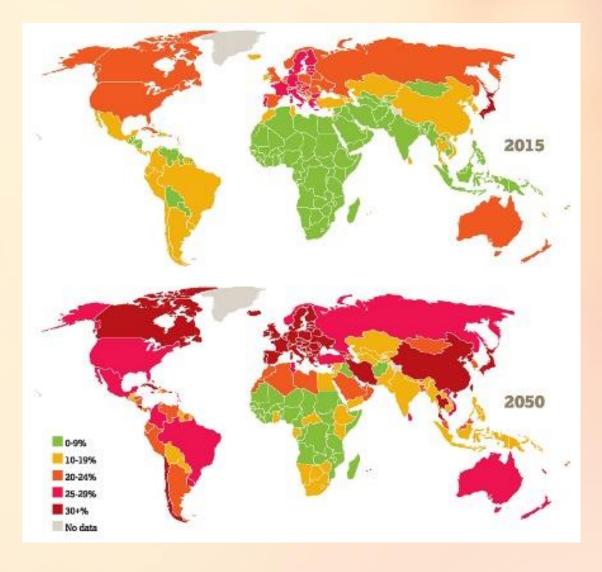
Long Way to Long-term care legislation in Slovenia Jana Mali, PhD, Associate Professor, University of Ljubljana, Faculty of Social Work

Reasons for the emerging of long-term care

- The rapid aging of the population and the simultaneous decrease in the percentage of the young population
- Today: Every tenth person is aged 60 years or older;
- 2050: One in every five people is likely to be 60 years or older



Introduction: reasons for the emerging of longterm care

 A demographic change is described by some as the 'demographic alarm' or the 'aging tsunami'

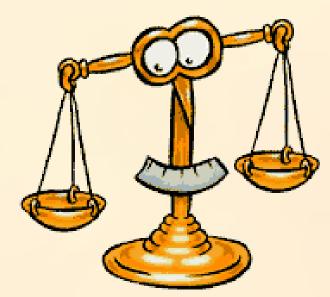


• Increased life expectancy is quite an achievement of our civilization, since this phenomenon has never been experienced in the history of humankind. (Mali, 2013, Lymbery, 2005, Wilson, 2001)



Introduction: reasons for the emerging of longterm care

- Demographic changes
- Number of people with chronic diseases
- Long-term psychological, mental and social distress
- Handicap and various weaknesses has also increased



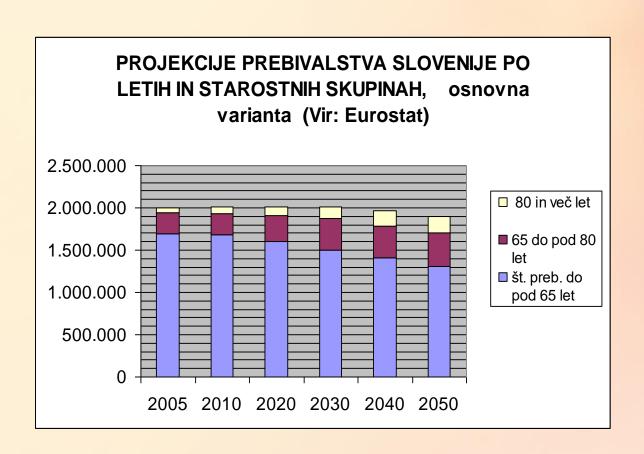
 Number of those who can provide help, i.e. economically active population, has decreased.

Data for Slovenia

On 1 January 2018 Slovenia had a population of 2,066,880 (Republic of Slovenia Statistical Office)

There were 401,262 older persons in Slovenia at the beginning of 2018 (58% of them women), which is 11,000 more than a year before.

By the year 2060 over 65 years old almost 30% of the population



- 1 January 2018 there were 123 old people's homes or special social welfare institutions in the public network with the capacity of almost 19,000 places.
- Instititionalisation of older people: European level around 2/1000, Slovenia 10/1000
- 5% over 65 in institutions. Only 1.7% home assistance in 2017 (the national goal is 3% by 2020).

 https://www.stat.si/StatWeb/en/ /News/Index/7682

Defintion of Long-term Care

The term "long-term care services" refers to the organisation and delivery of a broad range of services and assistance to people who are limited in their ability to function independently on daily basis over an extended period of time, due to mental and/or physical disability. Such services are crucial to many dependent people, most often pertaining to the older age categories.

Typically, care consists of assistance with so-called activities of daily living (ADL), such as eating, bathing, dressing, getting in and out of bed or using the toilet. In addition, these personal care components are often provided in combination with basic medical services, such as help with wound dressing, pain management, medication, health monitoring, prevention, rehabilitation or services of palliative care.

Besides, long-term care services can also be combined with lower-level help relating to so-called "Instrumental Activities of Daily Living" (IADL), such as meals, shopping and housework.

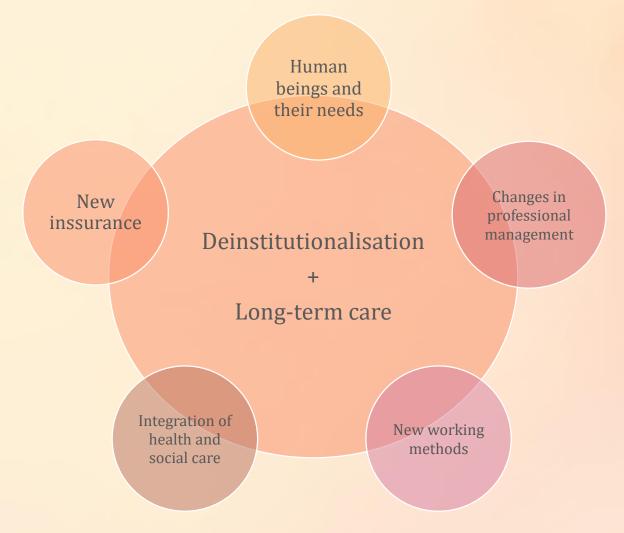
This definition means that long-term care comprises a mix of both: health and social care.

The role of Long-term care in society

- Long-term care will be of vital importance in providing social stability in the future
- Comprehensive systems of long-term care will be essential to meet the needs of older people, reduce inappropriate dependence on acute health services, help families avoid catastrophic care expenditures, and free women to play broader social roles. (World health organization, 2015)
- The contemporary way of life in which we are constantly exposed to various risks (Vickerstaff, 2006; Nies *et al.*, 2013) reminds us that we may, at any given moment, need long-term help provided by other people.

Paradigm shifts in people's care

- The proces s of deinstitutionalization:
- people have the right to live outside of (total) institutions, in the community, among other people,
- people should be able to make decisions independently regarding their own life and method of living. (Flaker, Ramon, 2016)



Paradigm shifts in people's care

New working methods

- Long-term care (LTC) is based on researching users' needs (Naiditch et al., 2013; Leichsenring et al., 2013)
- Searching for new responses that would provide solutions to their distress and problems. (Mali, 2012, 2013)
- Skills and techniques to assess users' wishes, needs, desires

The role of users

- Involve users in decision-making to make them co-creators of solutions.
- Professionals put faith into users, trust their abilities to resolve their problems successfully and trust their competency in assuming responsibility and control over their lives.

Paradigm shifts in people's care

Human beings and their needs

- Strengthening of the social power of users (the role of social work in LTC)
- The shift of attention from individual problems to the search for new possibilities and opportunities in one's life
- To mobilize users' powers (talents, knowledge, capabilities and other resources) so that they can realize their visions and goals

The integration of health and social care/ formal and informal care

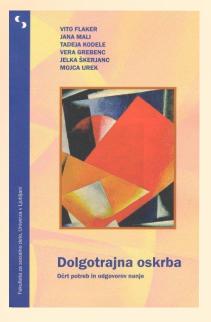
The biggest challange

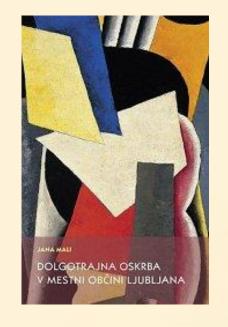
New Inssurance

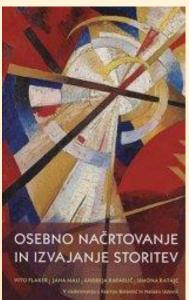
Public/private

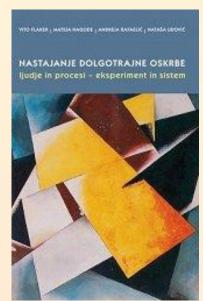


2008 - 2013









Tetralogy of writings on long-term care

2018: Innovations in long-term care: the case of old people's homes

Pilot projects on LTC in Slovenia (2017 – 2019)

Help based on researching people's needs

Index of needs (Flaker et al., 2008)

- 1. Institutionalization
- 2. Work and money
- 3. Housing
- 4. Everyday life
- 5. Human contacts
- 6. Discomfort in interactions
- 7. Institutional career
- 8. Disembeddedness and affiliation

- Analysis of interviews and personal care plans
- People with long-term mental health distress, dementia, and people with learning and physical disabilities, and women who have experienced violence
- Cultural dimenstion of LTC (Mali, 2017)

Institutionalization

- Institutionalization is seen as a resolution for unbearable and impassable life drama (Flaker et al., 2008; Österle, 2011).
- People living in their home environment may receive the same help or professional treatment that is usually provided in an institution
- Private care workers, who are usually migrant women, have taken over to cover the needs for longterm care at sustainable costs (Bednarik, 2013)

Housing

- Fundamental function of providing shelter against weather conditions; social meanings:a place for socializing with friends, having a family, keeping provisions and other things; privacy.
- Permanent residence: fundamental bureaucratic bases of our identity
- Migrants who have lived and worked up to the time of retirement in host states may experience distress when they retire because they need to decide where to spend their old age and where to receive long-term care: whether it be in the host country where they live as migrants or in their home country, or between both.

Work and money

- In contemporary society, work is inextricably linked with the need for material provision
- In everyday life, work gives us the opportunity to structure our life.
- People involved in long-term care also need to learn about the importance of work in the life of people with long-term distress
- Older people who need outside help often employ migrant care workers (i.e. Italy)

Everyday life

- Routines creating our reality (associated with rhythm of time and tasks taking place throughout the day);
- Routines that involve taking care of ourselves (household chores, personal hygiene, maintaining order in our place, errands intended to preserve our identity)
- Routines in our free-time (recreation, socializing, hobbies)
- Migrant care workers have to deal with all kinds of tasks in the household, they need knowledge and training, but the majority of EU countries do not place any importance on this fact

Discomfort in interactions

- Interactional offences (Goffman, 1963; Scheff, 1966)
- Contrary to us, people who need long-term care experience these offences more often, and in the context of long-term care, those who commit them are not keen to correct them
- Due to the differences in cultures among long-term care providers and its recipients new situations may emerge characterized by a greater number of interactional offences.

Human Contact

- Human contact somehow defines us, enables us to know what we are, what our identity and value are and gives us the opportunity to create the world around us
- For people who need long-term care, human contact is extremely important, since they can get help and support from those they are in contact with.
- The experiences of migrants who provide long-term care show that older people are a source of human contact for them as well as a way to enlarge their own social network

Institutional career

- The institution, of course, leaves a mark on the life of an individual through multiple situations and events, commonly called their *institutional career*.
- The gap between the expectations of staff and expectations of users is quite large.
- Care work includes both "caring about" and "caring for", which implies both "hands on" bodily and emotional work. (lecovich, 2016: 151)
- Migrants care providers are more willing to do hard and shift work than local workers; are highly qualified, reliable, polite, respectful, and compassionate to older people; and provide good quality of care, despite the low wage and low status

Disembeddedness and affiliation

- Disembeddedness means that on the one hand we need other people and need to depend on them, but on the other, we may feel the need to be autonomous and independent of others
- In long-term care, we may therefore plan responses, working methods, services and means for this need
- Relationships among migrant care workers, older people cared for and family carers may be very problematic, due to cultural and linguistic aspects, and in this context both migrant care workers and the older people they care for may be involved in reciprocally abusive situations

Conclusion: Long-term care as callange or mission imposible?

- Political decision (http://www.oecd.org/els/health-systems/long-term-care.htm)
- Proffessional development
- User's needs
- Need for society