

Long-term Care Systems and the Government Response

Long-term care systems have been the response implemented by some developed countries to respond to the growing demand for long-term support related to the aging of the population.

The long-term support systems are comprised of a series of regulations, institutions, and public policies that make it easier for people with long-term care needs to access quality support services. These systems were built on social security and health institutions within the framework of a consolidated welfare state. This situation is very different from the current context of Latin America and the Caribbean (LAC), where health systems face major challenges and shortcomings, and where social services are, at best, incipient.

Long-term care services seek to support people in situations of dependency in performing basic and instrumental activities of daily life for an extended period of time. To define the target population of these services, most governments with long-term care systems have defined (or adopted) a standardized instrument in the form of a questionnaire that assesses the ability of people to autonomously perform elementary activities. This questionnaire usually includes the basic activities of daily life (ADLs), that is, very elementary activities that include, for example, showering, using the toilet, getting dressed, moving inside the house, and eating. This complements a more complex set of activities known as instrumental activities of daily life (IADLs). The latter include using

means of communication (especially making contact in the event of an emergency), making purchases, preparing food, cleaning the house, doing laundry, using public transportation, being responsible for taking medications, and managing a budget. Usually, a score is calculated from the instrument that indicates whether or not a person is dependent and the severity of the situation. Examples of these type of instruments are the dependent assessment scale (Baremo de valoración de la situación de dependencia) used in Spain, the Indice de Katz adopted by Italy, and the Scale of Iso-resource Groups of Gerontological Autonomy.

In addition to the degree of dependency, governments may consider other eligibility criteria and prioritization of care for some vulnerable groups. These criteria can also be used to define the amount or type of support that people in dependency status can receive.



PANORAMA OF AGING AND LONG-TERM CARE

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