Long-term care system development in Europe and the Middle East: Reflections on Iran's long-term care system

Shereen Hussein
Professor of Health & Social Care Policy
London School of Hygiene and Tropical Medicine
United Kingdom

Overview



Population Ageing

Structural changes

Speed

Economic & social implications

Long Term Care (LTC) 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)
- Emerging opportunities for policy and practice developments

What is Population Ageing?



Changes to the whole structure of a population

Measurements

- 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

Fertility & Life Expectancy in the MENA region

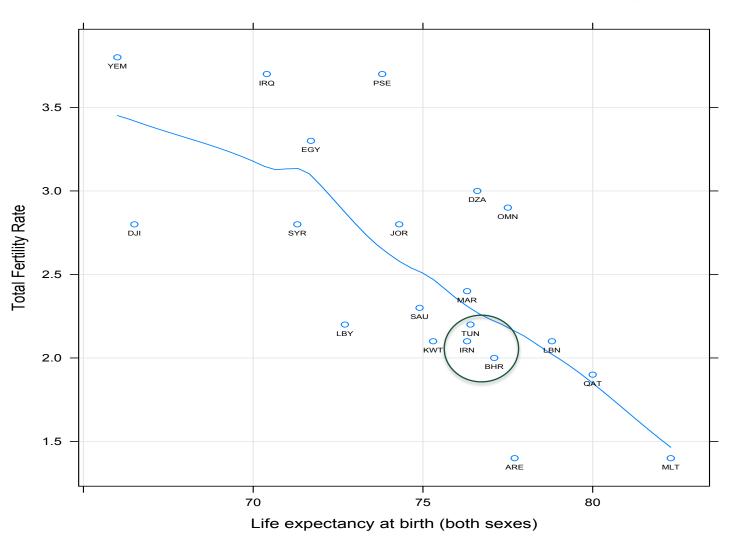


Different countries at different stages

There is an inverse relationship between fertility and LE across the region

Iran is situated close to Tunisia and Bahrain in terms of both TFR and LE

Current TFR reflects previous fertility policies in Iran



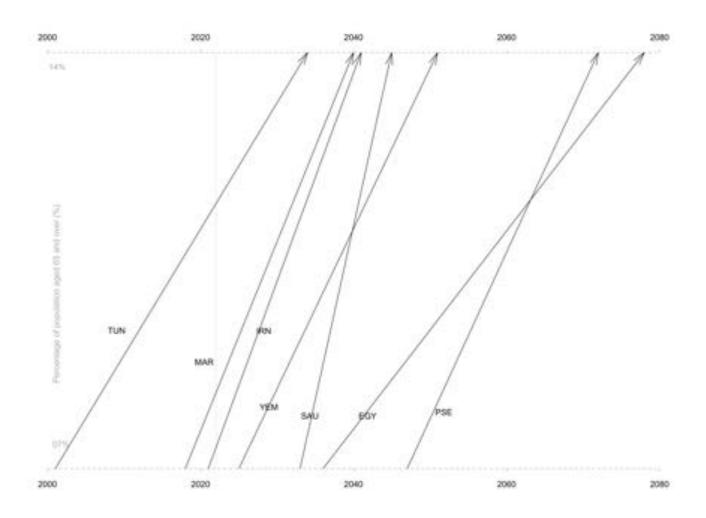
The pace of ageing transition



Only Tunisia, Iran, Lebanon and Morocco have started the transition

The pace of change in Iran is considerable (20 years in total)

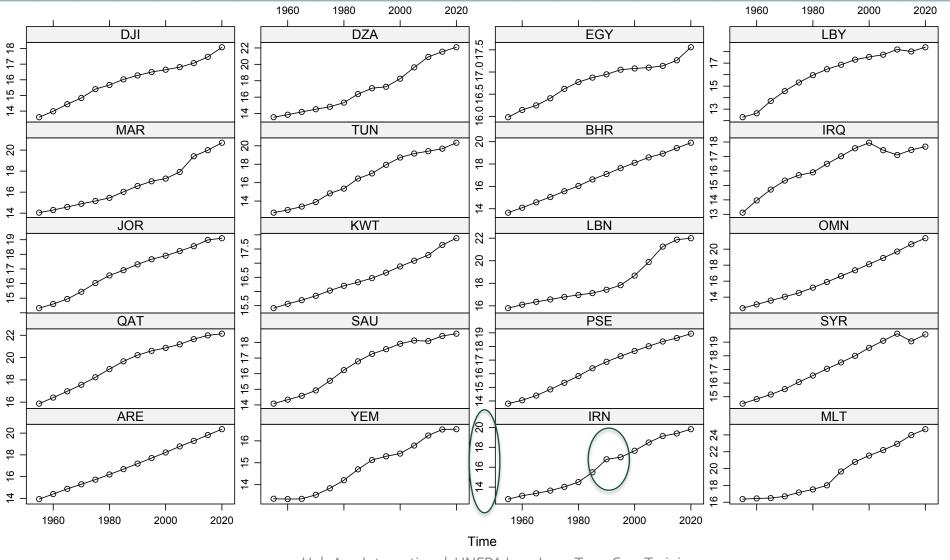
By 2041, 14% of the Iranian population will be aged 65 or more



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Life expectancy at age 60 is also increasing





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

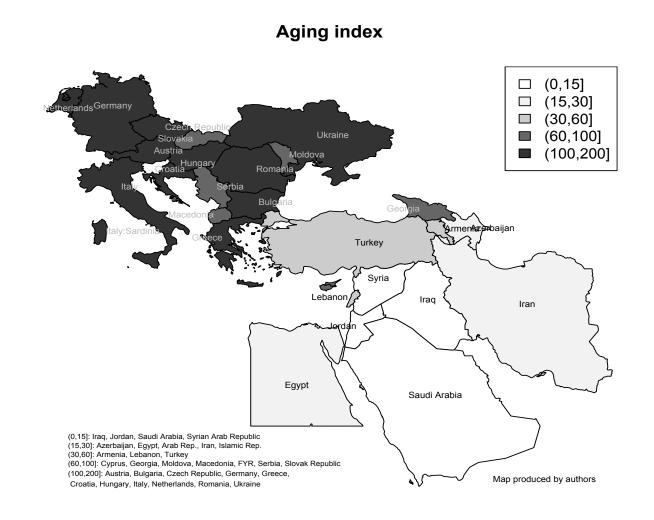
Country	Life Expectancy at birth		Healthy life expectancy at birth		Difference between life expectancy and healthy life expectancy in years	
	Male	Female	Male	Female	Male	Female
Malta	79.9	83.8	70.9	71.9	9.0	11.9
Kuwait	79.3	84.0	69.5	71.1	9.8	12.9
Tunisia	74.9	79.2	66.1	67.7	8.8	11.5
Jordan	77.0	78.8	68.1	67.2	8.9	11.6
Iran	75.7	79.1	66.0	66.5	9.7	12.6
Lebanon	74.0	79.2	65.1	67.1	8.9	12.1
Libya	74.2	77.3	64.9	65.5	9.3	11.8
Algeria	76.2	78.1	66.7	66.1	9.5	12.0
UAE	75.1	78.4	65.8	66.2	9.3	12.2
Oman	73.0	75.3	64.5	64.5	8.5	10.8
Qatar	78.0	76.6	68.1	65.1	9.9	11.5
Bahrain	75.0	77.0	66.0	65.5	9.0	11.5
Egypt	69.6	74.1	62.3	63.7	7.3	10.4
Morocco	71.7	74.3	63.7	63.7	8.0	10.6
Iraq	69.9	75.0	61.6	63.7	8.3	11.3
Saudi Arabia	73.1	76.2	63.8	64.4	9.3	11.8
Syria	71.2	74.3	62.5	63.3	8.7	11.0
Djibouti	64.1	67.8	57.2	58.9	6.9	8.9
Yemen	64.4	68.9	57.0	58.0	7.4	10.9

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

Population Ageing in Iran and the MENA region



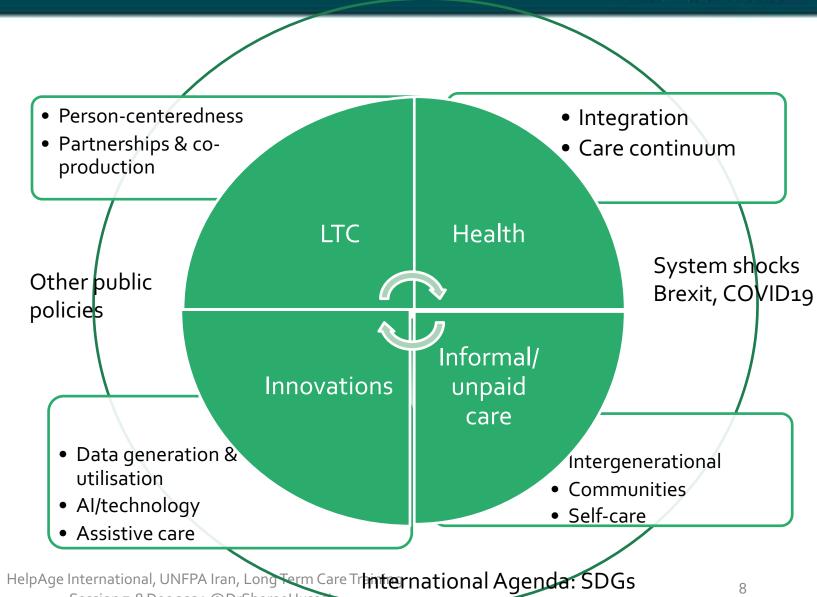
- 'Rapid' process of ageing
 - Fast and steep
- High level of unpreparedness
 - Health and LTC services
 - Infrastructure
- Social & economic opportunities
- Social-determinants of health and wellbeing at old age
- Nested within other demographic dynamics (pop. growth & dividends)
- Socio-political structures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



Long Term Care Eco-systems - Europe



- 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



LTC models - Europe



Care regimes _____

Care Mix (Western)
Universal (Nordic)
Family-based (Mediterranean)
Transitional (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

COVID₁₉



Social isolation

Care interruption

Technology
Access inequalities

COVID19 & LTC market

Changes in LTC preferences

Severity of needs

Workforce implications
Financial cost

LTC eco-systems in the MENA region



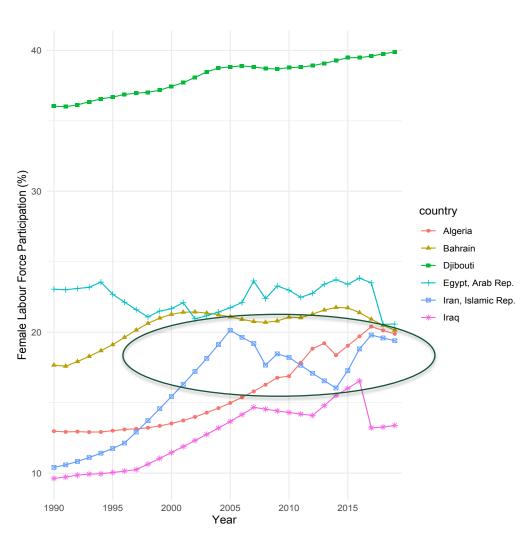
- Universal health coverage remains an aspiration
- LTC is in a policy blind-spot, for many reasons
- Reliance on families (traditional hubs of care)
 - Within a context of dynamic changes in family structures, living arrangements ...
- Environment & infrastructures

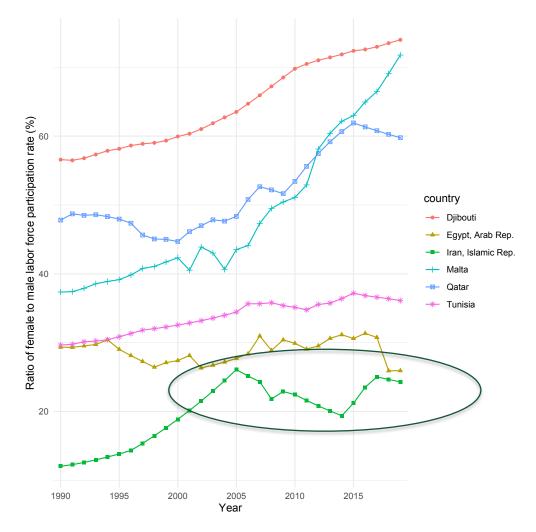
- Some recent national, regional and global policy attention
 - Narratives of intergenerational solidarity, families
 & ageing in place
- Limited LTC services
 - Primarily community based, NGOs and informal arrangements
- Lack of acknowledgment of caring burdens (provided mainly by women)
- Opportunities: population dividends & labour supply

Quality of life & inequalities

Female Labour Force Participation







Implications of population ageing

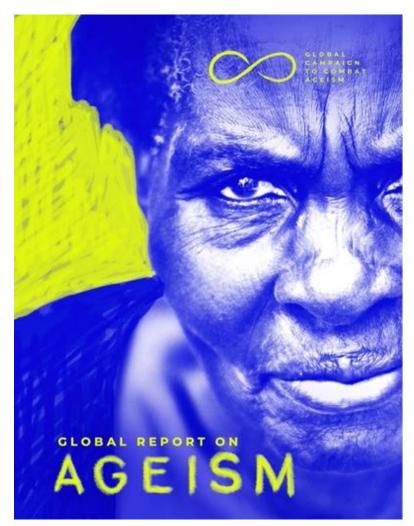


- > Fiscal/economic implications
 - When combined with low employment rates
 - ightharpoonup Potential underutilisation of human resources ightharpoonup losing opportunities associated with population dividends
 - Pension and insurance systems (linked to employment)
 - Distinguishing population and system demographics
- > Social implications
 - Perceptions of ageing (changing habits)
 - Opportunities (life-long learning, re-employments)
 - Risks (isolation & loneliness, abuse/safeguarding)
 - > Care burden

Ageism, Social Norms & Isolation



- > Pre-existing & new perceptions
- Definitional challenges: what does 'ageism' mean in different contexts and settings?
 - Benevolent and hostile elements
- Operates at different levels: cognition, emotional & actions
- Different components: stereotyping; prejudice and discrimination
- ➤ Intersectionality: age, disability, gender, race etc.



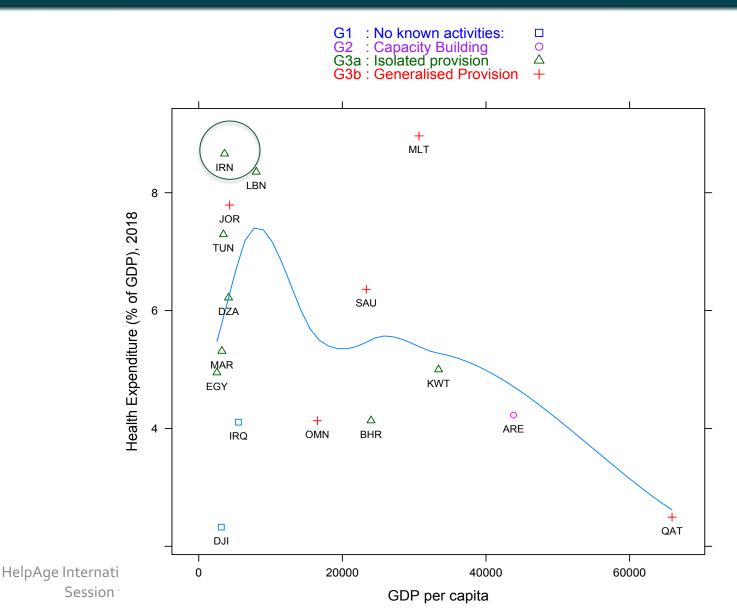
Health Care expenditure as a percentage of GDP and GDP per capita



Distributed by level of palliative care: Iran is G₃a

Iran, Lebanon, and Jordan have higher HCE (compared to Morocco, Egypt, and Iraq albeit all having similar GDP per capita).

Iran had several major health reforms over the years.



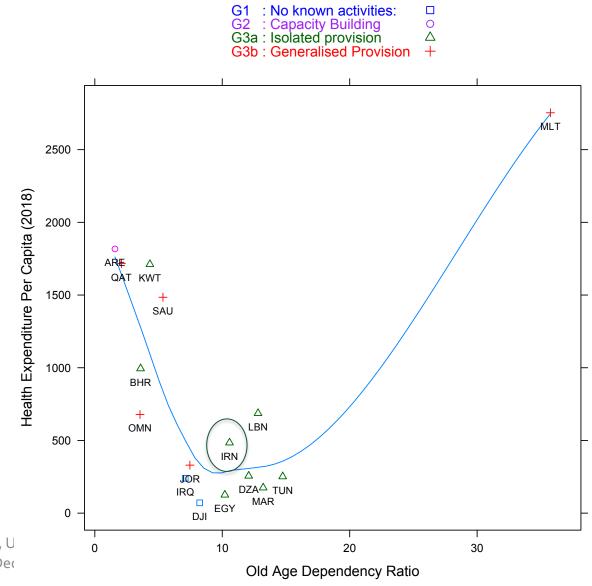
Health expenditure per capita (US\$) and old age dependency ratio



One would expect higher health expenditure per capita as old age dependancy ratio increases

Not the expected trend (due to GCC high health expenditures and younger age groups

Yet, there are some variations considering other countries e.g. Egypt & Algeria



LTC services in the MENA region



- > Informal, unregulated and fragmented care
 - Provided by families, domestic workers and charitable organisations on ad hoc basis
 - ➤ Intergenerational exchange (bi-directional)
 - > Lacks a coherent framework
 - Questions on sustainability and suitability
- > Job creation opportunities
 - > One of the fastest growing markets for employment globally, esp. for women
 - > Training and career development
 - > Trust and perceptions

Proposed LTC services: based on needs





Fully independent older people

- Community participation
- Later life learning
- Day centres
- Home support services
- Preventative services
- Digital literacy



care needs

Older people with

• Home care

- Day care
- Home support services
- Supported living
- Family support services
- Community support



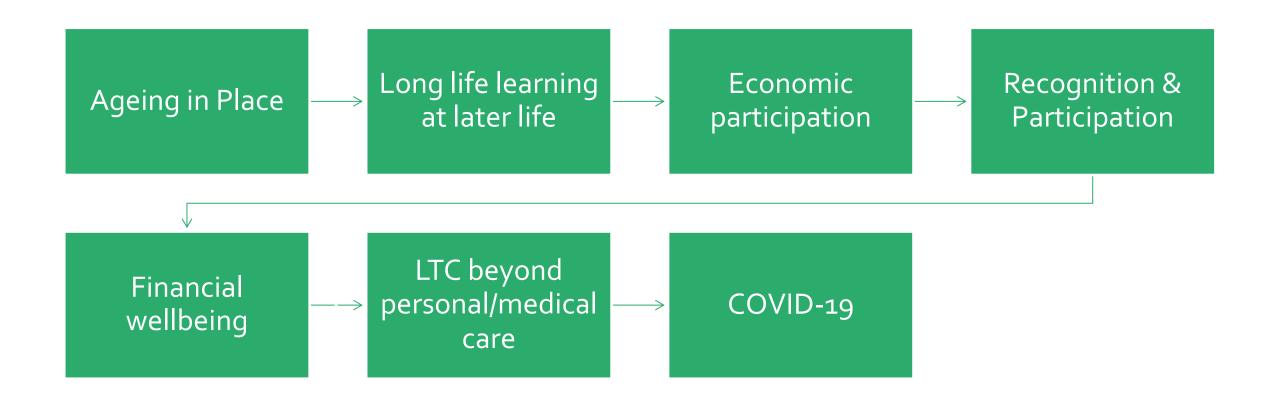
Older people with complex needs

Care homes

- Nursing homes
- Palliative care
- Family support services
- Specialist care services (e.g. Dementia care)

Potential of LCT services to achieve healthy ageing





LTC eco-systems



Paradigm shift from a notion of 'crisis' to realising opportunities

The flow of knowledge and ideas is two-directional

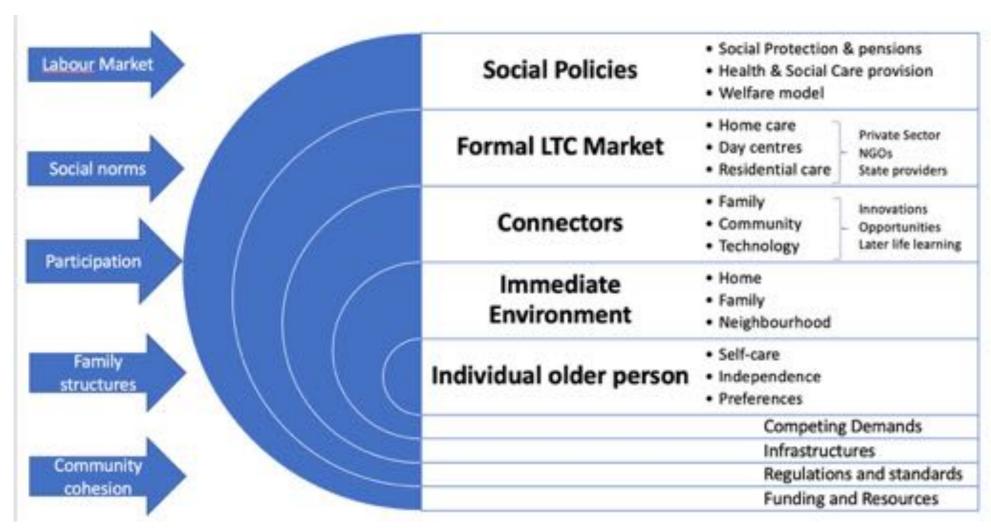
Significant role of informal care Including social capital and community

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

The LTC eco-system





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

Opportunities & Challenges



Fiscal constraints

Competing policy priorities

Challenges to traditional social structures

 Extended families, closednet communities

Environment & infrastructure

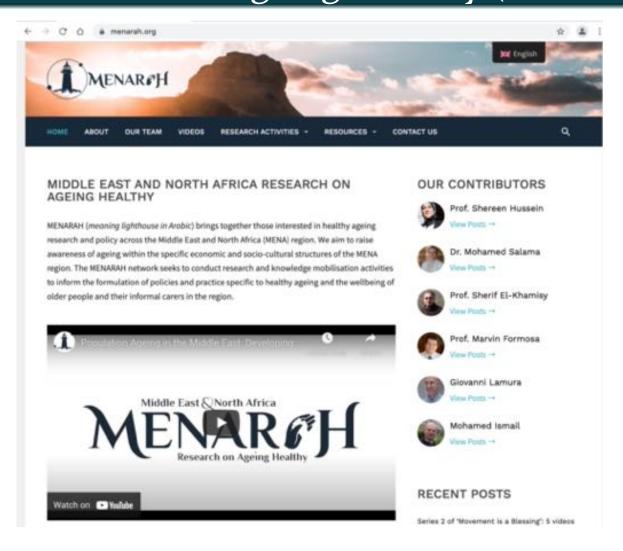
Awareness & stigma

• 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

Awareness Raising The Middle East and North Africa Research on Ageing Healthy (MENARAH) Network

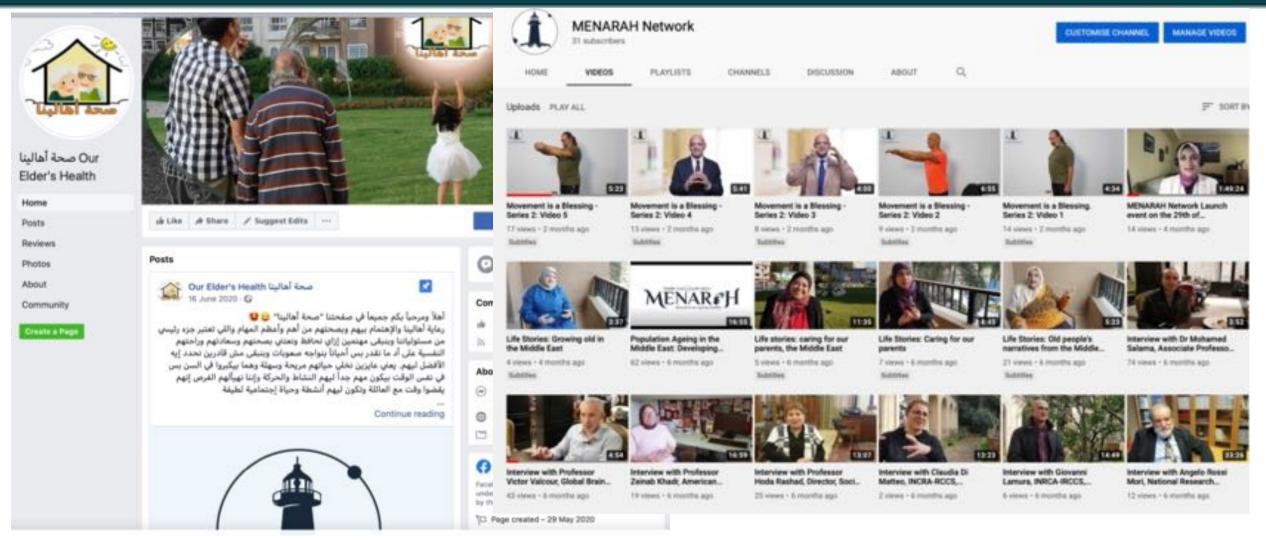




- Launched Sep. 2020 (www.menarah.org)
 - Builds on activities since 2015
- Focuses on healthy ageing in its broadest meaning
- A network of researchers, NGOs, policymakers and many more
- Aims to
 - Raise awareness and connect different actors
 - Conduct research and knowledge mobilisation activities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

Developing Practical Online Tools

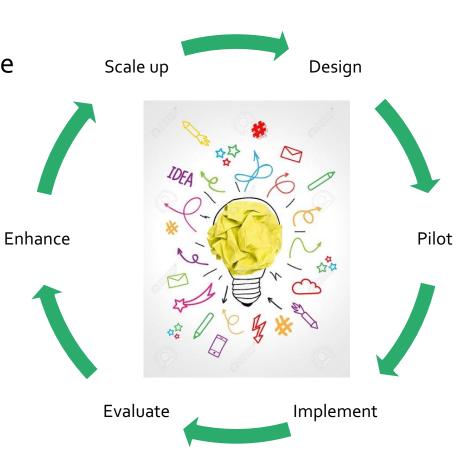




Designing policy services & interventions

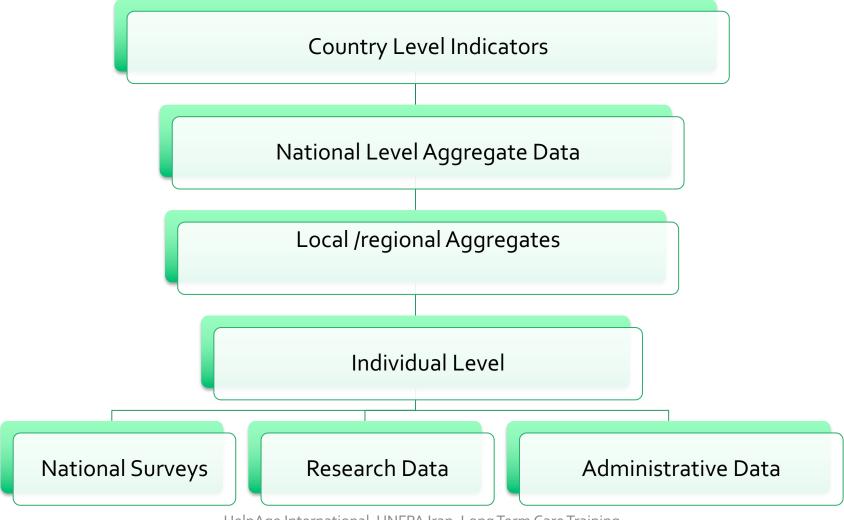


- ➤ Theory of Change
- > Data & evidence
 - Diversity of sources: opinion polls, administrative date, small surveys, scientific studies
 - Indicators: individual, community and national levels
 - Accumulative knowledge/situational analysis
- Consultations
 - Ensuring the voices of different groups and stakeholders
- Language and terminologies
 - Communications
- > Test pilots and scaling up
 - > Implementation & evaluation



Types of data

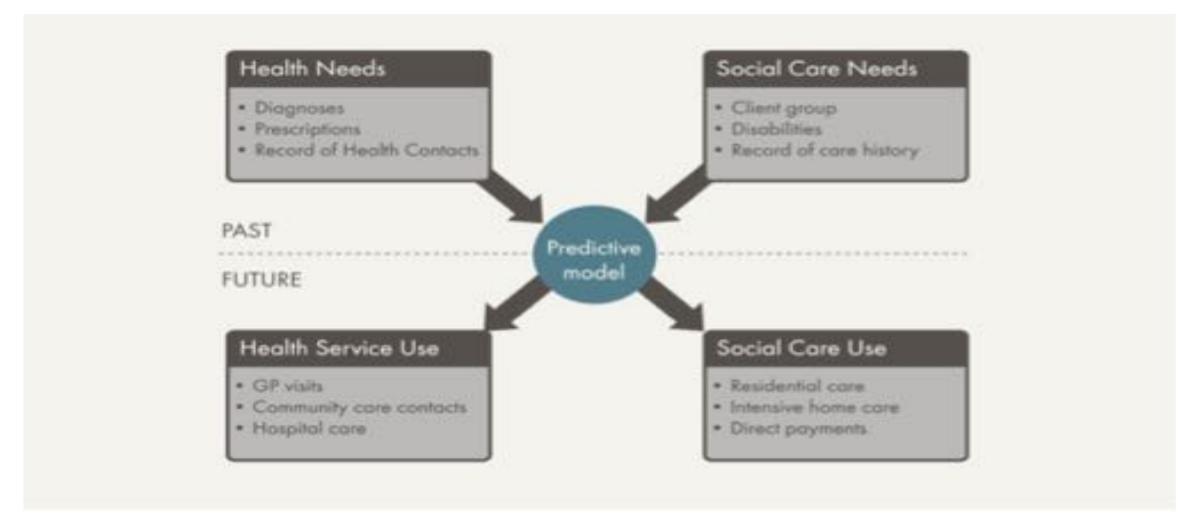




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Using data and modeling to monitor and predict future needs





Moving forward



Empower older people and enhance self-care

- Through the life course & Public engagement (language and images)
- Support informal carers

Capacity building & knowledge mobilization

Lessons from COVID19

Create formal mechanisms for LTC provision

- Market shaping
- Set standards and regulations
- Partnership working & integrated services
- Pilot, evaluate and upscale

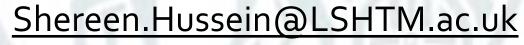
Develop and train a diverse workforce

- Creation of job opportunities and career opportunities
- Capitalise on the window of youth dividends

Funding and financing LTC



Thank you for Listening



@DrShereeHussein
@MENARAH3

