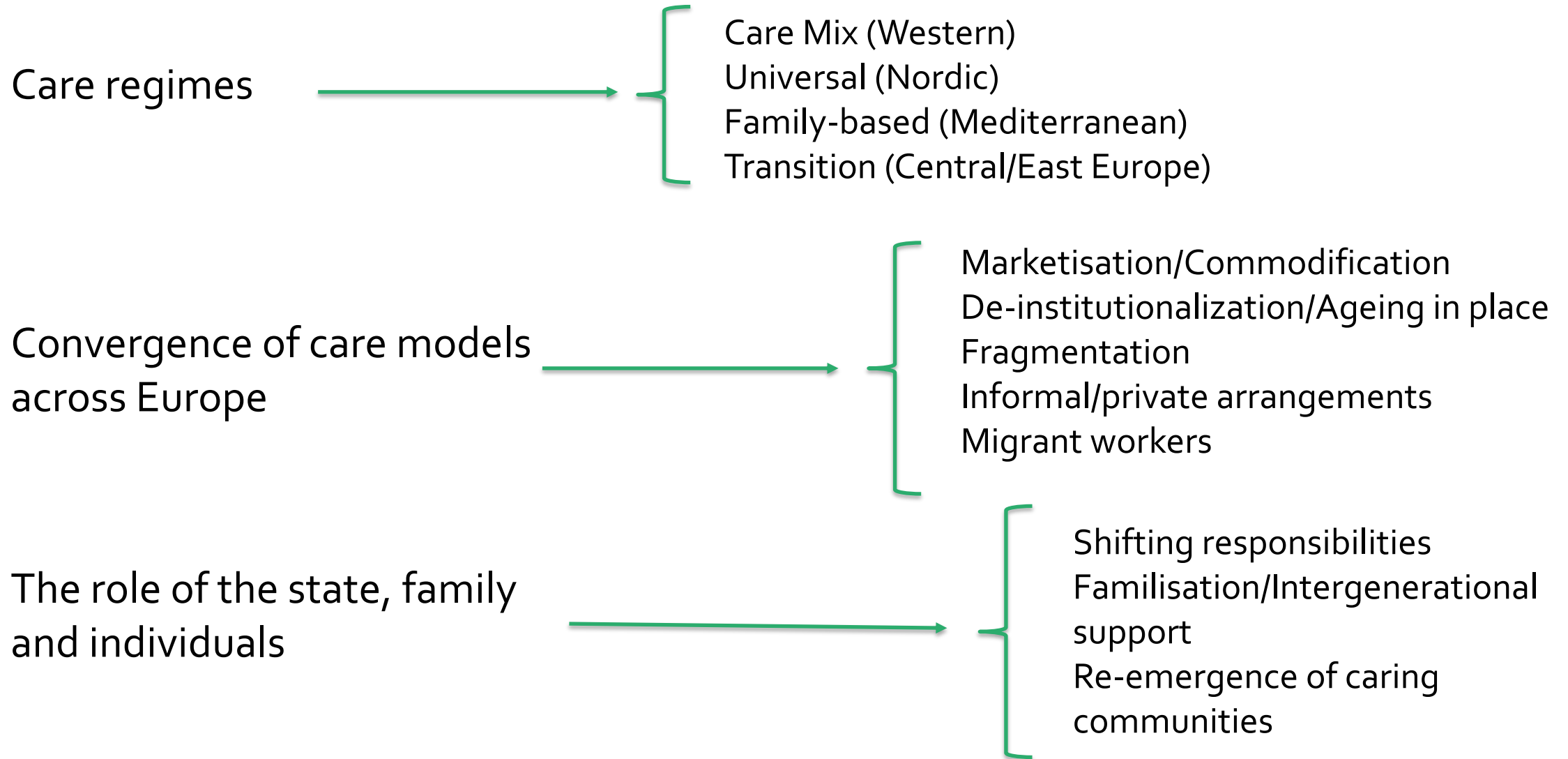Average LE & HLE at birth in 2019, source: World Health Organization

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- What is LTC?
- LTC systems relatively young
  → Governance spread - horizontally & vertically
  → Funding - cost reduction
  → Workforce - shortages
- (dis)connect to health services
  → Integration aspiration
- links to social protection & welfare benefits
- Influenced by a range of policies
  - Public health, migration & employment
- Informal care

- Person-centeredness
- Partnerships & co-production

- Integration
- Care continuum

LTC

Health

Other public policies

System shocks Brexit, COVID19

Innovations

Informal/ unpaid care

- Data generation & utilisation
- AI/technology
- Assistive care

Intergenerational dynamics
- Communities
- Self-care

International Agenda: SDGs

LTC models - Europe

Care regimes →
- Care Mix (Western)
- Universal (Nordic)
- Family-based (Mediterranean)
- Transition (Central/East Europe)

Convergence of care models across Europe →
- Marketisation/Commodification
- De-institutionalization/Ageing in place
- Fragmentation
- Informal/private arrangements
- Migrant workers

The role of the state, family and individuals →
- Shifting responsibilities
- Familisation/Intergenerational support
- Re-emergence of caring communities

Financing & governance

Formal and informal spheres of care

- Duties & responsibilities (inc. legal)
- Family care seen as the cheapest option

Availability & access

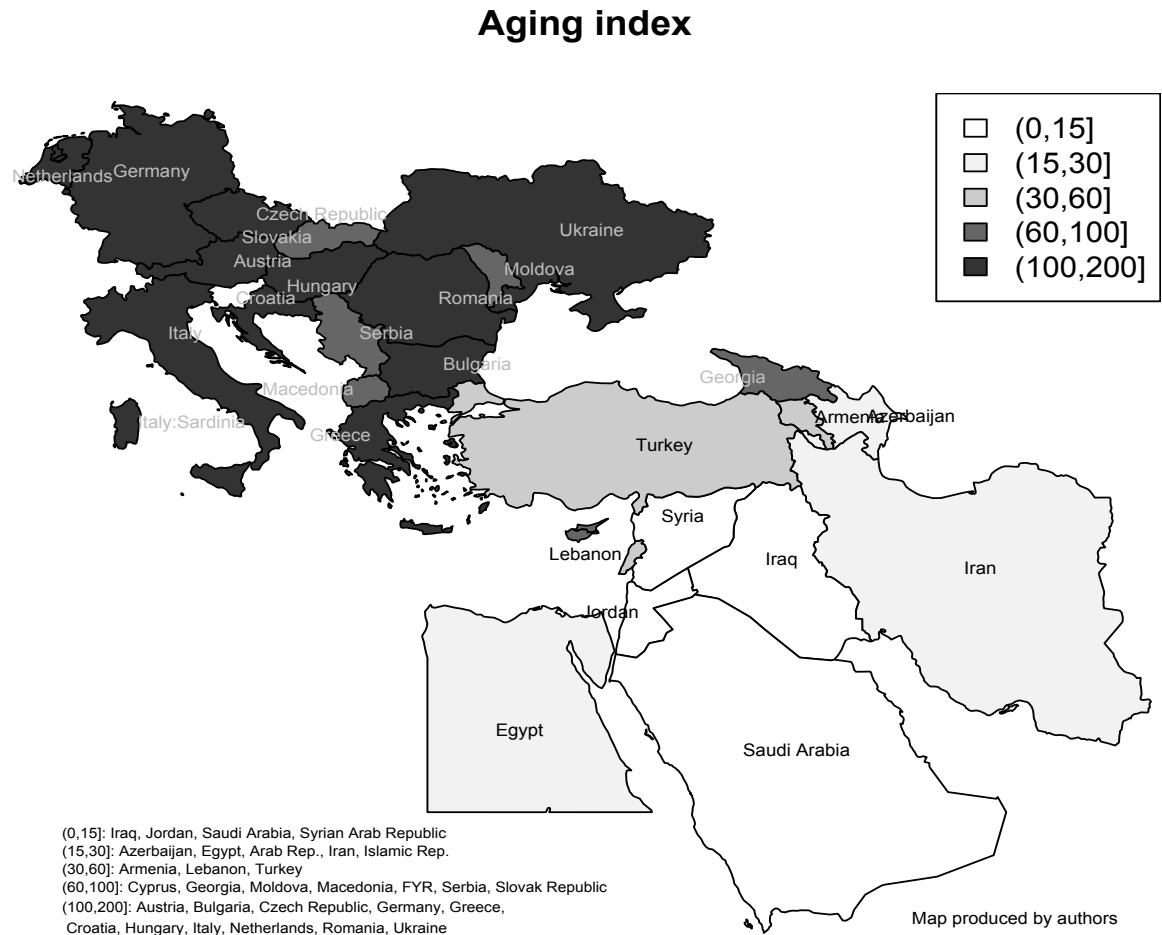- Migration
- Changes in family structures
- Diverse experiences

Care gaps

- Informal care burden
- Workforce shortages
- Care chains

- Systems inter-dependencies
- Weaking supply of care
  - Both familial & formal
- Connections across health and care
  - Continuity of care is not linear but more complex
- Care and the climate
- A crisis phenomena
  - Funding, public confidence, political
- System shocks
  - COVID19: current & future LTC organization & delivery

Population Ageing the context of MENA Region

- 'Rapid' process of ageing
  - Fast and steep
- High level of unpreparedness
  - Health and care services
  - Infrastructure
- Social & economic opportunities
- Social-determinants of health and wellbeing at old age
- Nested within other demographic dynamics (pop. growth & dividends)
- Socio-political structures
- Perceived age-related roles & duties

Aging index

Legend:
- (0,15]
- (15,30]
- (30,60]
- (60,100]
- (100,200]

(0,15]: Iraq, Jordan, Saudi Arabia, Syrian Arab Republic
(15,30]: Azerbaijan, Egypt, Arab Rep., Iran, Islamic Rep.
(30,60]: Armenia, Lebanon, Turkey
(60,100]: Cyprus, Georgia, Moldova, Macedonia, FYR, Serbia, Slovak Republic
(100,200]: Austria, Bulgaria, Czech Republic, Germany, Greece, Croatia, Hungary, Italy, Netherlands, Romania, Ukraine

Map produced by authors

- Universal health coverage remains an aspiration

- LTC is in a policy blind-spot, for many reasons

- Reliance on families (traditional hubs of care)
    - Within a context of dynamic changes in family structures, living arrangements ...

- Environment & infrastructures

Quality of life & inequalities

- Some recent national, regional and global policy attention
    - Narratives of intergenerational solidarity, families & ageing in place

- Limited LTC services
    - Primarily community based, NGOs and informal arrangements

- Lack of acknowledgment of caring burdens (provided mainly by women)

- Opportunities: population dividends & labour supply

Opportunities & Challenges

Fiscal constraints

Competing policy priorities

Challenges to traditional social structures

- Extended families, closed-net communities

Environment & infrastructure

Awareness & stigma

- E.g., Dementia

- A growing interest in global ageing, particularly healthy ageing
- The UN decade of health ageing (2021-2030) – building on the 2030 SDGs
- An interest in LMIC and the MENA region in developing ageing policies and supporting the community as a whole
- Realization of the need for data, evidence and dialogue
- A new initiative to bring stakeholders together (MENARAH)
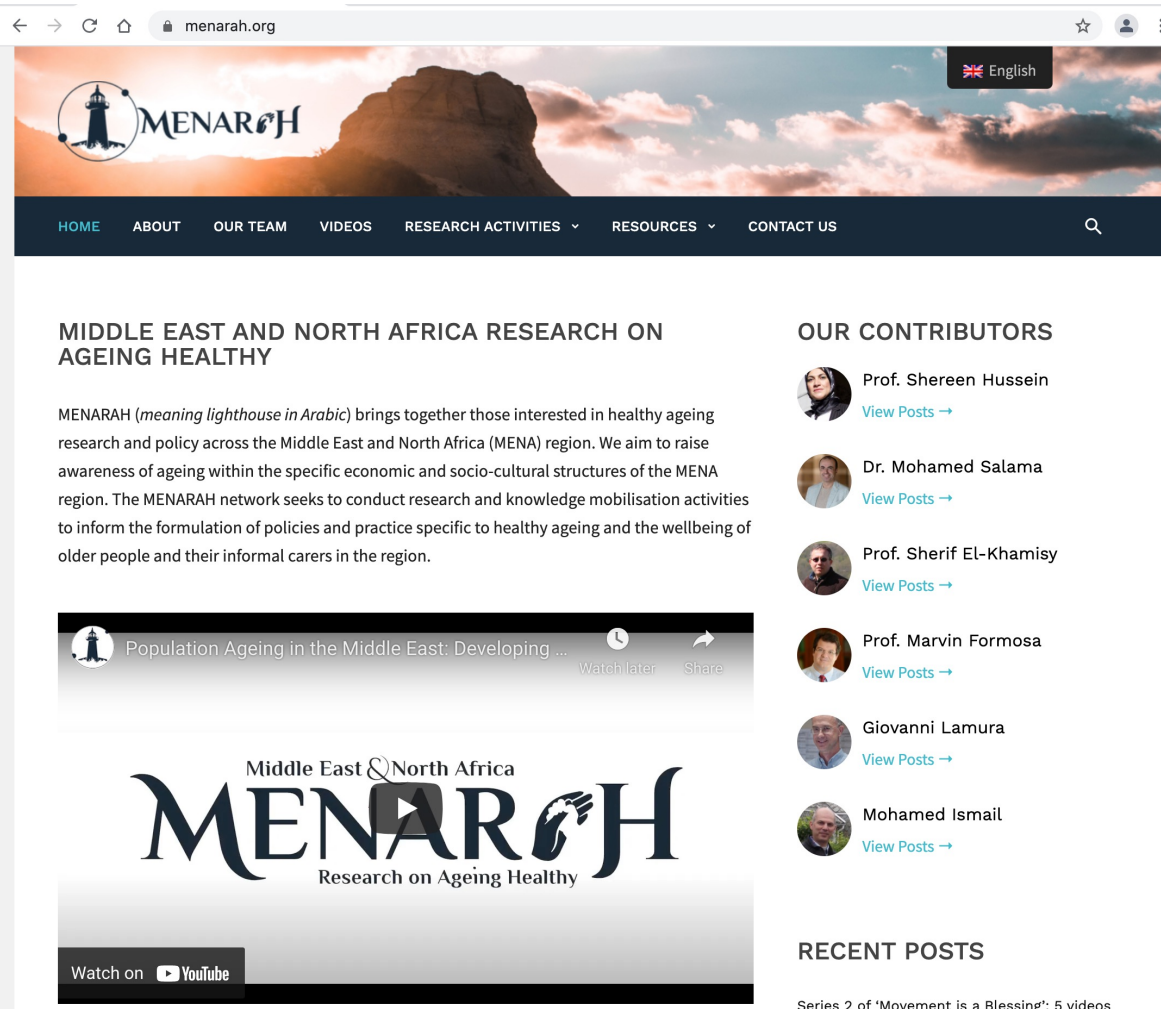
Substitution & Complementarity

- Europe
  - Increasing role of the individual, family & communities
  - Fragmentation vs. integration
  - Crisis narratives

- MENA
  - Early developments
  - Informal care (embedded in policy development)
  - Fiscal & governance constraints
  - Opportunities within an evolving crisis

The Middle East and North Africa Research on Ageing Healthy (MENARAH) Network: www.menarah.org

- Launched Sep. 2020; funded by QR GCRF funding
  - Builds on activities since 2015
- Focuses on healthy ageing in its broadest meaning
- A network of researchers, NGOs, policymakers and many more
- Aims to
  - Raise awareness and connect different actors
  - Conduct research and knowledge mobilisation activities
  - Inform policy and practice formulation & development

The MENARAH Network Launch Event summary
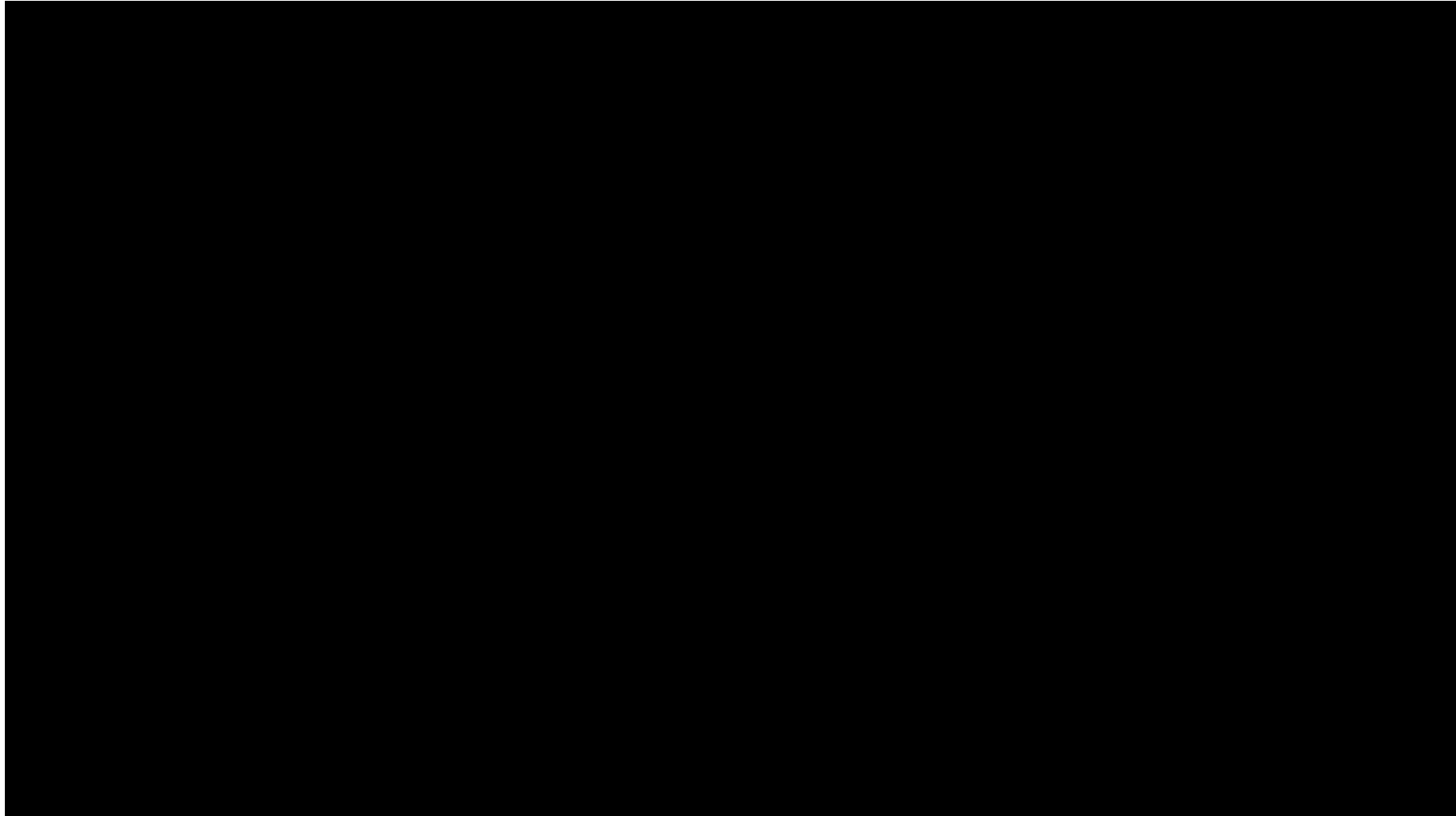
Paradigm shift from a notion of 'crisis' to realising opportunities

The flow of knowledge and ideas is two-directional

Significant role of informal care
　　Including social capital and community

Unequal experiences/pathways but common goals

- Placing LTC on the agenda!
- (In)Equality
- Rethinking the life-course
  - Learning, training and work
- Care continuum
- Inclusivity of the built and socially-constructed environment
- Assistive technology and LTC
- Re-thinking the notion of 'ageing'
  - While acknowledging inequalities
- Sustainability

Thank you for Listening

Any Questions

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