

12.2. Informal care at home for elderly persons (ELD-3)

12.2.1. Documentation sheet

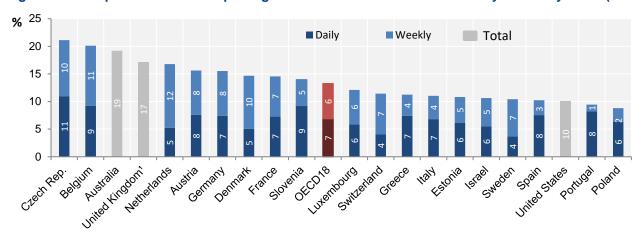
Description	Proportion of persons reporting to be informal carers
Calculation	SHARE survey:
	 Numerator: population aged 50 and over reporting to be informal carers
	Denominator: population aged 50 and over
	HIS:
	 Numerator: population aged 15 and over reporting to be informal carers
	 Denominator: population aged 15 and over (included in HIS)
Rationale	Informal carers are defined as people providing help to family members, friends and people in their social network, living in or outside of their household, who require help for Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL).
	Due to the ageing population the need for long-term care services, both formal and informal, is expected to increase over the coming decades. However, due to declining family size, increased geographical mobility and rising participation rates of women in the labour market, the availability of informal carers is expected to decline in the coming decades.
	Informal care is often regarded as a cost-effective way to avoid or delay the need for institutionalisation. However, it should not be overlooked that there are indirect costs linked to informal care, both for individuals as for the state, in terms of forgone employment and possible negative impact on the informal carers' health. 2
	Enabling informal care and supporting informal carers should be seen as a key policy goal in relation to long-term care in the coming decades. Policies that formalise informal care through cash payments, legal rights, social security, and training opportunities can have substantial positive effects on informal caregivers and the receivers of care and can work to incentivise informal caregiving overall. ¹
Data source	Wave 6 of SHARE (2015) ³
	As soon as the new HIS data will be available (expected for 2019), the results will be added to the online version of this report on www.healthcareinbelgium.be.
Technical definition	For the detailed questionnaire of the SHARE survey, see references SHARE. ³
International comparability	Comparison between European countries is possible on the basis of SHARE. However, it must be noted that because of the informal nature of care provided, it is not easy to get comparable data on the number of people caring for family and friends across countries, nor on the frequency of their caregiving. ⁴
Dimension	Care for the elderly; Accessibility; Sustainability

12.2.2. Results

According to Health at a Glance 2017, which combines data from SHARE Wave 6 with surveys from England, Australia and the United States, 20% of the Belgian population over 50 reports to provide informal care on daily or weekly basis (See Figure 177). For comparison, in 2010 this proportion was 21%.000 20% is amongst the highest rates observed in the OECD dataset, Belgium only being outperformed by Czech Republic. 9% of the Belgian population over 50 reports to provide care on daily basis, 11% on weekly basis.

The high share of informal carers in Belgium is a strength for the Belgian health system. However this kind of caregiving has also been associated with a reduction in labour force attachment for caregivers of working age, higher poverty rates and a higher prevalence of mental health problems in caregivers.⁵ One of the support measures in Belgium to prevent these problems is the paid care leave. More information on the support measures for informal caregivers in Belgium can be found in the KCE report n° 223 on the support for informal caregivers.⁶

Figure 177 - Population over 50 reporting to be informal carers either on daily or weekly basis (2015 or nearest year)



1. United Kingdom refers to England. Note: The definition of informal carers differs between surveys.

Source: OECD Health Statistics 2017 (StatLink http://dx.doi.org/10.1787/888933605939). Data are based on Wave 6 of the Survey of Health, Ageing and Retirement in Europe (2015), Survey of Disability, Ageing and Carers for Australia (2015), wave 7 of the English Longitudinal Study of Ageing (2015), wave 12 of the Health and Retirement Survey for the United States (2014).



- According to 2015 data from the SHARE survey, Belgium has a high proportion of persons over 50 reporting to be informal carers compared to other European countries; xx% of Belgian respondants report to be informal carer.
- In the future due to a decreasing number of informal carers and an increasing number of dependents, a shift towards more formal care can be expected.
- Several policy initiatives are needed to temper this shift and to facilitate informal care, taking into account the opportunity cost of informal care concerning labour market participation and health status of the informal caregiver.

References

- Zigante V. Informal care in Europe. Exploring Formalisation, Availability and Quality London School of Economics and Political Science. EUROPEAN COMMISSION Directorate-General for Employment, Social Affairs and Inclusion Directorate A — Employment and Social Governance Unit A.4; 2018 April. ISBN 978-92-79-86583-1
- European Commission (DG ECFIN) and Economic Policy Committee (AWG) European Economy 3. The 2015 Ageing Report Economic and budgetary projections for the 28 EU Member States (2013-2060). Brussels: 2015 May. Available from: http://ec.europa.eu/economy_finance/publications/european_economy/20
 15/pdf/ee3_en.pdf
- 3. Börsch-Supan A. "Wave 6. Release version: 6.1.1. SHARE-ERIC. Data set." Survey of Health, Ageing and Retirement in Europe (SHARE); 2018.
- 4. OECD. Health at a Glance 2017: OECD Indicators. Paris: 2017. Available from: http://dx.doi.org/10.1787/health_glance-2017-en
- 5. OECD. Health at a glance 2011. 2011. OECD Health Policy Studies
- Anthierens S, Willemse E, Remmen R, Schmitz O, Macq J, Declercq A, et al. Support for informal caregivers – an exploratory analysis. Brussels: Belgian Health Care Knowledge Centre (KCE); 2014. Health Services Research (HSR) Report 223. D/2014/10.273/40