

# Rural Ageing and Social Care

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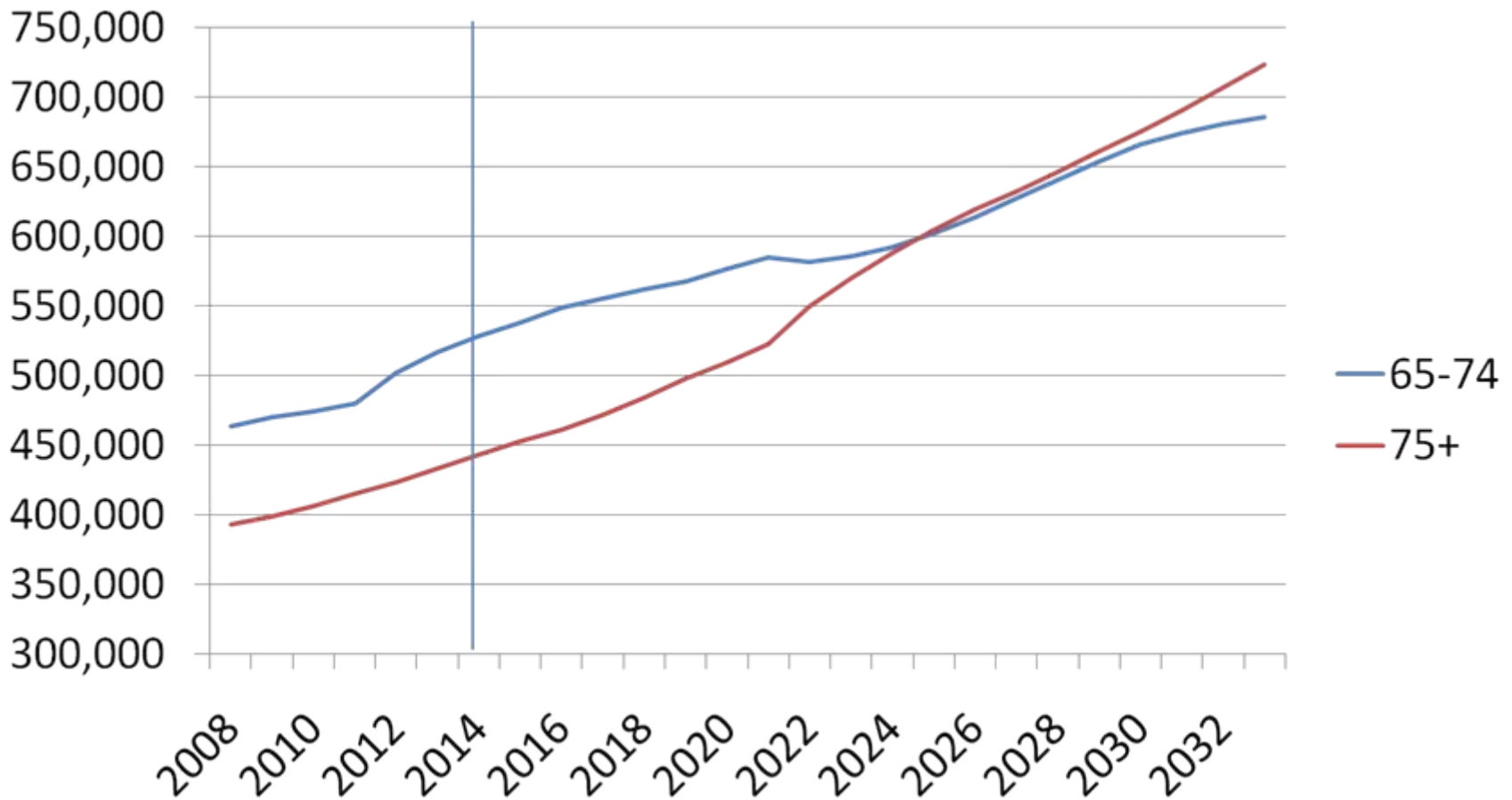
# Plan

- Future Demand for Care in Rural Scotland
  - Population change
  - Healthy Life Expectancy
- Supply of Care
- Future Directions

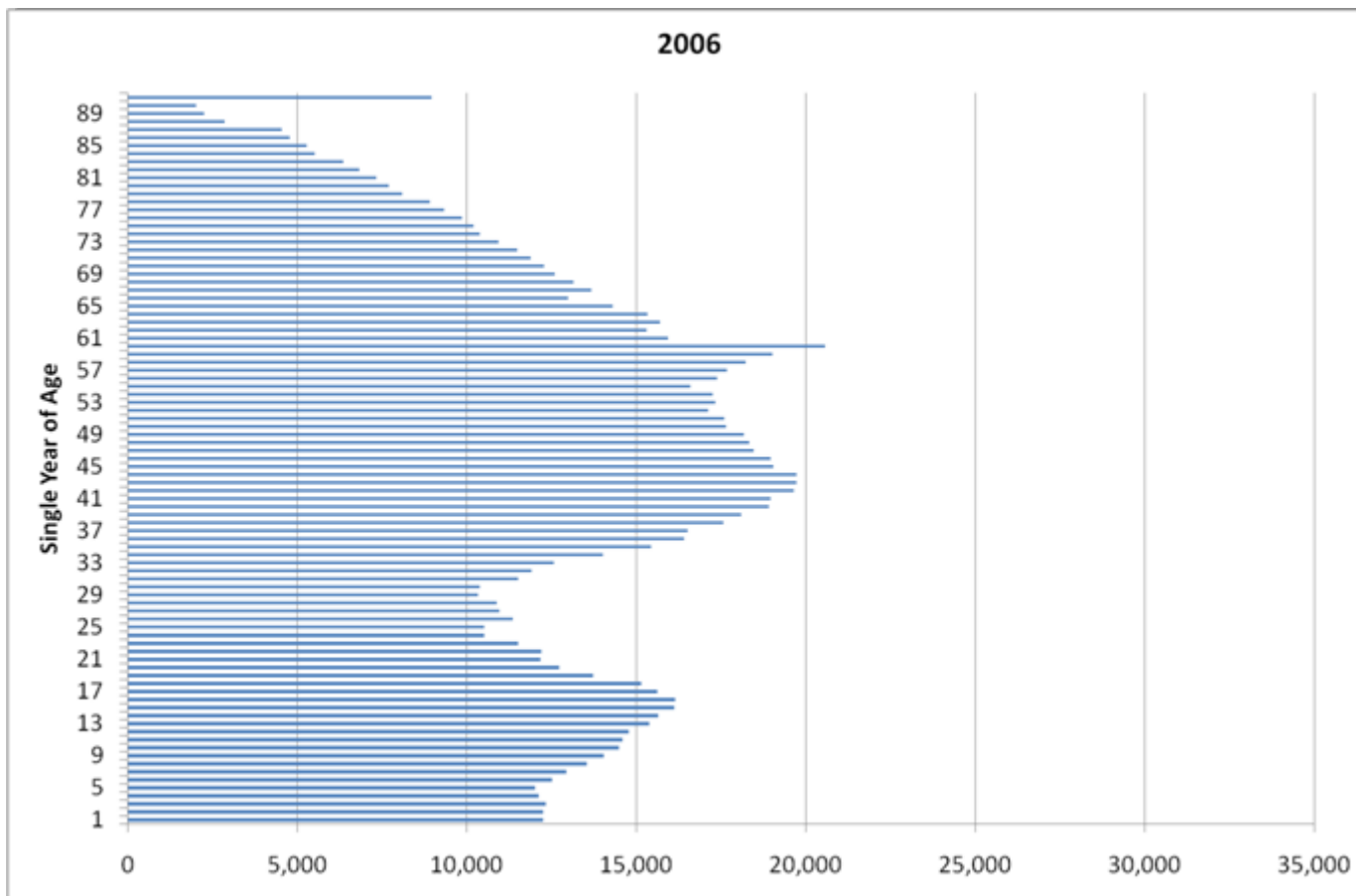
# Rural Scotland

- Aberdeenshire
- Angus
- Argyll & Bute
- Dumfries & Galloway
- Eilean Siar
- Highland
- Moray
- Orkney Islands
- Perth & Kinross
- Scottish Borders
- Shetland Islands

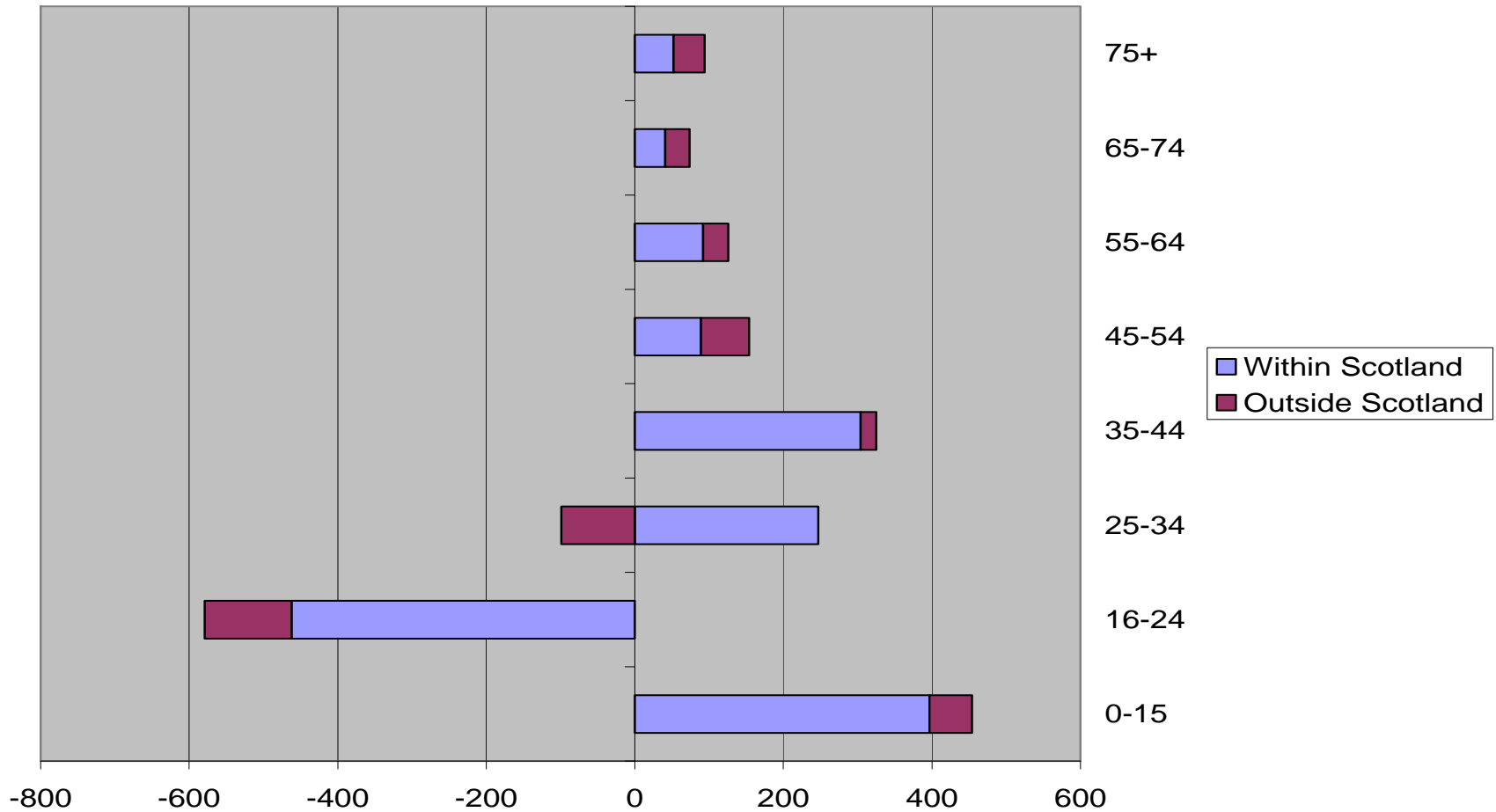
# Increase in the “Oldest” Old



# Population Pyramid for Rural Scotland 2006, 2014, 2031

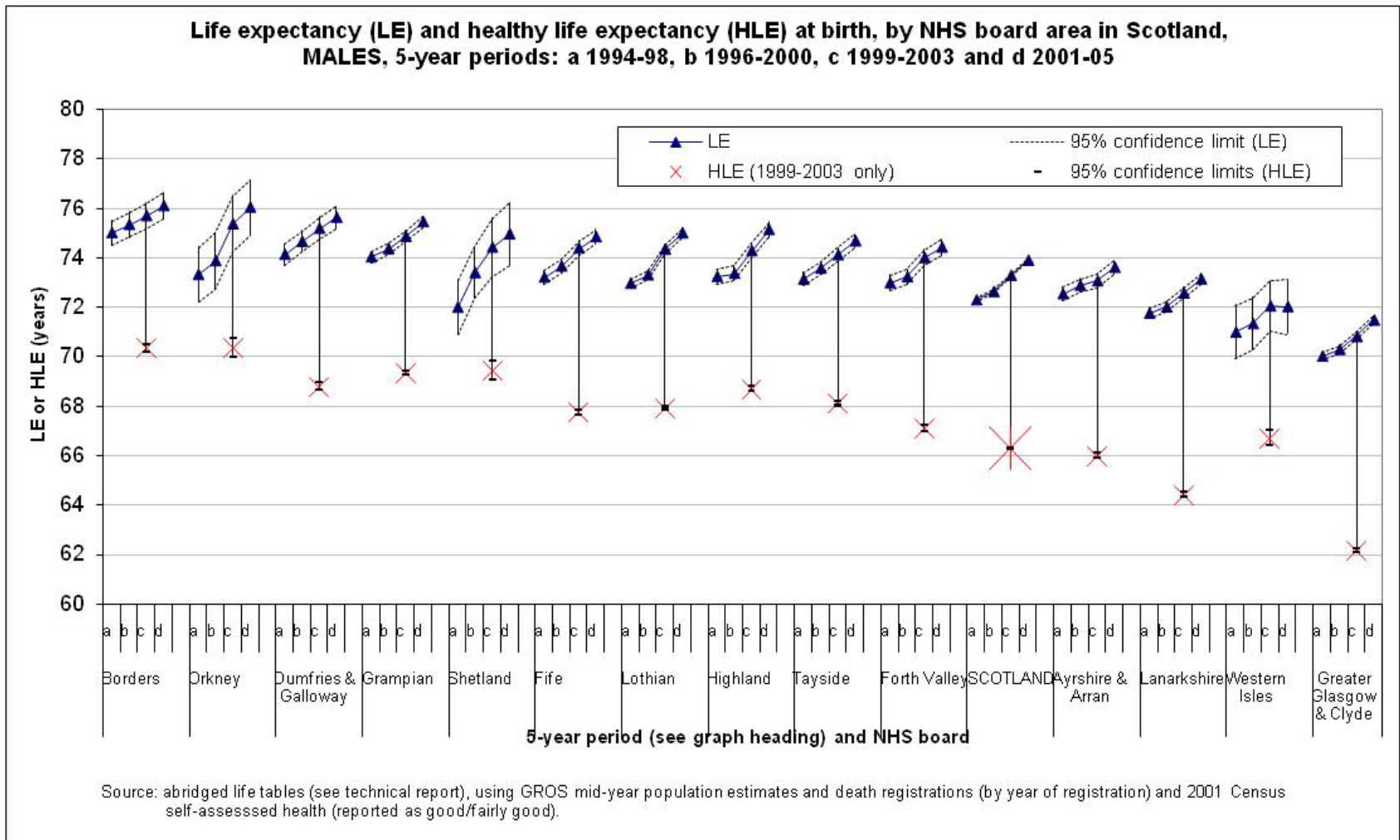


# Net Migration in Rural Scotland



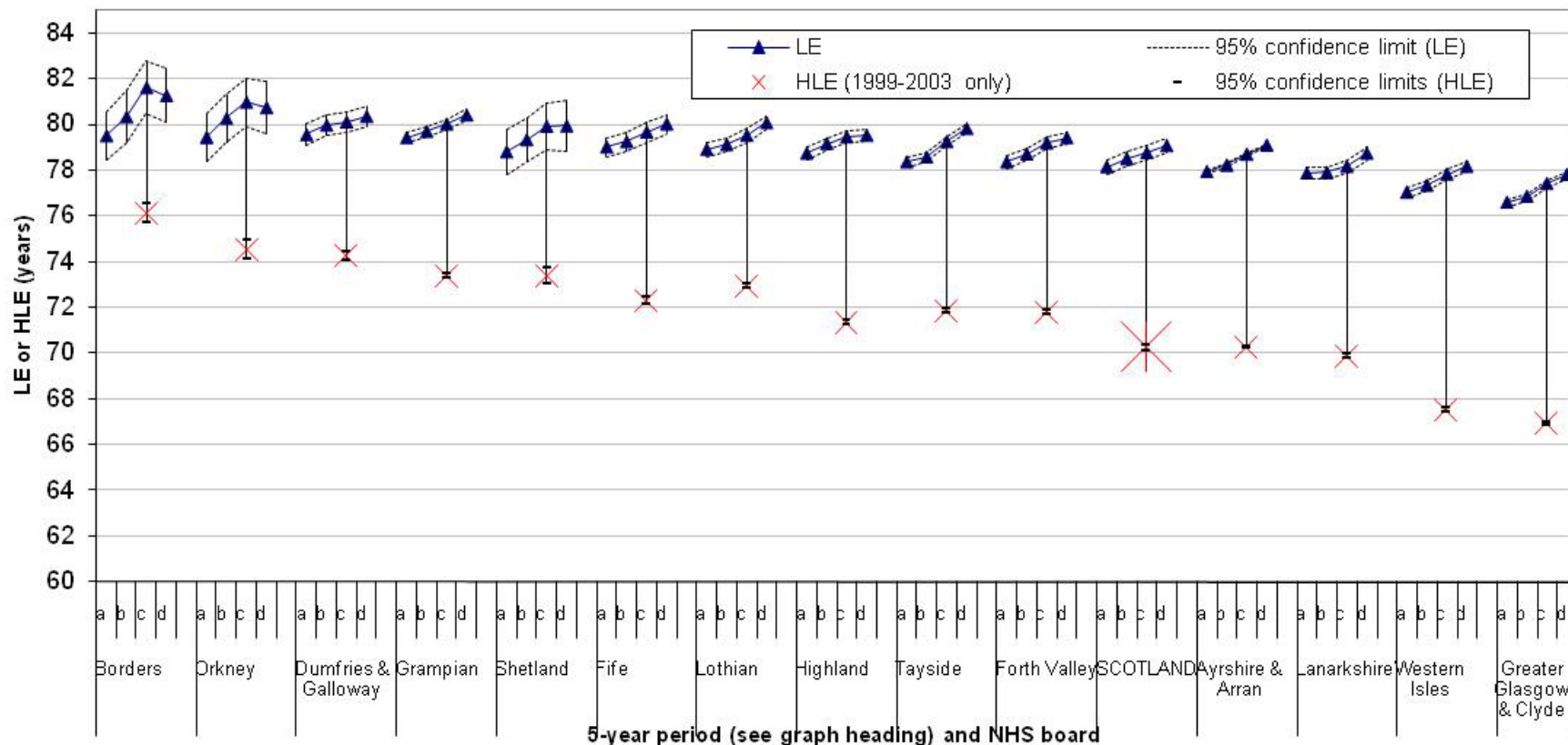
Source: 2001 Census

# Better Health in Rural Areas? Males



# Better Health in Rural Areas? Females

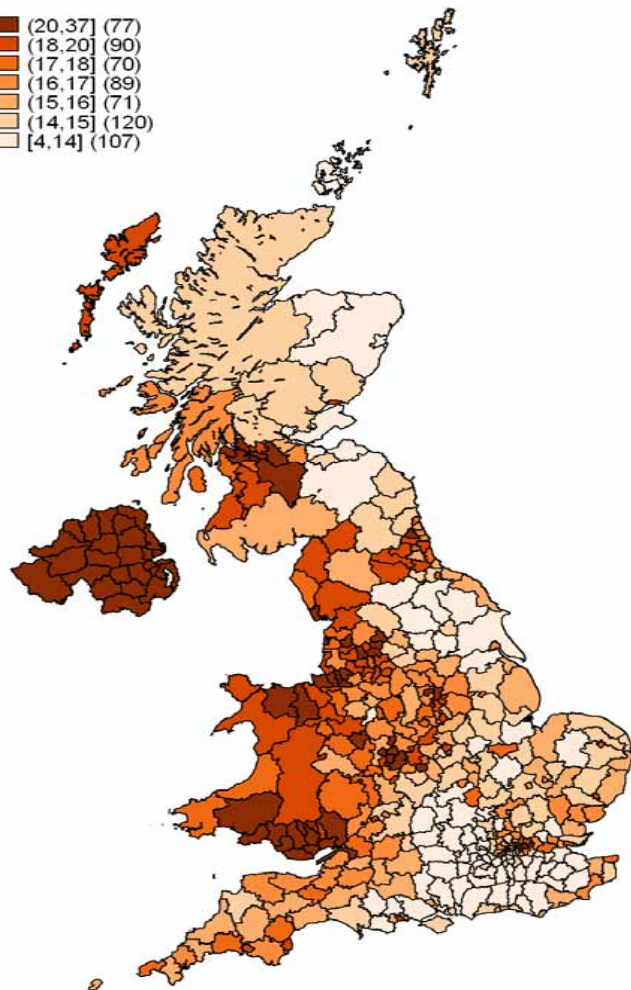
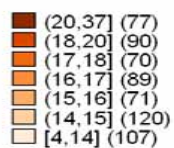
**Life expectancy (LE) and healthy life expectancy (HLE) at birth, by NHS board area in Scotland, FEMALES, 5-year periods: a 1994-98, b 1996-2000, c 1999-2003 and d 2001-05**



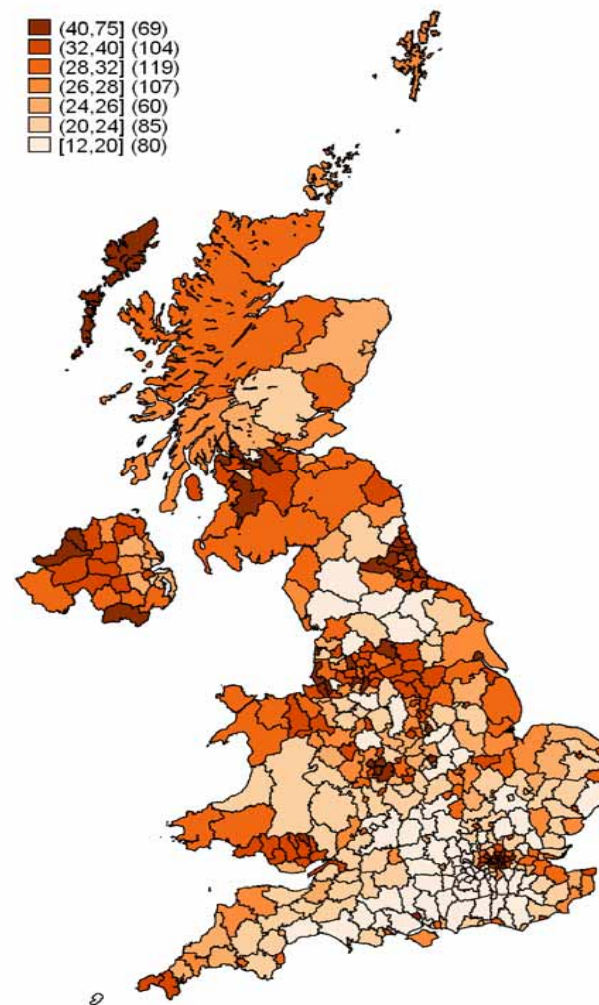
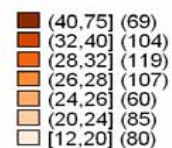
Source: abridged life tables (see technical report), using GROS mid-year population estimates and death registrations (by year of registration) and 2001 Census self-assessed health (reported as good/fairly good).

# Disability and Poverty Among Older People

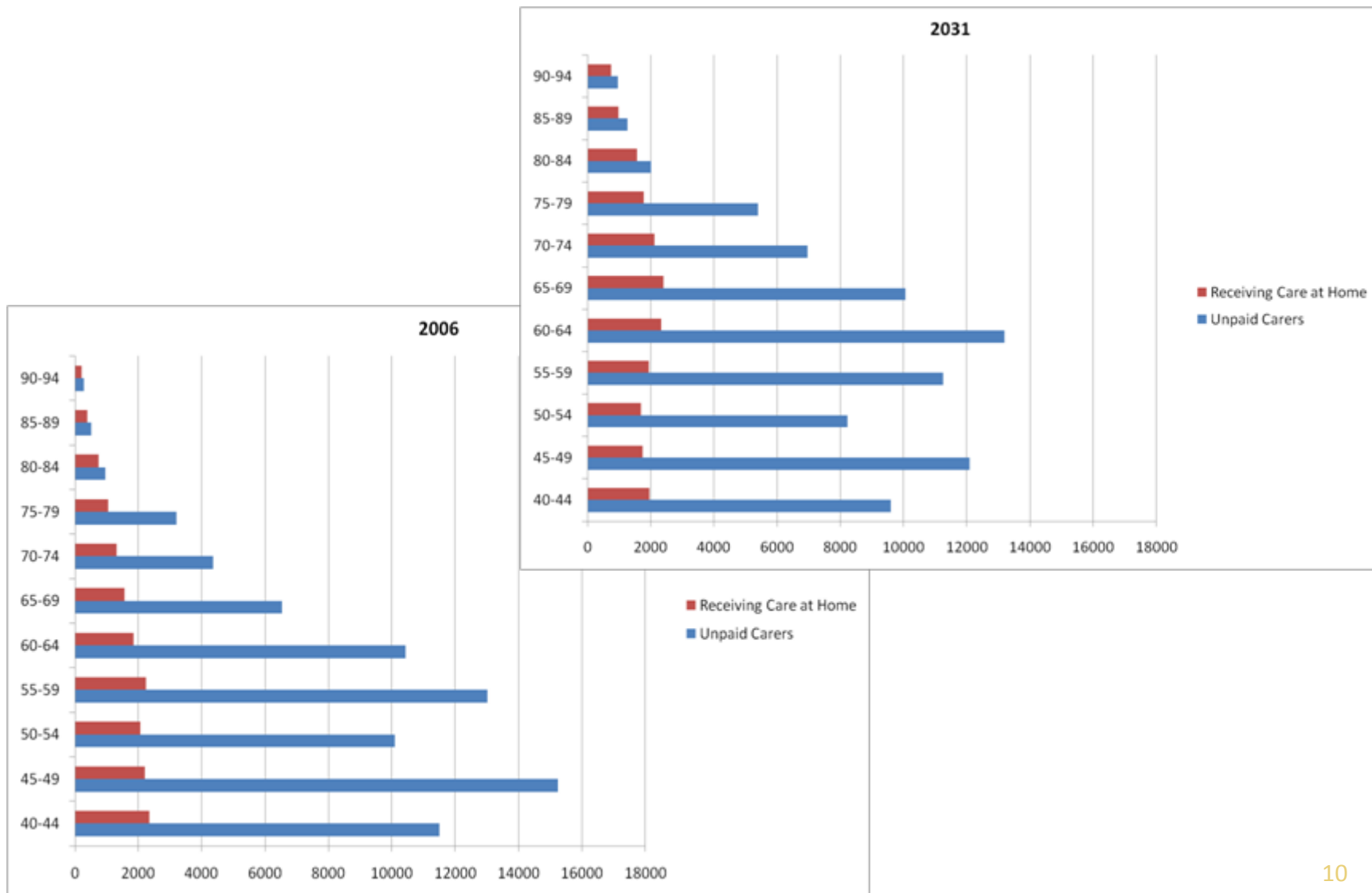
Percent of those 65+ receiving Attendance Allowance  
by UK Local Authority  
November 2008



Percent of Pensioners receiving Pension Credit  
by UK Local Authority  
November 2008



# Balance of Care in Rural Scotland

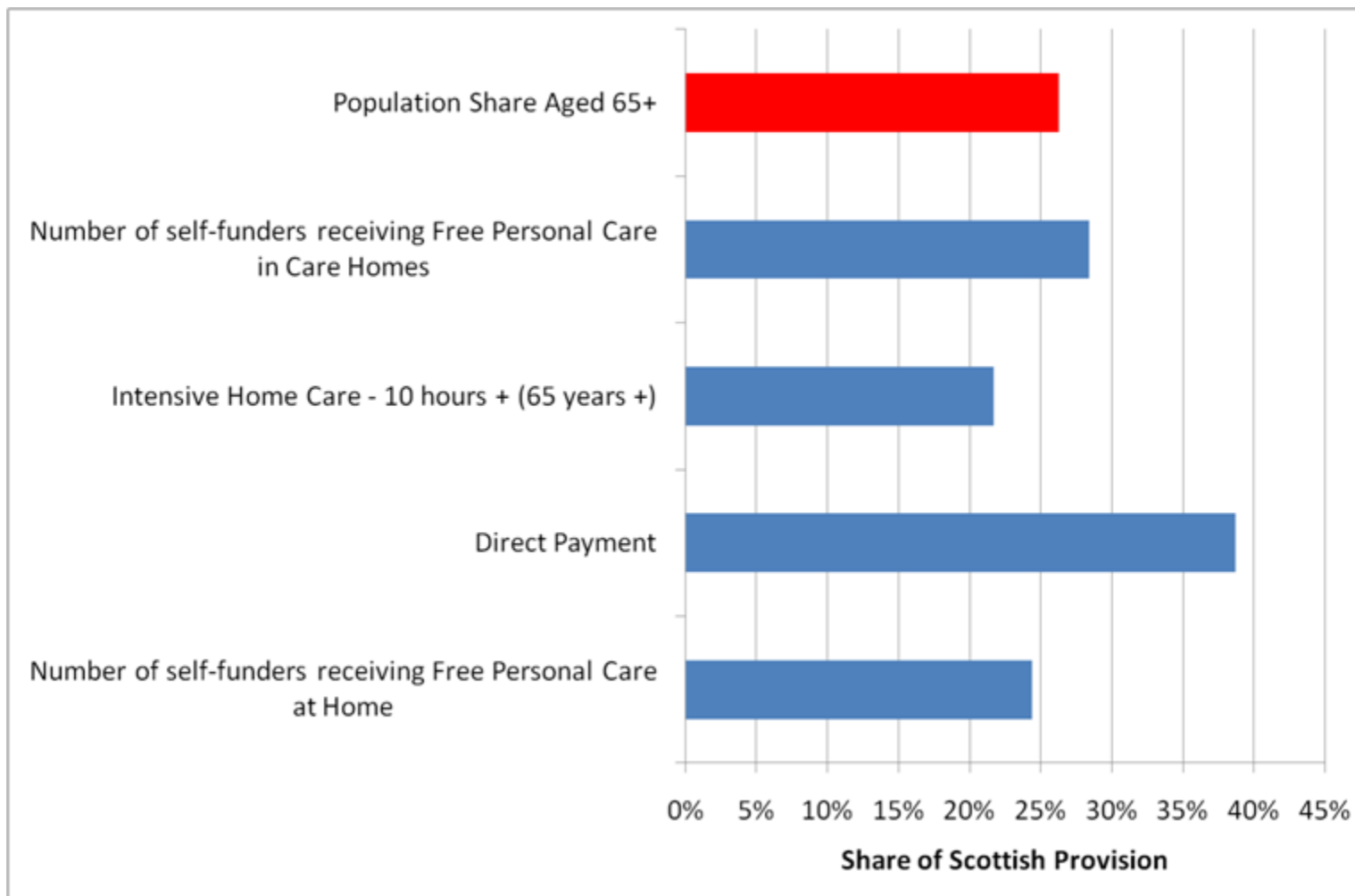


# Formal Care Provision

- Public spending environment for next decade
- Local government settlements will be tight
- Better understanding needed of health/social care interface
- Green Paper in England may influence Scottish provision
- May imply changes to benefit (AA/DLA)\* system

\* AA - Attendance Allowance, DLA - Disability Living Allowance

# How does rural care provision differ?



# Market for Care Provision in Rural Areas

- Who pays?
  - Local Authority/NHS
  - Private Insurance
  - Individual/Family
- Who provides?
  - Local authority/NHS
  - Voluntary organisations (commissioned)
  - Individual/Family
- Who guarantees quality?
  - Scottish Commission for Regulation of Care
  - Market
- What mechanisms empower care users?
  - Direct payments
  - Vouchers
  - Older people's groups

# Market for Social Care Provision

- Netherlands - personal budget – cash alternative to the services otherwise provided under the long-term care insurance scheme.
- England - personal budget - take-up by older people is much lower than by younger disabled people.
- Finland - vouchers – amount fixed or depends on the income of the recipient. Municipality obliged to provide services itself in cases when a person does not want to use a service voucher
- ‘Consumer empowerment will be of little use, given oligopolistic or monopolistic supply of professional care services that prevail in rural areas or small municipalities’ (Schneider, 1999)

# Conclusion

- Rural Scotland's demographic challenge is larger than that in urban Scotland
- Better health among older people in rural areas will partly offset this
- May not be a crisis of lack of unpaid care provision
- Big question of who will pay – state's ability to pay weakened for some considerable time
- Market mechanisms provide at best partial solutions
- Radical thinking is necessary and must start now