



Barriers of **Disabled Elderly** for **Using** long-term care (LTC) services in home and community settings in Beijing 城市失能老人长期照护服务利用的障碍与政策课题

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Outline



Challenge and Research objectives
挑战和目标



Characteristics of disabled older population in Beijing
北京市老年人口的特征



Main difficulties of disabled elderly on LTC
失能老人社区居家照护的主要困境



Causes and Problems
原因和问题分析



Policy implications and Suggestions
政策建议



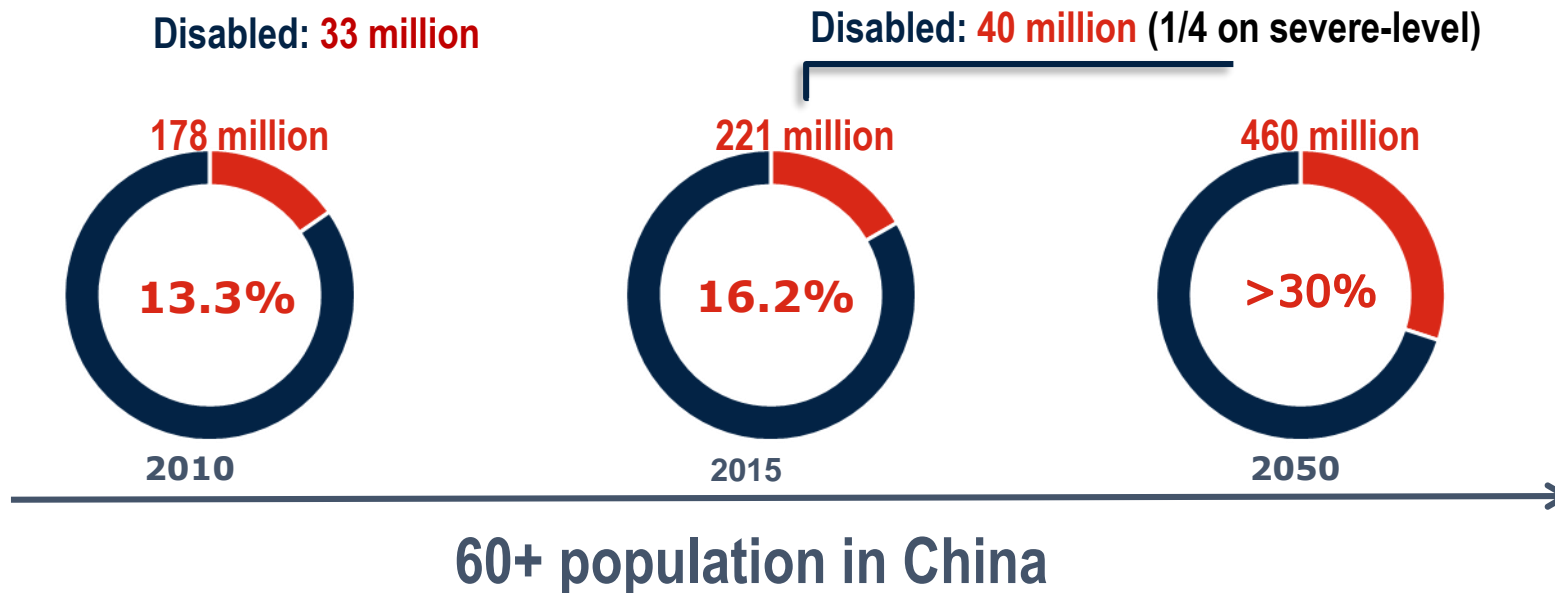
Challenges and Research Objectives

Background

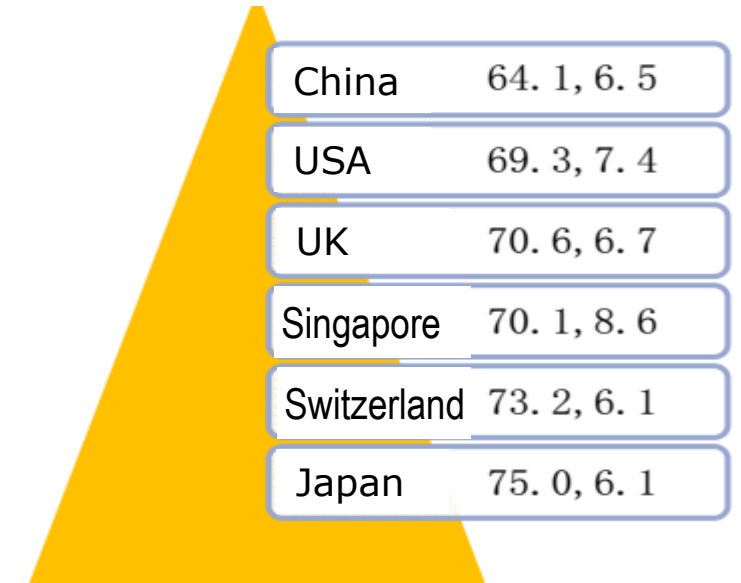
1. Increasing burden of long term care for older people 老年长期照护负担正在日益加重

- Rapid population ageing → more and more older people in senior age and being disabled
- Family structure and cultural change → weaken family abilities to provide care

65+
2001, 7%
2025, 14%
2040, 21%



Unhealthy life expectancy > 6 years



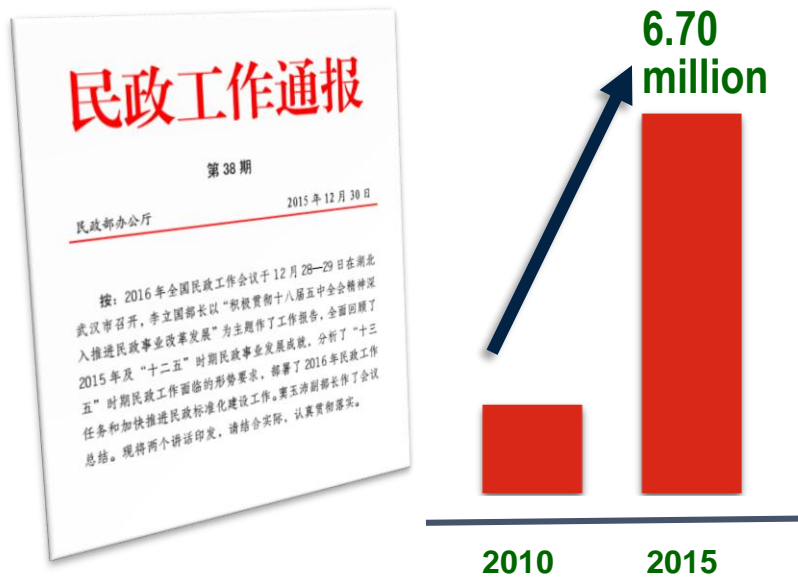
• WHO, The World Health Report 2004

Background

2. Huge gap between financial input and real effect 政策投入与实际效果存在巨大反差

Statistics of elderly care beds, 2010-2015

全国养老床位总量增长**70.2%**



Vacancy rate of elderly care beds

全国养老机构床位空置率升至**48%**



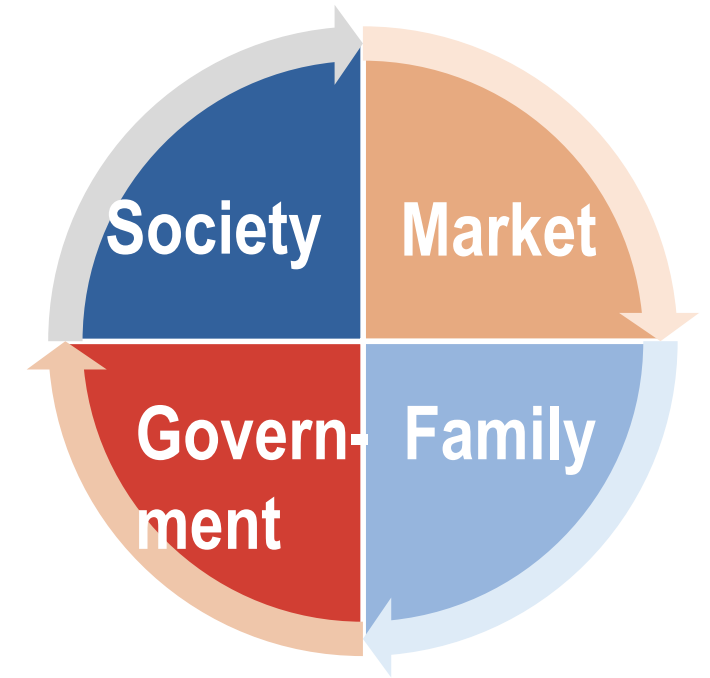
The governments have made great efforts on elderly care, e.g., providing allowance for senior older people, constructing community care facilities, increasing elderly care beds, but the effect is small.

In Beijing, there were 74,710 beds in 2013, and only 41.6% occupied. In 2015, it was **60%**.

Background

3. Great difficulties by disabled older people and their families 失能老人及其家庭普遍面临极大困难

- **The Governments:** vague boundary of responsibilities, hard to work well together with family, society and market
责任边界不清，难以与家庭、社会、市场形成合力
- **The market sector:** explosion of private investments, most targeting on high-end and healthy population, profit-oriented, no insurance for quality and sustainability
社会投资在政策鼓励下一窝蜂地进入养老服务业，相当一部分只关注高端和健康人群，过度趋利而轻视服务质量，长期运营没有保证
- **The medical service sector:** home-based needs are too dispersed to be efficient.
居家服务因需求过于分散、效率低下而难以实施
- **Older people:** inappropriate demand of healthy old people
不当引导造成许多健康老年人“过度”的非基础性服务需求，挤占资源。



Objectives of the research

- **Identify key problems:** the demand of disabled elderly vs. the provision
从失能老人群体需求和供给的分析入手，寻找问题和原因
- **Provide policy suggestions:** how to integrate resources and improve efficiency
如何在现实条件下最大限度地整合各种资源，提高供给效率，解决实际困难？

Our survey and interview to disabled people and families, communities, government officials, and service provider companies, 2017



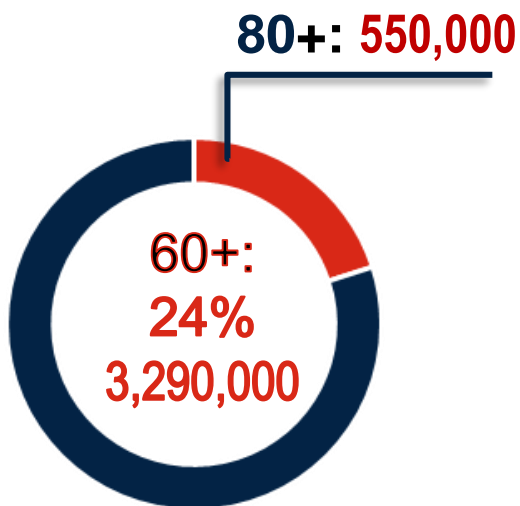


2 北京市失能老年 人口的特征

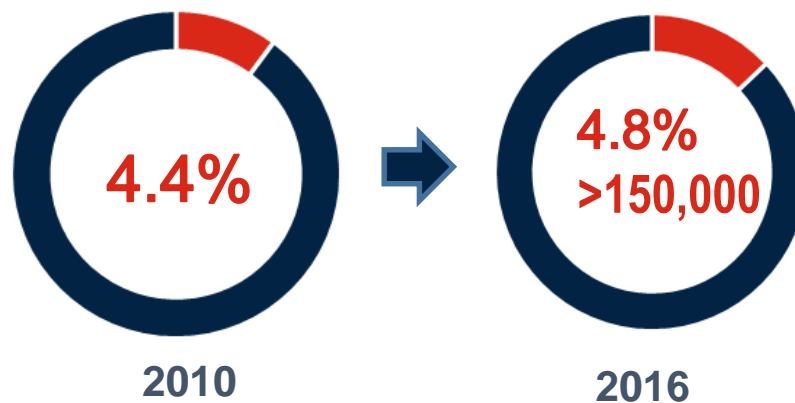
Characteristics of disabled older population in Beijing

1. Rapid growth of disabled older population 加速增长

Disabled elderly population is growing fast. It is inevitable to have more needs for LTC services.
失能老年人口迅速增加，长期照护需求越来越大。



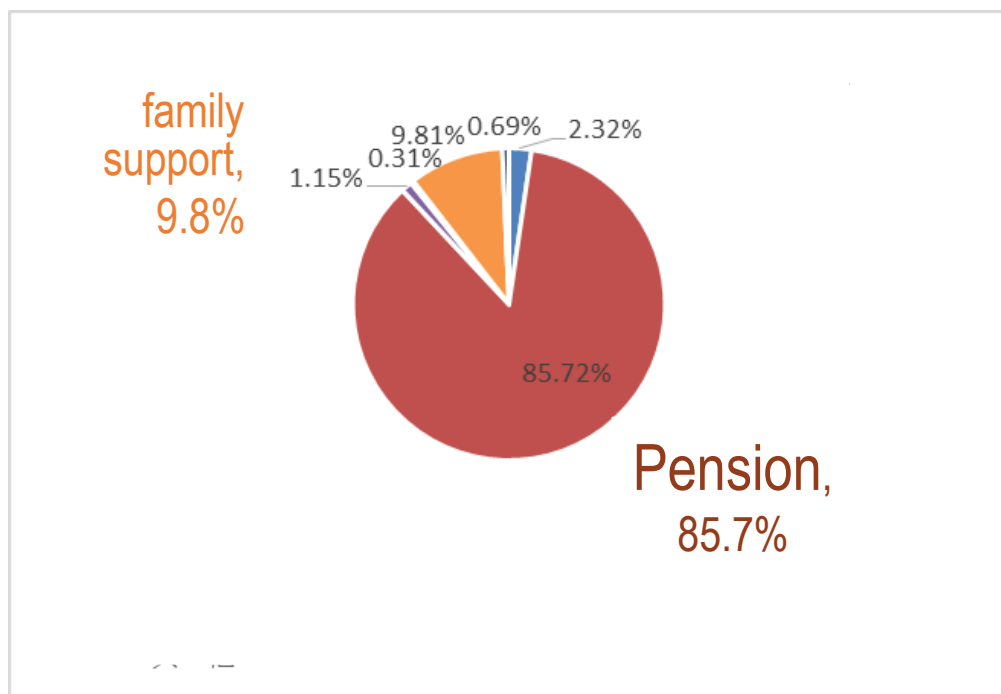
Population structure in 2016
(with local resident ID)



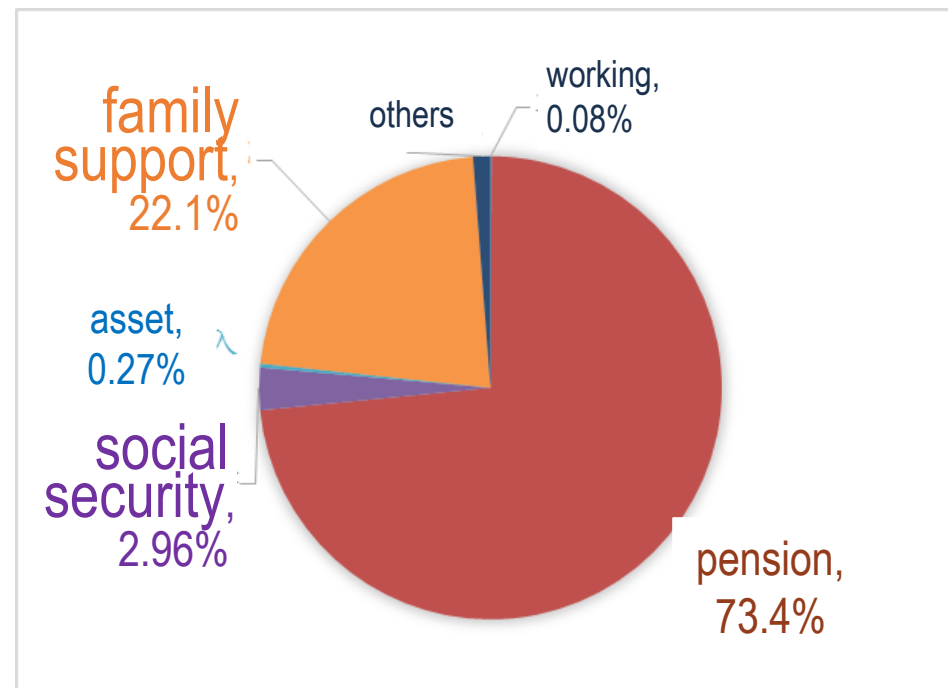
% of disabled in older population

2. Limited income and independency 收入低，独立性差

The economic income and independency of disabled elderly are distinctively lower than that of other groups.



Income structure of older people



Income structure of disabled older people

(Source: 2010 Census)

3. Severe situation of 'empty-nest' 空巢严重

About half of the 60+ population are living in single or 'empty-nest' families.

北京市老年人口中近一半孤寡或生活在纯老人家庭中

9.38% are living alone.

老年人独居比例高达9.38%

Taking average life expectancy of 80, 'empty-nest' living time is over 20 years.

按照人均预期寿命80岁计算，空巢期超过20年

The LTC of 'empty-nest' elderly will soon become a serious social problem if not addressed properly.

如果空巢失能老人的长期照护没有合理解决，必会成为严重社会问题。

4. Shrinkage in space 地域回缩

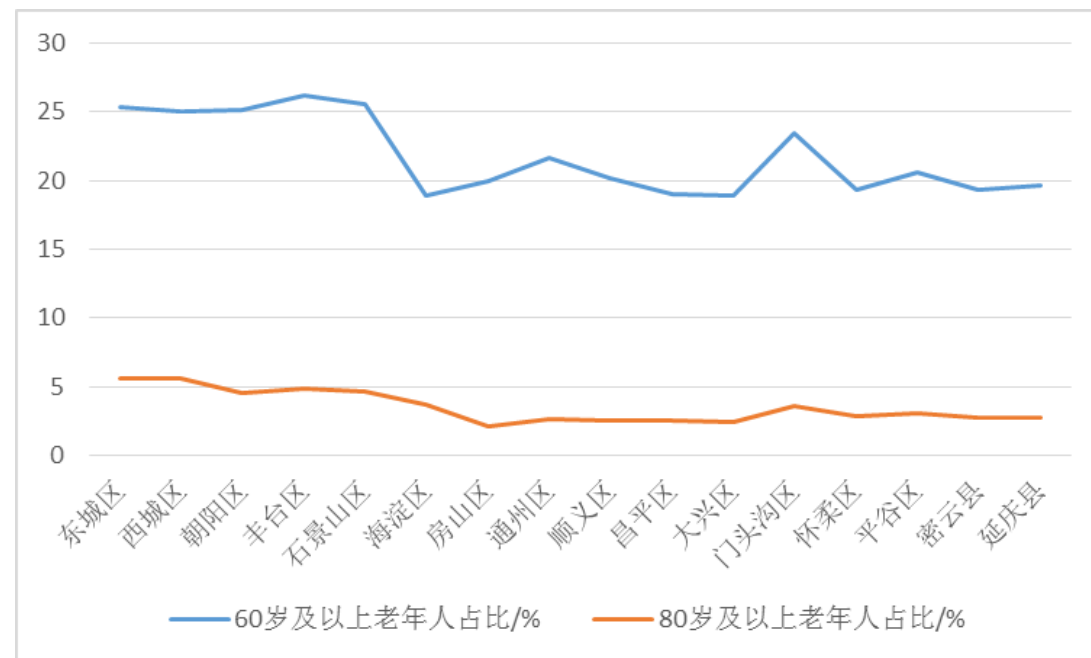
With the degradation of health conditions, the older people are moving back to central areas.

随着健康水平退化，老年人的空间分布呈现“地域回缩”特征。

But there are many **old neighborhoods** and **few space for new facilities**.

中心城区老旧小区比例高，老年服务设施的空间受限，给养老服务的供给增加了困难

- Better transportation, medical services
- Closer to work units
- Better access to social welfare bound to resident ID
- **Stronger attachment to community and neighborhood**



(Source: Report of Beijing Municipal Government, 2014)



3 失能老人社区居家 照护的主要困境

Main difficulties on LTC of disabled elderly

1. Hard to afford the normal cost of LTC service

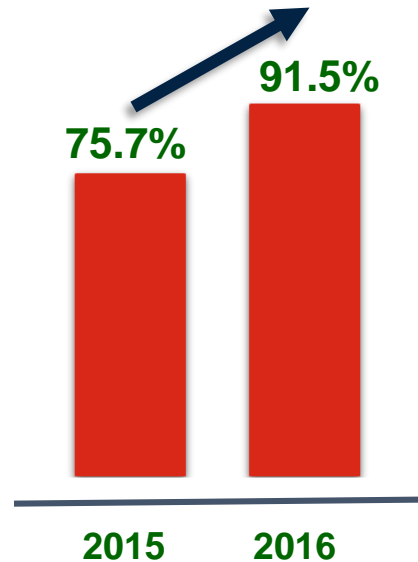
支付能力不足，难以负担正常价格的照护费用

- 67% of older people have pension of 3000-4000 yuan/month, while the normal cost of elderly care facilities is 7000-8000, the market price of household helper is 4000-5000, exclusive of accommodation.
- The affordability of disabled elderly is even worse.
- In a 2016 Survey, 《北京市城乡老年人口状况调查》
Reason for **not choosing institutional care**: 44.2%, can not afford;
Reason for **not having home-based care**: 60.0%, can not afford;
Most worrying issues: **illness**, 74.6%; **lack money**, 50.4%.
- In our survey, most disabled people won't hire household helpers or nursing workers.
绝大多数老人及其家庭照护者不考虑请保姆或护工。

2. Families as the main body of LTC are struggling to sustain

家庭是失能老人照护责任主体，大多勉强支撑困难重重

- Most disabled elderly are cared by families, especially children and spouse.
绝大多数情况下失能老人的家庭（特别是配偶和子女）是长期照护的主力军。
- It brings over-whelming economic burdens, hand shortages and mental stresses.
失能老人的照护在人力成本、经济成本和精神成本方面给家庭带来了很大的困难。



% of disabled elderly cared by family members in Beijing

In our survey, 60% of family members reported economic burden, hand shortage and mental stress.

当问及“照顾生活完全不能自理的老人会给家庭带来哪些困扰时”，回答“家中人手紧张”、“经济骤然紧张”、“精神压力很大”的家庭都在六成以上。

2. Families as the main body of LTC are struggling to sustain

家庭是失能老人照护责任主体，大多勉强支撑困难重重

Case 1: The difficulty of elder spouse 老年配偶的困难

“I also have diabetes, hyper blood pressure and heart disease, have to take medicines and insulin injection everyday... once I was rescued for 40 hours... In the past I could still take him outside for a walk some time, but now I feel not so good, so can't take him outside anymore. He has a temper, letting no others than me to do it . I can hardly go out of home.”

——by an old lady in an empty-nest family, Haidian District, 2017.08.08

Case 2: A parent sobbing out conflicts with children 老人哭诉代际冲突

“There is no filial son before a long illness’. This old idiom is just right. My husband has fallen down for a long time, that my son and his wife are tired of him, and always urged me to send him to a facility. I had made a mistake at the time of their marriage. We shouldn't let them to live together. Now I have to swallow the pain. Without them, we can do whatever by ourselves with the money of the house, but now we are in pain.”

——by an older lady whose spouse is disabled, Haidian District , 2017.08.08

2. Families as the main body of LTC are struggling to sustain

家庭是失能老人照护责任主体，大多勉强支撑困难重重

Case 3: Difficulty of tired children 子女照护的困境

“I am 45, my only brother has passed away. My wife and I have to take care of four old parents. My father is in hospital for already two months, and mother is in another facility.... I really want to take a rest, no longer get up, but what my high-school daughter will be ?...”

——By a cadre in Haidian District, 2017.08.08

Case 4: Feeling worried of household helpers 外面的保姆不放心

“We have changed 4 helpers after her illness. It is surely better to do by myself. You can't trust outsiders. Once I bought a fish. At lunch time I asked the helper, “why don't you cook the fish?” and she said, “I don't like fish.” I was angry because the fish was for the patient, not her.”

——By the husband of a disabled elderly, Daxing District, 2017.01.28

3. **Poor access to professional care service is a common problem**

失能老人普遍面临专业化医疗护理服务难以获取的障碍

Case 5: Difficult to get professional service 专业服务上不了门

“In 2013, an old woman in the community asked for our help because her bedridden husband needed a catheter change. We have a community hospital in around, but doctors were not authorized to go to patients' home for fear of infection and accident... She cried out for anxiety...At last we called an ambulance car to do it. It took 200 yuan to have the ambulance, and just 8 for changing the catheter!”

——by a local community candre in Chaoyang District, 2017.08.31

Case 6: Desire for rehabilitation care 亟需专业康复护理服务

“I simply want they can send someone to my home, and we don't have to go to hospitals for minor conditions. I don't need housekeeping or sweeping. I want to have someone help my mum to sit-up, give her infusions and prescribe some medicines. House helpers don't know this.”

——by a family care-giver in Haidian District , 2017.08.08



4失能老人社区居家照护 政策的主要问题分析

Causes and problems

1. The focus of policy is unclear, leading to mismatch of supply and demand

政策焦点不清降低了政策支持精准性，造成投入需求错位

- Imprecise policy target_政策对象错位

Social security program 基本养老保险服务

- The coverage is too small
- Limited to specific groups (no labor capacity, no job, no children; disabled in lowest-income families or those losing single child), must have local resident ID

General welfare program 一般养老服务

- Broad coverage but beneficiaries are mainly healthy people.

- Biased service content_服务内容偏差

- Input a lot on assisted living services but few on medical care services that are short in market
- The shortage of medical care resource

2016.10 北京市《关于加强老年人分类保障的指导意见》

综合考虑经济状况、生理心理、家庭结构、社会优待、社会身份等因素，依综合困难程度划分政府保障优先顺序，将老年人划分为四类人群：

（一）托底保障群体。具有本市户籍的城市特困人员（“三无”）和农村特困人员（五保供养对象）

（二）困境保障群体。具有本市户籍的低保或低收入等经济困难家庭中失能、孤寡或高龄的老年人

（三）重点保障群体。具有本市户籍的失能、失智、残疾、独居、高龄老年人。

（四）一般保障群体。其他常住老年人。

2. Omission of governments to establish a responsibility-sharing system 政府缺位于多元主体责任分担体系的组织构建

So far elderly people and their families have no other choice. Even though family care for severe disability is seemingly inefficient and often unrealistic.

老年人及其家庭没有选择。

The governments wanted to do everything, instead of building a fair responsibility-sharing system.

政府责任不清，大包大揽。

3. Low efficiency to manage resources in many administrations

管理主体众多，政策资源分散，协调整合效率低下

e.g., many similar or overlapped evaluations are conducted_多重评估，重复浪费

- Health status and demand assessment, for planning, for entry to public facilities, for getting disable allowance...

Case 7: Departmental barriers and poor information sharing_部门壁垒和信息不畅阻碍资源配置

“The computer systems of different departments are separated. I am director of the community committee and I even don't know how many people are exactly living in the community, because everyday there maybe change of resident ID. I don't know when an old person died too. That information is in the police system. We are not connected. Their system is confidential. ”

——by director of community committee in Chaoyang District, 2017.08.31



Policy implications and suggestions

1. Adjust the focus of public policy

调整政策投入重点，实现精准支持

- Policy target: **disabled elderly and their families**
 - standard evaluation system based on health and ability, economic conditions, family assets
统一失能老人需求综合评估分级体系
 - precise match of policy target and policy stratus_政策分层与政策对象精准挂钩
- Policy content: **non-treatment medical care services**
 - Separate LTC services from medical treatment services_长期照护服务从医疗服务中分离
 - Reform the financing and payment system of LTC services to activate slack resources
调整付费机制，激发基层医疗机构活力，活化存量闲置资源，促进专业化照护服务供给
- In long-term, **lower the patient cost of LTC through insurance system with universal-coverage**
结合长期照护保险制度的建设，降低长期照护成本，引导市场需求有效释放。

2. A **single, one-for-all** administration in charge of LTC is necessary.

尽快组建统一的老年健康照护管理机构

Coordinate management, integrate resources

实现统一管理，推动资源整合

In March 2018, Chinese central government issued institutional reform plan. **National Health Commission of PRC**, and its **Division of Elderly Health** were established.

（五）组建国家卫生健康委员会。将国家卫生和计划生育委员会、国务院深化医疗卫生体制改革领导小组办公室、全国老龄工作委员会办公室的职责，工业和信息化部的牵头《烟草控制框架公约》履约工作职责，国家安全生产监督管理总局的职业安全健康监督管理职责整合，组建国家卫生健康委员会，作为国务院组成部门。

保留全国老龄工作委员会，日常工作由国家卫生健康委员会承担。民政部代管的中国老龄协会改由国家卫生健康委员会代管。国家中医药管理局由国家卫生健康委员会管理。



3. Establish **Community Coordinate Center (CCC)** to ensure service delivery 构建老年健康服务的“社区组织中心”

- **Community committee** is most capable to take the role of LTC service coordination. 依托社区居委会组建
Trusted by residents, the hinge between governments, medical and care facilities, work units, social organizations and volunteers.
- Clarify the role of CCC, fully **support by public** 明确职能，给予财政支持
 - **Planning for community services, connect to upper level authorities**
 - **One-to-one coordination service: evaluation of needs, policy navigation, matching resources**
- Include the **Satisfaction of Community** to government performance evaluation
将社区满意度纳入老年健康服务政府绩效评估的内容


Scientific issues to be further studied

需要继续深入研究的问题

- In the social, economic and cultural context of China, **what is the most efficient model to care severely disabled elderly?**
在中国的社会经济和文化背景下，哪种模式对重度失能老人的长期照护最有效？
- How to overcome **geographic barriers in home and community settings?**
如何克服失能老人的居家和社区照护地理制约？
- How to evaluate the **health effect and cost-benefit of CCC?**
怎样评价社区组织中心的健康效果及其投入产出效率？



New NSFC project

- “Geographic Barriers for Disable Elderly to Use Long Term Care services and service coordination in Urban Areas”, funded National Science Foundation of China, 2019-2022.
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THANKS

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