



# Homecare in Georgia

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# Content of Presentation

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- Data about Georgia
  - Demographic trends
  - Demography and long-term care
  - Strategic alternatives
  - Long-term care in Georgia
  - Future plans of the Homecare Coalition
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# Data about Georgia

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## Data about Georgia

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- ❑ Location – The South Caucasus, East coastline of the Black Sea;
- ❑ Covers a territory of 69,700 km<sup>2</sup>; out of this 15% is occupied by Russia;
- ❑ Population: Officially 4.4 million, by expert assessment 3.7 million;
- ❑ State language – Georgian, Georgian script.
- ❑ GPD per capita EUR 1800.
- ❑ Healthcare cost per capita per annum EUR 40.

# General Demographic trends

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- Natural growth –
    - Developed countries – low birth and high mortality rates; as a result either there is no natural growth or it is too low;
    - Developing countries - high birth and low mortality rates; as a result there is the high rate of natural growth.
  - Out-migration – from developing to developed countries; as a result this balances number of the population in both cases.
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# Demographic trends in Georgia

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- Are similar to the developed countries according to the natural growth – is characterized by low birth and high mortality rate;
- Are similar to the developing countries according to out-migration – balance is negative;

As a result, there is a decrease and aging of the population, correspondingly increases the need for long term care.

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## Risk for the need of LTC by age groups

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- 0 - 60 – 0,6%
  - 60 - 80 – 3,9%
  - > 80 – 28,3%
  - ❑ In average 0.5 -1% of the population around the world
  - ❑ 1,9% of population of Georgia, i.e. >80 thousand patients, >220 thousand family members - total >300 thousand beneficiaries
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## Specific factors of long-term care in Georgia

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- Decrease of multi-generation families and change in traditional values;
  - Increasing employment and migration of women as traditional informal caregivers;
  - Inefficiency and inaccessibility of healthcare system;
  - Dominations of homecare market by illegal non-professionals services.
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## Strategic alternatives

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Recommendations developed by the Parliamentary Assembly of the Council of Europe in response to aging tendency of population – two basic strategies:

- ✓ Encouraging increase of birth rate;
- ✓ Adapting the society to elderly population.

One important strategic objective is to ensure cheap and effective medical and social services for elderly population.

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# Strategic alternatives

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Basic types of long term care:

- Care at an institution (e.g. shelter, residential home, nursing home, hospice);
- Homecare and community care.

Homecare or care at an institution??

- ✓ Privilege of homecare as more humane service;
  - ✓ Privilege of homecare from economic point of view (2.5 times cheaper)
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## Specific factors of choice for Georgia

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- Development of institutions requires investment, and maintenance need more expenses (X2.5);
- Stigma related to institutional care;
- Most of the population has own residence places;
- Resources of informal caregivers are still great.

Position of Coalition: preference of development of homecare in Georgia and only minimum number of institutions.

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# Long-term care in Georgia

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- Inexistence of policy and relevant state programme of the long-term care.
  - Only 4 shelters for elderly and disabled people for 320 beneficiaries maintained from the times of Communists. Quality of care – very low.
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## Long-term care in Georgia

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- Rehabilitation of children's shelters planned for 2011-2012 and construction of small family type shelters.
  - There is a programme for day-care centers from 2007 with small funding and covers 900 beneficiaries in total.
  - Homecare is developed only at the level of several NGOs which have 10-15 years of experience. Most of them are members of Coalition of Homecare in Georgia.
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# Long-term care in Georgia

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- Coalition's member organizations are also providing other services of long-term care such as for instance hospice, palliative care, day-care centre, training of caregivers.
  - All of these activities are to certain extent supported by the state programmes. Homecare is not funded by the state yet.
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# Long-term care in Georgia

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- Since 2007 Coalition is implementing pilot projects which aim at the development of Georgian Homecare model and its lobby at the country level.
  - In 2010 Coalition officially presented Georgian homecare model.
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## Long-term care in Georgia

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- Ministry of Health expressed its interest in further piloting of the model and its gradual introduction.
  - The Parliament of Georgia requested Coalition to develop homecare policy paper.
  - A working group was established which was composed of Georgian and international organizations, central and local governments, experts, beneficiary and other stakeholders.
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# Long-term care in Georgia

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- By the end of 2010 Coalition submitted the first draft of Homecare Policy Paper to the Parliament of Georgia. It was suggested to substitute it with long-term care.
  - Simultaneously the decision was taken to establish a council on elderly issue at the parliament in 2011; one of its scope of interest will be long-term care and homecare.
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## Long-term care in Georgia

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# Coalition plans for the nearest future

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- Optimization of Georgian homecare model according to all main components;
  - Coordination of homecare with other services of long-term care;
  - Preparation of foundations for integration of homecare in primary healthcare;
  - Finalization of development of policy paper of homecare and long-term care model;
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## Coalition plans for the nearest future

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- Informing policy makers and ensuring their involvement;
  - Raising awareness of the society around the issues of homecare;
  - Educating informal caregivers;
  - Further improvement of homecare standards;
  - Upgrading homecare personnel training course curriculum;
  - Strengthening and recognition of Coalition.
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Most projects  
require three  
hands.

*Arthur Bloch,  
Merpy's Law*

■ [www.homecare.ge](http://www.homecare.ge)