



Attitudes, experiences and expectations on long-term care in Austria

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Key Findings

- Informal caregiving and a perceived responsibility of families to provide care remain very common, despite strong preferences for an increased role of the state in care provision and financing
- Many Austrians (especially middle aged) have low trust that the care system will be able to respond to their preferences for future care, as limited availability and high costs are identified as key barriers in access
- Gender, age, socio-economic and rural/urban gaps in expectations, experiences and barriers to care highlight the need to increase social protection and address persistent inequalities

BACKGROUND

Described as a familialistic care regime, the Austrian long-term care system emphasizes and supports the role of families as main providers of care. Whereas cash benefits to those who need support and to their carers, as well as leave schemes, are generous in European comparison, direct investment in the development of care services remains undersized with respect to demand. As a result, the vast majority of care in Austria is provided by informal caregivers, be they family members or hired in-home and 24-hour carers. In contrast with all other branches of social protection which are organized under a social insurance scheme, long-term care is tax funded and characterized by a fragmented and complex governance structure and large regional variability in eligibility, quality and costs of care.

The results reported in this factsheet are based on unweighted data consisting of 404 responses from Austria and 2314 responses from across EU-27 countries, collected through an online survey between September 2021 and February 2022. This convenience sample shows over representation of older age groups (1/3) and adults aged 30 to 59, with respect to their population proportions. Gender representation is skewed strongly towards women which account for 75% of respondents, while 52% report higher educational achievement. The Austrian sample is well matched with the general population for degree of urbanization, with 41% living in rural areas and 36% living in large cities.



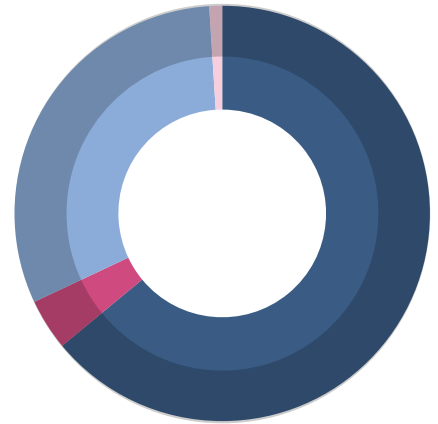
EXPERIENCES WITH CARE

A majority of Austrian respondents have had personal experiences with care, with **women more likely to report that they or someone close to them needed care** (66% as compared to 59% for men). Similarly, more residents in urban areas report experiences with care (68%) as compared to those living in rural areas.

Of those who have had experiences with care, 63% consider the appropriate help was available, while **one third report that the person in need of care only partly received needed help (32%) or did not receive it at all (4%)**. Women are more likely to report that the appropriate care was only partially or not at all provided for their loved ones (38%) as compared to men (28%).

Was the appropriate help and care given to the person in need?

■ Yes, totally ■ Yes, partly ■ No ■ Other

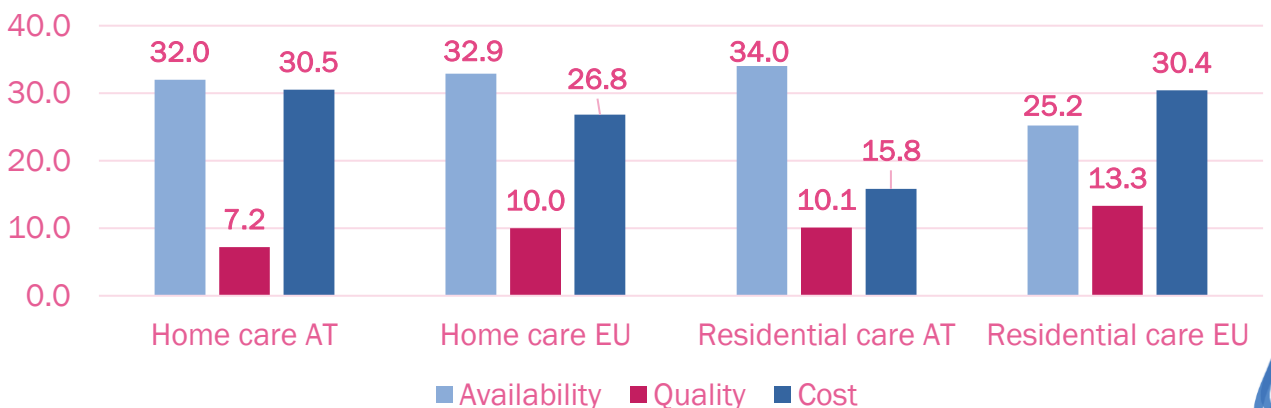


BARRIERS TO ACCESSING CARE SYSTEMS

Important barriers to accessing care services remain a concern for many Austrians. Availability barriers are most pronounced in small and middle size towns for residential care (1 in 2 respondents) and in rural areas for home-based care (1 in 3). People with lower income report higher difficulties in accessing care due to costs (37.5% in comparison with under 30% for those who make ends meet easily), highlighting the need to increase financial protection for long-term care.

Availability of residential care is a much more pronounced issue in Austria with respect to the EU average, whereas quality of both home-based care and residential care is more favourably assessed in Austria. Austria also diverges strongly from the European average with respect to the cost of residential care – only 16% of respondents identify costs as a barrier, in comparison with 30% in the EU as a whole.

Share of respondents reporting barriers to accessing care services (in %)



INFORMAL CAREGIVING

Reflecting the familialistic approach to care in Austria, over half of respondents provided informal caregiving, with a pronounced gender gap (59% of women and 48% of men). **Older people themselves are most likely to be informal caregivers (64%),** followed by adults aged 30 to 59 (53%).

The impact of informal caregiving is more strongly felt by Austrian women. 22% of women report having to reduce working time or give up their jobs completely due to care responsibilities, as compared to 3% of male respondents. Similarly, one in two Austrian women reports feeling obligated to provide care despite a negative effect on their health and wellbeing, vis-à-vis 28% of men. Austria compares positively with the EU average, where 32% of women and 15% of men had to reduce work or give up their jobs to provide care, and 2 in 3 women and 1 in 2 men felt obligated to provide care.

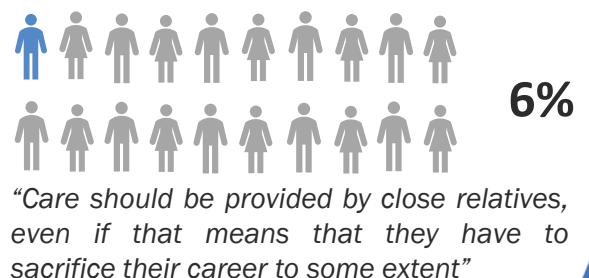
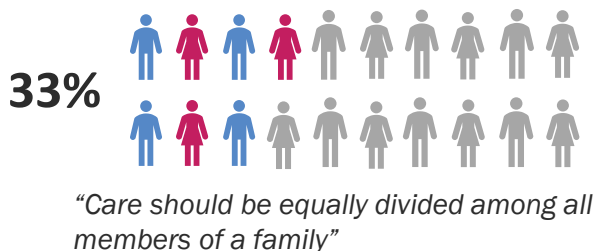
Obligations to provide care despite detrimental effects on health and wellbeing are also more strongly felt by respondents living in rural areas (51% in Austria and 65% at EU level) as compared to those living in urban environments.

Share of respondents who perceive pressure to provide informal care (by gender, in %)



While the impact of caregiving and the perceived obligation to provide care remain high, **the vast majority of respondents express a clear preference for a care model that places less pressures on families.** Very few respondents agree that care should be provided by close relatives, even if it means sacrificing their health and well-being (4%) or sacrificing their career to some extent (6%).

Share of respondents who agree with the statements ...



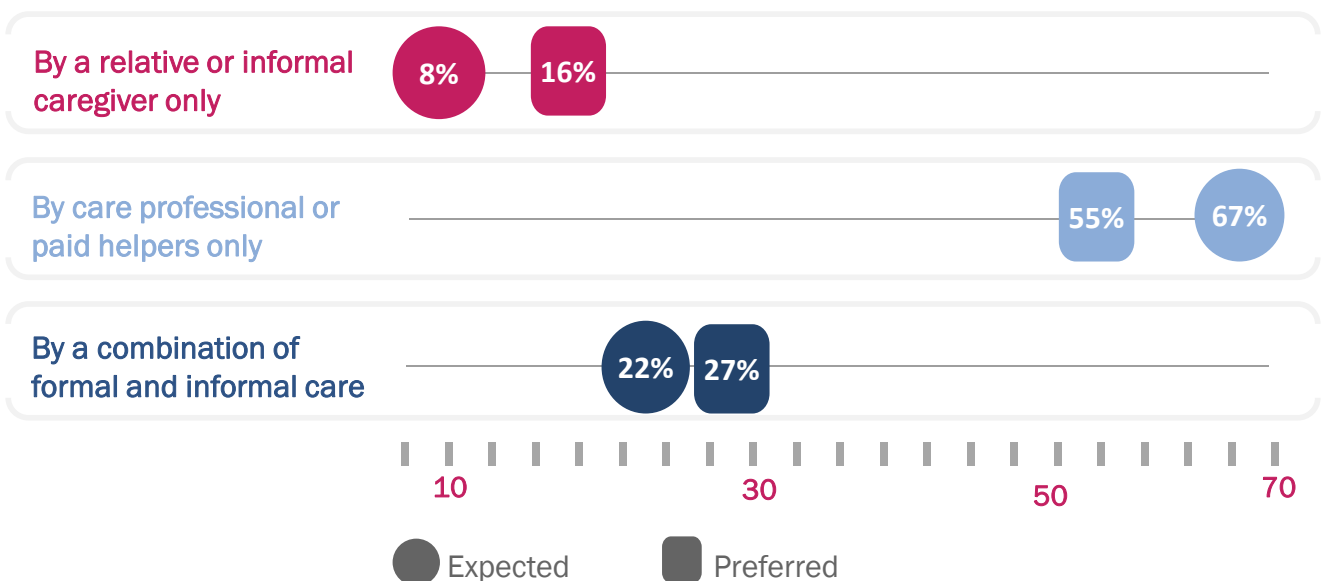
PREFERENCES & EXPECTATIONS OF LONG-TERM CARE

One third of Austrians report low trust in the ability of the long-term care system to respond to their care needs, should such arise in the future. Overall, 33% believe they are unlikely to receive appropriate help when needed, with a significantly higher level of mistrust among women (38%) as compared to men (21.5%). The lowest levels of trust in the responsiveness of the care system are recorded among the 30 to 59 years old age group (45%) while only 16% of those aged 60 and above have low trust levels. The marked age gap is likely indicative of changes in care preferences across generations, as well as of a low level of trust in the ability of the long-term care system to respond in a sustainable manner to demographic and socio-economic trends.

Men express much stronger preferences for receiving care in their own homes from a relative (26%) than women (under 10%) and generally from an informal carer only, while women are more likely to report preferring to receive a combination of informal and formal care. Only a small minority of Austrians would prefer to rely exclusively on informal support in case they need care (8%), although the proportion increases with age. A similar share of preferences for informal care was registered by the 2007 Special Eurobarometer on health and long-term care, further suggesting preferences change with age rather than between successive cohorts.

There is a large gap between expectations and preferences for care arrangements in Austria, which points to the concern of respondents with respect to the future availability of informal care. A higher share of Austrians would prefer to be cared for by informal caregivers only, than the proportion who expect such care will be available to them in case of need (reflected in an 8 percentage points gap between preferences and expectations). Conversely, a higher share of respondents expect they will have to rely on formal care alone, although they would prefer a mixed care arrangement (both formal and informal care concomitantly) or informal care alone (12 percentage points gap between expectations and preferences).

Preferred and expected care arrangements (share of respondents, in %)



ATTITUDES TOWARDS CARE PROVISION

One in two respondents identify their preferred care option as public or private service providers visiting their home and providing help and care. While only 16% would choose a residential care facility, the proportion is higher among men (23%). Men also have higher preferences for being cared for by their children, as are respondents from rural areas (22% as compared to 12% in large cities).

There is **very strong support in Austria for increasing the recognition of and financial support for informal caregivers**. 9 in 10 respondents agree that the state should pay an income to those who have to give up work or reduce working time to care for an older person and that providing care for a family member should be recognized as work and bring the same benefits as formal employment.

One third of Austrians believe that caregiving roles are more natural for women than for men, with a higher rate among men. This reveals a **slightly higher prevalence of gendered attitudes towards care roles in comparison with the EU average**, at 30%.

Share of respondents who agree that “Caregiving roles are more natural for women than for men”



FINANCING LONG-TERM CARE

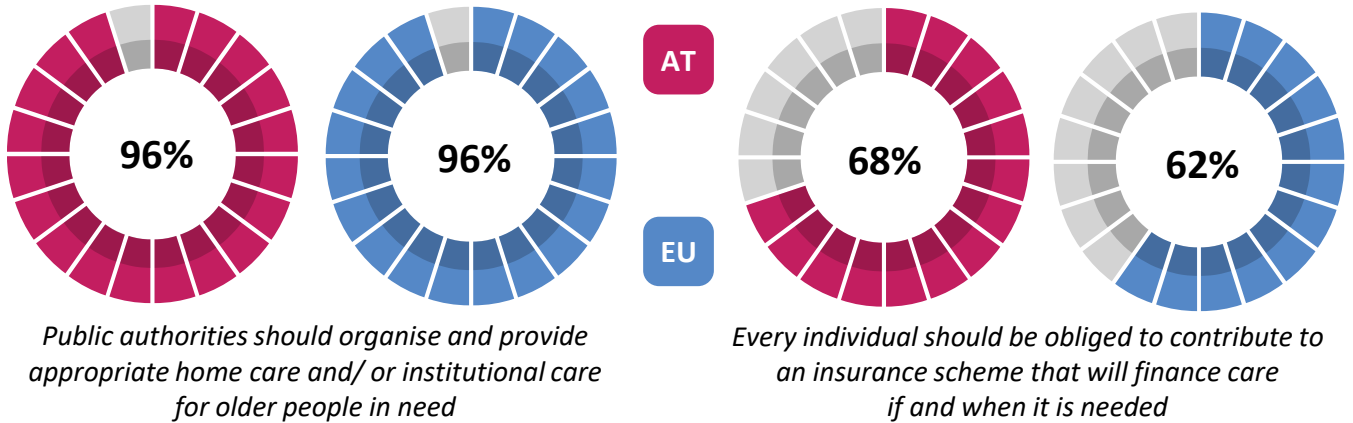
The vast majority of Austrian respondents (88%) do not believe financial responsibility for care costs should be placed on adult children, if their parents' income is insufficient to cover the costs of care in their entirety. Rather, there is **very strong agreement (96%) that public authorities should organize and provide the appropriate care for older people with care needs**, in line with the EU average. Although Austria's long-term care system is financed through general taxation, close to two thirds of respondents would prefer everyone contributes to a social insurance scheme that would finance care if and when needed (62%).

Many Austrians also believe that the state should either cover all costs or the basic costs for both home-based and residential care (45%), slightly lower than the EU average (53% for home-based and 51% for residential care). While there is no gender difference in preference for cost coverage for residential care, fewer women than men agree with the public coverage of costs for home-based care (41% vs. 51%).



In line with European trends, **younger Austrians (18-29 years old) are most likely to think the state should cover care costs in all care settings**, while lower shares of middle-aged and older individuals would prefer a system that places financial responsibility for care primarily on the State.

Share of respondents who agree with the statements ...



DISCUSSION

Limited access to care remains a reality for a significant share of Austrians, as availability and cost barriers continue to affect all, but disproportionately so lower income groups and rural residents. The consequent over-reliance on informal support is affecting the health, well-being and economic opportunities of numerous Austrian caregivers, particularly women. While often feeling constrained to provide care, Austrians overwhelmingly report preferences for enhancing formal care provision in the community, a stronger role for the State in the provision and financing of care, and the expansion of social protection for long-term care. A failure to respond to these preferences has already led to low levels of confidence in the ability of the long-term care system to appropriately address future care needs and is liable to continue undermining public trust unless urgently addressed.

Considering the on-going reform of the Austrian long-term care system, with planning for more comprehensive changes underway, it is essential public preferences are better reflected in the measures considered for implementation. While efforts to increase provision of care services in under-served areas and an increased focus on prevention of dependency are laudable, much more needs to be done to relieve the pressure on informal caregivers and ensure capacity is expanded both in community and residential care settings. Similarly, as system governance and a new fiscal framework are negotiated to the horizon of 2024, it is crucial decision-makers reflect on the strong expressed preferences of Austrians to increase available resources for care, strengthen financial protection, prioritise equity achievements and transition towards a social insurance financing model.



COMMUNITY VOICES



"I fear that we are heading for a long-term care emergency in Austria. But unfortunately, nothing is happening [...] The demographic developments do not come as a surprise. The number of people reaching very old age (and thus with higher care needs) can be estimated fairly accurately for the next 30 years." - Man, 65 [excerpt, translated]

"It is important to increase the prestige and financial value of care at home! Explore even more possibilities for care in old age... (shared housing, generation parks and others)" – Woman, 41 [translated]

"Children and partners should never be forced to take care of their relatives. Everyone wants to be able to live their life the way they want." - Woman, 67 [excerpt, translated]

"There are now already too few caregivers and nothing is done about it! How will that be in 10 years?!" – No ender specified, 68 [translated]

"I care for my husband after a stroke and brain hemorrhage, which means he needs me around the clock. I would like to have paid time off, one week once a year, and my husband is well taken care of. After all, by taking care of him, I save the state a lot of money!" – Woman, 72 [excerpt, translated]



The InCARE survey on attitudes, experiences and expectations on long-term care was carried out with the support of funding from the European Commission's EaSI Programme (VS/2020/0258) and a network of project collaborators throughout Europe (from September 2021 to February 2022).

It contributes to the evidence-base building activities of the **InCARE project**, which aims to design a coordinated approach to developing long-term care policy and services through socially innovative and participatory decision-making processes. We work with care users, care providers and policy-makers in Spain, Austria and North Macedonia to design, implement and scale-up socially innovative care services.

For updates on our progress and publications please visit <https://incare.euro.centre.org/> or subscribe to our newsletter [here](#) or by sending an email to cc@eurocarers.org.

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