Supporting Family Carers

Innovative examples from Austria

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Patterns of family care in Austria

- 50% of carers spend between 5 and 15 hours per week; 25% exceeds 15 hours a week
- 1/3 are employed full-time
- 1/4 have cut back gainful employment
- 47% either don’t have any income or only below €700
- 1/5 don’t have a own pension insurance
- 79% of elderly carers are female
- average age: 58 years

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Snapshot of the development of the LTC system in Austria

- In 1993, the universal system of LTC allowances has been implemented.
- 82% of LTC allowance receivers report that the allowance covers a significant portion of costs.
- At present, around 5% of the Austrian population receive long-term care benefits.
- Since 01/01/2009 raise of the long-term care allowance.
## LTC allowance are granted in seven categories

<table>
<thead>
<tr>
<th>Level</th>
<th>Monthly benefit</th>
<th>Monthly extent of need for care</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>148 euro</td>
<td>&gt; 50 hours</td>
</tr>
<tr>
<td>2</td>
<td>273 euro</td>
<td>&gt; 75 hours</td>
</tr>
<tr>
<td>3</td>
<td>421 euro</td>
<td>&gt; 120 hours</td>
</tr>
<tr>
<td>4</td>
<td>632 euro</td>
<td>&gt; 160 hours</td>
</tr>
<tr>
<td>5</td>
<td>859 euro</td>
<td>&gt; 180 hours &amp; qualified nurse is required</td>
</tr>
<tr>
<td>6</td>
<td>1171 euro</td>
<td>&gt; 180 hours &amp; care during day &amp; night is required</td>
</tr>
<tr>
<td>7</td>
<td>1562 euro</td>
<td>&gt; 180 hours &amp; no movement of fours extremities</td>
</tr>
</tbody>
</table>
Reliefs supporting employed family carers

- Working carers may claim care leave for up to a maximum of two working week per year.
- Care leave can be availed of on a daily or also on an hourly basis.
- If care not only of a temporary nature: can agree a reduction of normal working hours with their employers.
- No data is available on how frequently care leave for eldercare is actually claimed.
- Since 2002 persons caring for dying family members are legally entitled to compassionate leave/family hospice leave (Familienhospizkarenz). Employees enjoy protection against dismissal for up to six months.
"Counselling Cheque" A funding model to recipients of the long-term care allowance of at least category 3 requiring 24/7 care was adopted.

14 days of holidays and recreation for care-giving family members

preferential continued insurance or self-insurance in the pension insurance system for carers

temporary accommodation in a nursing home if care-givers go on holiday or fall ill

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Satisfaction with public support for people caring for dependent older relatives, %

- **DK/NA:**
  - EU27: 24%
  - Austria: 24%
  - Italy: 19%
  - Portugal: 27%
  - Spain: 34%

- **Not at all satisfied:**
  - EU27: 18%
  - Austria: 14%
  - Italy: 24%
  - Portugal: 21%
  - Spain: 25%

- **Not very satisfied:**
  - EU27: 32%
  - Austria: 32%
  - Italy: 33%
  - Portugal: 32%
  - Spain: 25%

- **Fairly satisfied:**
  - EU27: 22%
  - Austria: 22%
  - Italy: 19%
  - Portugal: 15%
  - Spain: 25%

- **Very satisfied:**
  - EU27: 9%
  - Austria: 9%
  - Italy: 5%
  - Portugal: 5%
  - Spain: 5%
Professional care at home is available at an affordable cost, % of agreement

- EU27: 31%
- Austria: 37%
- Italy: 28%
- Portugal: 29%
- Spain: 18%

Source: Eurobarometer 2007:77
Combining work and eldercare should be easier to accomplish. Social policy should be more responsive to the needs of **caring employees**.

Appreciation of care work by the general public and the authorities should be enhanced. In particular, unnecessary **bureaucratic** obstacles must be removed when asking for support from **community service agencies**.

Family carers should be encouraged to **organize themselves** at the national level as an official lobby organization in order to be able to raise their voice in caring issues.
Recommendations (II)
taken from Hörl 2005 (EU-Project: EUROFAMCARE)

- Support by installing permanent **supervision** programmes and effective telephone **counselling** is needed; family carers’ complaints or proposals for improvements of their situation have to be investigated more actively and systematically.

- The development of **quality assurance methods** within the sphere of family care is necessary as well as the implementation of non-intrusive control mechanisms.

- More light is to be shed on the “dark figures” of elder **abuse** and neglect in family care situations.
Thank you very much for your attention!