

Social protection of informal carers

Values of long-term care

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Introduction: main objectives, key-issues addressed, status

- *Main objectives:*
 - to increase health and social protection of informal carers (ca 60,000 registered)
 - to share responsibilities between state and self-government
- *Key issues addressed:*
 - new ethics of long-term care concept
 - informal care friendly legislation
- *Rolled out legislation - Poorly implemented practice*

Why was this project developed/implemented?

- Informal carers – main source of intensive care
- Out of labour market
- Lack of comprehensive approach to health and social rights
- Only state responsibility

Main features of the example (description)

- Tradition of health insurance of informal carers (state responsibility)
- 2001 – care allowance scheme (state responsibility)
- 2006 – partial social insurance of informal carers (state responsibility)
- 2009 – respite care (local government responsibility)

What are/were the effects?

- *Friendly legislation – poor implementation*
- Keeping informal carers out of the regular labour market
- Poor awareness about new provisions (respite care)
- Traditional family values – limitation for higher usage (respite care)
- No systematic survey (short implementation period)

Strengths and limitations

- *Strengths:*
 - Acknowledgement of informal care by statutory authorities
 - Based on national legislation (equal access for all)
 - Solutions for critical situations
- *Limitations:*
 - Lack of resources
 - Limited state social insurance
 - Some social risks not still covered
 - No employment protection
 - Administrative burdens
 - Poor legal awareness

Conclusions

- For practice:
 - *people before administrative and legal system*
- For policy-makers:
 - *no measures before conditions*
- For research:
 - *semi/longitudinal and interdisciplinary approach*