

Access to long-term care

Across OECD countries, an average of 10.7% of people aged 65 and over received long-term care, either at home or in long-term care facilities, in 2019 (Figure 10.13). More than one in five people aged 65 and over received LTC services in Israel (23.1%) and Switzerland (23.4%), compared with less than 5% in Canada (3.8%), the Slovak Republic (3.4%), Ireland (3.2%), Japan (2.6%), Portugal (1.9%) and Poland (0.8%).

The majority of LTC recipients are older adults (Figure 10.14). Although LTC services are also delivered to younger disabled groups, people are more likely to develop disabilities and need support from LTC services as they age. In 2019, just 25% of LTC recipients on average across OECD countries were younger than 65, while a further 26% were between 65 and 79. Adults aged 80 and over represent the majority of LTC recipients in OECD countries. On average in OECD countries, 49% of LTC recipients were aged 80 and above in 2019. In Japan, more than four in five (84%) LTC recipients were 80 and over, while people aged 0-64 represented just 1% of LTC recipients.

While population ageing is a significant driver of the growth in LTC users over time, the cross-country variation in the proportion of older LTC recipients suggests that other drivers – notably publicly funded LTC services – also determine LTC use. For example, Israel has one of the youngest populations among OECD countries, but a greater than average proportion receive LTC. Because data on people receiving care outside public systems are more difficult to collect and may be underreported, figures for countries that rely more heavily on privately funded care may be artificially low. Cultural norms around the degree to which families look after older people may also be an important driver of the use of formal services (see indicator “Informal carers”).

Many people in need of LTC care wish to remain in their homes for as long as possible. In response to these preferences – and the high costs of care facility-based LTC – many OECD countries have developed services to support home-based care for older adults. Nevertheless, changing policy priorities have not always resulted in a significant move away from facility-based LTC. Between 2009 and 2019, the proportion of LTC recipients who received care at home rose only marginally, from 67% to 68% (Figure 10.14). Increases were particularly large in Portugal, Australia, Finland, Germany and Switzerland. In Germany, part of the increase was due to policy reforms expanding the definition of LTC, thereby increasing the number of benefit recipients. In Australia, reforms expanding financing for aged care and increasing the number of home care packages available has similarly led to increases in the number of LTC recipients. While the proportion of LTC recipients living at home has increased over the past decade in most OECD countries, it has declined significantly in Estonia, where there has been an increase in the availability of institutional general care and the number of added home service users has increased at a slower pace compared to 24-hour services in the social welfare system. Even where

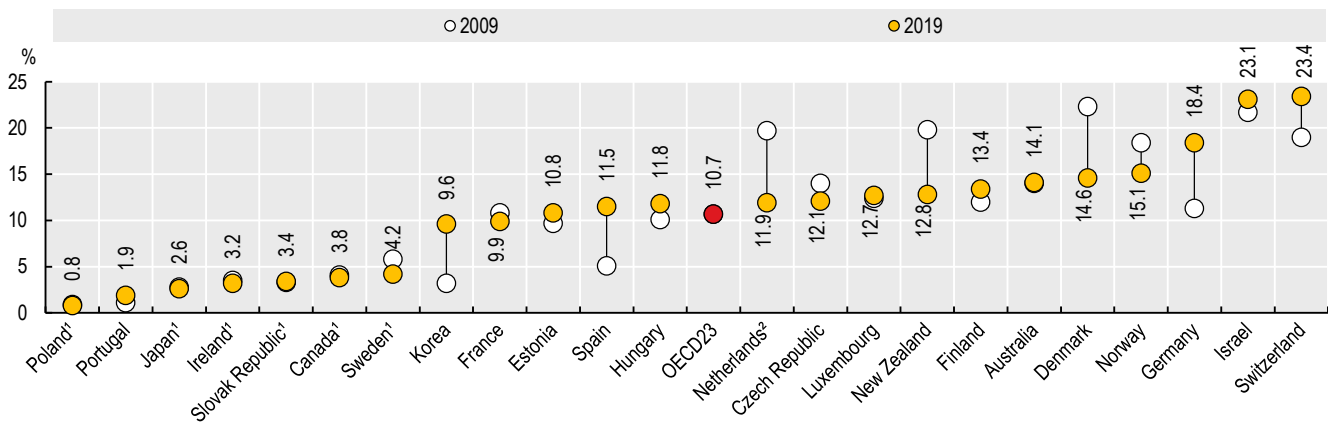
people live with limitations in activities of daily living (ADL) and in instrumental activities of daily living (IADL), they may not always receive sufficient formal LTC support. Among people aged 65 and over across 22 European countries, half of individuals living at home with at least one ADL or IADL limitation – and nearly two in five (37%) people living with three or more ADL/IADL limitations – reported that they either did not receive sufficient informal LTC help, or did not receive formal LTC support (Figure 10.15).

Definition and comparability

LTC recipients are defined as people receiving LTC from paid providers, including non-professionals receiving cash payments under a social programme. They also include recipients of cash benefits such as consumer choice programmes, care allowances or other social benefits granted with the primary goal of supporting people with LTC needs. LTC can be delivered in facilities (institutions) or at home. LTC institutions refer to nursing and residential care facilities that provide accommodation and LTC as a package. LTC at home is defined as people with functional restrictions who receive most of their care at home. Home care also applies to the use of institutions on a temporary basis, community care and day-care centres, and specially designed living arrangements. Data for Poland, Ireland, Canada, the Slovak Republic, Iceland and Belgium are only available for people receiving LTC in institutions, so the total number of recipients will be underestimated. In Estonia, the decrease in recipients of home care refers to those who have a “curator” appointed by local government. An increase in other social welfare home service users has not compensated for this decline, partly due to the fact that not all home services are considered to be LTC health services. In New Zealand, the decline in home care recipients between 2009 and 2019 is attributable in part to a change in methodology, as well as more consistent re-assessments of home care needs by District Health Boards.

Data on LTC services are difficult to collect in many countries, and there are some known limitations of the figures. Data for some countries refer only to people receiving publicly funded care, while other countries include people who are paying for their own care. For the indicator on unmet LTC needs, the data relate to the population aged 65 and over, based on wave 8 of the Survey of Health, Ageing and Retirement in Europe (SHARE), referring to 2019 and 2020. It is important to highlight that the COVID-19 pandemic may have affected the field work conducted for the survey in 2020. While there is no internationally accepted definition of unmet LTC needs, SHARE facilitates estimation of the share of older people reporting limitations in daily activities (ADL and IADL) who did not receive formal home care or sufficient informal care.

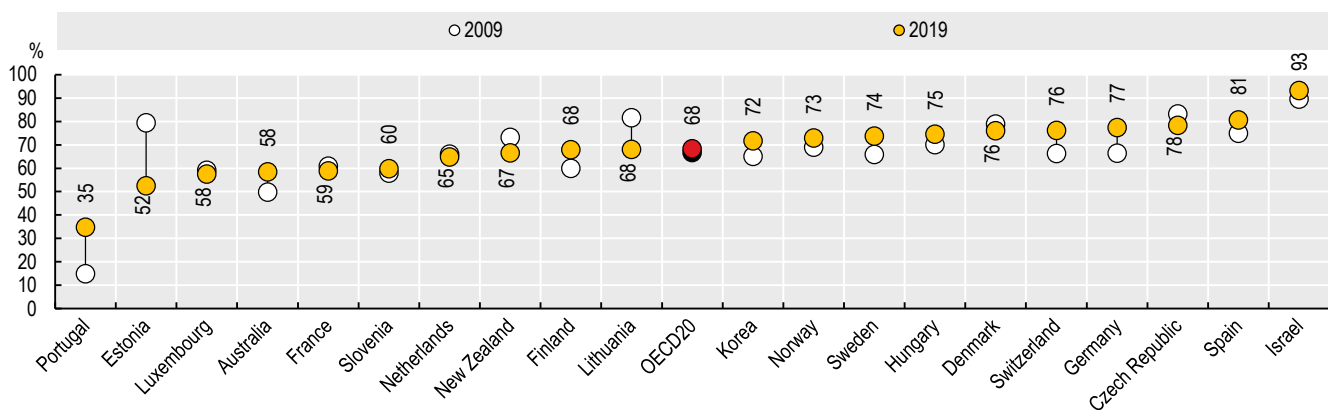
Figure 10.13. Share of adults aged 65 and over receiving long-term care, 2009 and 2019 (or nearest year)



1. Includes only recipients of LTC in institutions. 2. 2018 data.
Source: OECD Health Statistics 2021.

StatLink <https://stat.link/w09fn2>

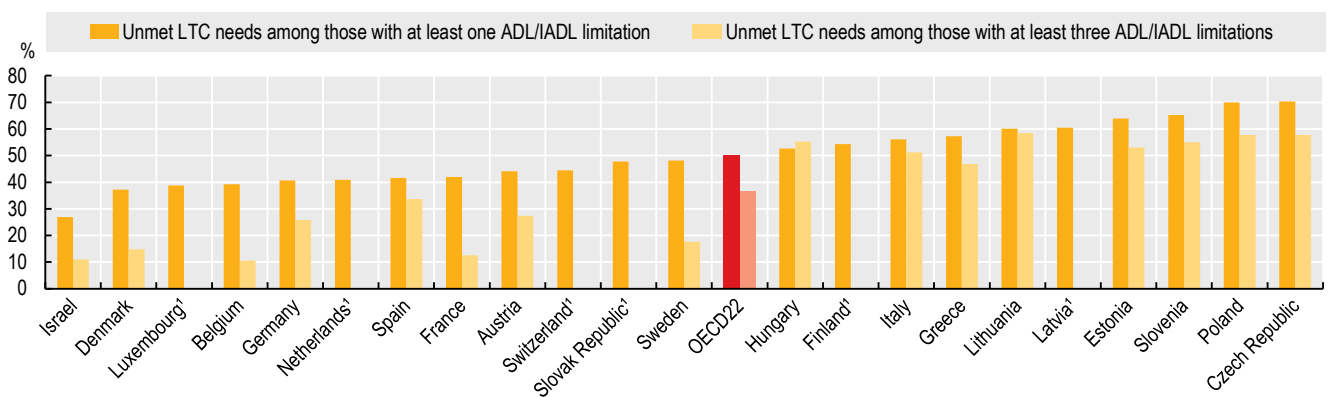
Figure 10.14. Long-term care recipients aged 65 and over receiving care at home, 2009 and 2019 (or nearest year)



Source: OECD Health Statistics 2021.

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Figure 10.15. Unmet long-term care needs among people aged 65 and over living at home, 2019-20



1. Low sample size.
Source: SHARE, wave 8 (2019-20).

StatLink <https://stat.link/prv3dy>



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