



The New European Care Strategy towards affordable quality care for all people who need it.

1. Need for better Care: the EU responds to the calls

In the last quarter of 2022, the European Commission and the European Council have taken several decisions aiming at delivering better health, care and well-being for all people who need it. With the recent decisions (7th September and 8th December), the Commission and the Council are responding to the many calls for improvement of care from the European Parliament, Member States, local and regional authorities, Human Rights institutions and countless citizens in the civil society.

It is obvious that we can only enjoy good quality care when we act collectively at the European and the national level, when all stakeholders work together and when this care policy is part of a human centered, age-friendly society, where older persons receive the value they deserve.

The COVID-19 pandemic brought to light the structural weaknesses and deficiencies of our care systems, and the much-needed reforms. More cooperation and a rapid improvement of various aspects in the health and care system were needed.

The first thing to realize is that there can only be high-quality care in the EU if joint action is taken at national and international level and if the organization and design of care is part of a preventive and health policy geared to the individual, in who treats older people with respect in an age-friendly society.

On 7th September 2022 the European Care Strategy was launched. It contains a Communication and two Proposals for Council Recommendations aiming to create a sustainable and fair care system covering the topic of care from birth to old age. Referring to the European Pillar of Social Rights, the European Care Strategy brings to the fore the topic of care as an essential component of social rights, as it contributes to the advancement of Gender Equality (Principle 2), Work-life balance (Principle 9), Child Care and Support to Children (Principle 11), Inclusion of People with Disabilities (Principle 17) and Long-term Care (Principle 18).

The EU Care Strategy presents:

- The building blocks of a reform of Early Childhood Education and Care (ECEC)
- A new vision about Long-Term Care (LTC) systems focused towards a transition to community-based solutions respecting individual choices and supporting families.

As ESU, we welcome the EU initiatives to improve and optimize the EU Care and Health systems in Europe.

In the further development of this resolution, we focus on Long Term Care (LTC) to highlight some aspects based on seniors' experiences and seniors' need and underlining that the availability of qualified LTC is a social right, being part of a human-centered, age friendly society.

2. An EU Council recommendation on Long Term Care (LTC)

2.1. The policy context

On 8 December 2022, the Employment, Social Policy, Health and Consumer Affairs Council (EPSCO) adopted a recommendation on long-term care in the EU . The recommendation was made as part of the European Commission's European Care Strategy (7th September). The Commission sets out a vision for the provision of LTC in Europe, outlines supportive actions at the EU level and recommends that Member States draw up national action plans to make care more available and accessible, as well as improving the quality. Some of the key proposals within the recommendation include:

- Ensuring that long-term qualified care is timely, comprehensive, accessible and affordable.
- Increasing the offer and mix of professional long-term care services (including homecare, community-based care and residential care etc.).
- Ensuring high-quality criteria and standards for long-term care providers.
- Supporting informal carers through training, counselling, psychological and financial support.
- Mobilizing adequate and sustainable funding for long-term care, including by using EU funds. Using the European year of skills to shed light on the opportunities in a career of LTFC with refraining and reskilling.

The Care Strategy includes a dedicated framework of indicators that will be used to monitor countries' progress. The European Commission will support Member States through EU funding, mutual learning, and better data leading to a progress report due to be submitted to the Council within 5 years.

2.2. Reflections

- The COVID-19 pandemic has highlighted health sector on EU level to complement and bolster Member State action.

The ESU supports the vision laid out in the documents intending to shift also the care debate on European level toward Member States efforts developing a sustainable model, closing territorial gaps, in particular in rural and depopulating areas, paying attention to users' rights, but also to the carers, the families, and the professionals.

- Demographic change is one of the megatrends of our 21st century, with the possibility of increasing life expectancy, but also with an increasing need for older persons' care.

It must be an absolute priority to surround every person who need it, including older persons, with respectful care, to use technical and digital tools to support the independence of older people, but central remains the caring relationship that is part of our human centered general approach.

EU and Member States should support research and product development with Artificial Intelligence to provide more effective technological help in care at home. For example: Recent research says that robots could do 39% of domestic chores within the next 10 years.

- To reduce the number of care cases it is necessary to monitor the healing processes by establishing a coordinated system between hospital, rehabilitation, homes, carers and families.
- To ensure Human quality for the patient and the nursing caregiver as well as carers in nursing homes, the number of patients per nurse must be reduced in order to guarantee quality care.
- In European most countries the LTCF are suffering from underinvestment and a shortage of workers. The gender gap in care is having a negative impact on the personal and working lives of 90%-female workforce in the formal and informal care sectors. And 7.7 million women are not gainfully employed because they take care of domestic or family care and support responsibilities. Furthermore, measures have to be taken to relieve caregiving relatives through training, counseling and psychological and financial help.

Because of a lack of institutionalization and coordination in the Western Balkan and the Eastern Partnership countries there is an increasing need that the EU steps up and encourages the development of national long-term social policy documents and support their implementation.

Despite all positive achievements to be expected the responsible governance and institutions shall not lose attention on the negative sides of AI and several uncontrolled developments as the needs of the individuals always must have priority.

The ESU calls on Member States to make use of the financial and support measures that the EU can offer to meet staff shortages, lack of training and skills capacity of staff.

- A mix of public services, community based multifunctional initiatives and Homecare.
 - An increase of the wages and improvement of the working conditions in the care sectors.
 - Professional support for care workers, recognition of informal caregivers in their role and providing them with the necessary assistance.
- The care strategy shines a light on the gender dimension that is so pervasive in the sector. 90% of the low-paid care work force are women. Increasing wages shall contribute to reducing the overall gender pay gap, and therefore also the pension gap. This gender gap is even more visible in homecare and in the group of informal carers.

ESU supports a multifold of solutions: the creation of innovative co-housing initiatives, more community services including the participation of older persons, a mix of social and health services, with cooperation between professionals and volunteers.

- The general focus on Long Term Care must integrate completely the improvements for the following life stages of palliative care and hospice movement as high-level responsibility of our society.
- The transformation and optimalization of the care sector is now in the hands of national authorities and stakeholders at all levels. The Commission offers to guide and support the process:

- It is recommended that Member States communicate to the Commission, within 18 months from the adoption of the Recommendation, the set of measures taken or planned to implement it, building where relevant on existing national strategies or plans and taking into account national, regional and local circumstances.
- Subsequent progress reports can be presented in the framework of the Social Open Method of Coordination, the European Semester and other relevant Union programming and reporting mechanisms, such as the national recovery plans. It makes possible that Member States can receive country-specific recommendations in that are- and in mutual exchange of experiences, learn from each other.
- EU Member States should take the statutory a long-term care insurance modeled on Germany, Netherlands, Belgium and Luxembourg as a benchmark for reforms on future financing of their national care systems.

The ESU calls Member States and all stakeholders to participate active in this transformation process, to exchange good practices to listen to the experiences of older persons to optimize the change process and to highlight the community's role supporting best suitable multiple solutions.

3. Better care: for the benefit of the whole society, let's make it happen together!

Giving and receiving care is a fundamental aspect of the European way of life. Caring for people who need assistance, support, help... supporting and providing care are hallmarks of European societies. There are different care models in Europe which continue to develop and change, trying to match with the realities and challenges of modern life.

The COVID-19 pandemic however shone a light on the provision of health and care support services, highlighting that these sectors are underfunded and understaffed, both in formal and informal setting and the need for change is notable. The recent by the EU Council and the Commission launched Communications and Recommendations were answering to the present questions and needs.

We underline that the availability of qualified and affordable long-term care is an indispensable universal right in a human centered society.

The ESU believes that cooperation between Member States can bring a unique benefit for all in Europe. In line with the principle of subsidiarity we will cope with the challenges of care, close to the person who need it and if possible, in dialogue with him/her. But sharing experiences and respectful common reflection will create mutual learning situations. The new European Care strategy is an unique instrument to start from a multifold of experiences, compare and improve them.

Let's make it happen.

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