What family support will dependent elders have in 2030? European projections

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The ageing of the population raises the alarming prospect of a considerable increase in the number of elders with disabilities and in need of care. How many such people will there be in the future? How will they live? Will they have partners or children able to take care of them? To find out what the situation will be in Europe, a research team has calculated projections of the dependent elder population up to 2030, distinguishing between family situations. Here team coordinator Joëlle Gaymu outlines the study’s findings.

By 2030, the population aged 75 and over will have increased considerably, throughout Europe. Although most elders grow old in good health, the risk of physical and psychological dependence increases with age. Regular help then usually becomes indispensable, in which case the primary carers are usually the partner and children. In the absence of care by partner or children, the need for formal care automatically increases. But will tomorrow’s Europe’s dependent elders be able to count on family care any more than can those of today? A study financed by the European Commission explored probable trends for the next three decades (see box).

In the future it will be more common for elders to have a living partner or child

In 2000, in Europe, it is far more common for men than for women to have their partner with them when they are 75 or over and disabled: 60% of men versus 19% of women. Most women (62%) can only count on potential help from a child. More often than men (19% as against 12%), they have neither partner nor surviving children.

For men and women alike, it is rare to have a partner but no children as potential care-givers (Figure 1).

In the future, older people’s family circumstances will change because of two basic trends (see box): a decline in widowhood/widowerhood and an increasing proportion of divorcees [1]. But these trends are likely to vary according to age and sex.

For women, the rise in divorce rates will be more than counterbalanced by a marked reduction in widowerhood due to the drop in mortality and the narrowing of the gap between men’s and women’s life expectancies. So they will more frequently have a spouse to support them if they become dependent. This will apply to all the countries in the sample. The trend is particularly marked among women aged 85 and over: at these ages, the presence of a partner will almost everywhere be three times as common in 2030 as in 2000 (22% compared to 9%).

For men aged 85 and over, the drop in widowerhood will have a similar effect; they will more often have the support of a partner if they become dependent (53% in 2030 as against 42% in 2000). Men aged 75–84 will also be less likely to be widowed (13% in 2030 compared to 21% in 2000), but they will also be more likely to be divorced (13% compared to 3%). At these ages,
there will be fewer men living with a partner. This trend will be seen in most countries except the Czech Republic, Italy and Portugal and the United Kingdom, where there will be no change in these men’s likelihood of living with a partner.

When those who were born between the two world wars and had their children during the baby boom reach the age of 75, the proportion of those with no surviving children will decline or remain stable, except among men aged 75-84 in Finland, Germany and the Netherlands. With these exceptions, it will be less common for dependent elders to have no family support. At present, that risk is higher among women aged 85 and over (23% in 2000); this figure will drop to 15% by 2030.

Apart from men aged 75 to 84, dependent elder Europeans will have more family members living, though we do not know to what extent the family will actually be capable of and willing to cope with a dependent spouse, parent or parent-in-law. Further, the predicted sharp increase in the size of the elder population is likely to cause an increase in absolute numbers of those with no family, even if they account for a lower proportion. The trend in absolute numbers is a key factor to take into account in developing policy on future provision of care and services for dependent elders.

The dependent population with no potential family careers may remain stable

If there is no change in the health situation between now and 2030, the population of dependent Europeans aged 75 and over could grow by 72%, and even virtually double in the Czech Republic, Finland and the Netherlands.

Elsewhere, the rate of growth will range between less than 50% (Portugal) and 80% (France). This hierarchy largely reflects the fact that the baby boom was more marked in some countries of Europe than in others [2].

If it is assumed (as we do here) that the health situation will improve (see box), those rates will only vary between 74% (Netherlands) and 25% (Portugal), with a mean growth rate of 41%.

The fraction of this population who will have neither partner nor children will grow much more slowly, except in Finland. If health does not change, the numbers of elders with neither partner nor children will grow by only 25% between now and 2030. This means that the number of those who can only rely on formal care (including in residential institutions) will increase far more slowly than the number of those with close family. An improvement in health would reduce the number of those with no family support by only 7% between now and 2030.
Figure 3 – Trend in dependent elderly population in Europe, 2000-2030

<table>
<thead>
<tr>
<th>Age 85 and over</th>
<th>Age 75-84</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Women</strong></td>
<td><strong>Men</strong></td>
</tr>
<tr>
<td>Age 85 and over</td>
<td>Age 75-84</td>
</tr>
<tr>
<td>-50 0 50 100 150</td>
<td>0 50 100 150</td>
</tr>
<tr>
<td>Increase or reduction in numbers between 2000 and 2030 (%)</td>
<td></td>
</tr>
<tr>
<td><strong>No partner or surviving child</strong></td>
<td><strong>Partner but no surviving child</strong></td>
</tr>
<tr>
<td>40%</td>
<td>22%</td>
</tr>
<tr>
<td>55%</td>
<td>10%</td>
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</tbody>
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*Source: Felicie study, from national data.
*Improved health scenario.

The FELICIE research programme * (www.felicie.org)

The purpose of the FELICIE research programme is to forecast the family situations of tomorrow’s elderly population in a sample of nine European countries – Belgium, Czech Republic, Germany, Finland, France, Italy, Netherlands, Portugal, United Kingdom.

A first set of demographic projections was calculated, dividing the sample according to individuals’ marital status and changes over time and from generation to generation. These projections were then used to calculate various projections according to two health scenarios. In the first scenario disability rates by age and marital status were kept constant. In the other, it was assumed that all added years of life expectancy were healthy years. On this assumption, the disability rates for each age group decline by about 20% between now and 2030. Some trends, such as the elderly population’s increasing level of education, less onerous working conditions and better preventive behaviour argue more in favour of the second scenario [5]. As a third step, the various sub-populations obtained (by age sex, marital status and health status) were broken down between those with a surviving partner or child and those without. These projections do not incorporate possible changes in inter-generational obligations, or in people’s desire for residential independence, social norms or government policy on care for the dependent.

The FELICIE research programme involves some thirty researchers from ten different European research institutes. They are: M. Poulain and L. Dal (GEDAP) for Belgium; J. Rychtarikova (Charles University, Prague) for the Czech Republic; P. Martikainen and E. Nihtilä (University of Helsinki) for Finland; C. Delbes, A. Desesquelles, P. Festy, J. Gaymu, S. Pennec and S. Springer (Institut national d’études démographiques) for France; G. Doblhammer and W. Apt (MPIDF) for Germany; G. De Santis, C. Seghieri and M. L. Tanturri (University of Florence) for Italy; G. Beets, H. Cruisen, P. Ekamper, E. Van Imhoff and L. Van Vissem (NIDI) for the Netherlands; A. Fernandes, T. Veiga and F. de Castro Henriques (University of Lisbon) for Portugal; E. Grundy and C. Tomassini (LSHTM) and S. Kalogirou and M. Murphy (LSE) for the United Kingdom.

** Dependence is defined from the question used in the Europanel, “Are you hampered in your daily activities by chronic physical or mental problems, illness or disability?”. Those replying “Severely” were included in the population defined as dependent. The population living in institutions was then incorporated into the dependent population.

The proportion with both surviving children and partner will increase fastest

While at first sight the fact of having a surviving partner or child makes a person less vulnerable if they become dependent, their living conditions can become critical if the partner is in poor health or the child evades their responsibilities. Dependent elderly women typically have only a child or children to count on. And this population group will increase steadily (by 47% or 22% on average, depending on the health scenario) but more slowly than the dependent elderly population as a whole. The number of persons with a partner as sole potential carer will increase more sharply, but this situation will still be rare. The group that will grow fastest between now and 2030 will be those with both partner and children. If the health situation does not change, this group will increase by an average 145%, in a range from 65% (in Portugal) to over 200% (in the Czech Republic and Finland). With better health, the increase will only be 100%, ranging between 39% (in Portugal) and 138% (in Finland) (Figure 2).
Clearly, the burden of caring does not depend simply on the increase in the number of elders.

The profiles of dependent elders and family carers will change

A key factor to consider is the sex and age composition of the dependent population. In the first place, it will age inexorably. If health improves, in 2030 there will be twice as many men aged 85 and over, but only 55% more men in the 74-84 age group. There will be the same discrepancy for women: 43% more aged 85 and over, 22% more aged 75-84 (Figure 3). There will be a consequent increase in demand for formal care, because disabilities become more severe with age and help from family members who are themselves getting older is less effective. The number of women aged 85 and over living with a partner will increase by 250% (France, Italy and United Kingdom) to 500% (Finland and Germany). This means that in all countries, more and more men will find themselves with a dependent partner: of the dependent population aged 85 and over, the percentage of women living with a partner could increase from 7% to 16% by 2030. As things stand, men find it harder than women to cope with a dependent partner: they are more likely to call in professional carers [3] and more likely to place their partner in an institution [4]. Among women too, a growing number aged 85 and over will have to prioritise assistance for family carers. In the future even more than today, policy on care for the dependent will have to prioritise assistance for family carers.

REFERENCES


ABSTRACT

If health conditions remain the same as today’s, the population of dependent persons aged 75 and over should increase by 70% in Europe between now and 2030. Over the same period, the proportion of that population having neither partner nor surviving children should decline in favour those with at least one potential family carer (partner or child). The situations of disabled elders will continue to differ according to sex, with men having a considerably greater chance than women of having a partner with them. The population needing formal care will increase as a result of the increasing numbers of very elderly, a higher proportion of male family carers and the more frequent survival of couples in which both partners are dependent.