

Ulrike Schneider, Julia Kleindienst

The cost of informal care in Europe: New estimates based on the well-being valuation method

2nd International Conference on Evidence-based Policy in Long-term Care London, 05-08. September 2012

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1. Background and Research Question

- Costs and benefits of informal care to carers are often neglected in long-term care policy
- Focus of economic research: opportunity cost of informal care and contingent valuation
- Most existing studies cover only certain types of costs, and ignore possible utility from providing informal care.
- Using SHARE data, and the subjective well-being valuation method, we attempt a comprehensive estimate of the net cost of informal care:

What are the net shadow costs for an elderly caregiver to provide informal care?



2. Subjective Well-Being Valuation Method (1/3)

 monetary value/cost derived from the effect of the variable of interest on life satisfaction

 Approach widely applied, especially in environmental economics. Van den Berg et al (2004) apply it to informal care.



2. Subjective Well-Being Valuation Method (2/3)

Two Crucial Assumptions:

- 1. Respondents' stated life satisfaction accurately reflects overall experienced utility.
- 2. Life satisfaction is systematically increasing in income.
- Some support for both in the literature; Easterlin paradox a concern.



2. Subjective Well-Being Valuation Method (3/3)

$$W_{ij} = \alpha + \beta_1 X_{ij} + \beta_2 y_{ij} + \beta_3 c_{ij} + \beta_4 D_j + \varepsilon_{ij}$$

W_{ij}: subjective well-being of individual i in country j
X_{ij}: vector of individual characteristics
y_{ij}: household income
c_{ij}: informal care provided
Dj: country dummies

The **net cost of an hour of care** is the marginal rate of substitution between informal care and income implied by the estimation, that is β_3 / β_2 .



3. Data

- Data from the second wave of the Survey of Health, Ageing and Retirement in Europe (SHARE), 13 countries
- Study sample of 29,543 respondents. 80% are between 57 and 80 years old.
- Carers in our sample defined as providing help to someone outside the household daily or weekly



4. Model (1/4)

Estimate an ordered probit model, to avoid assuming cardinality

Variables:

- Life satisfaction (see below)
- Carehours provided (see below)
- Household income: in natural log form. Given unfortunate prevalence of missing values, use imputations of Christelis (2011)
- Several measures for health in dataset. Use grip strength measurements as a summary measure, (see Andersen-Ranberg, K., I. Petersen, et al. (2009))
- Carer's age, marital status and employment status



Model (2/4) - Dependent Variable

How satisfied are you with your life, on a scale from 0-10?





Model (3/4) - Informal Care Variables

Capture non-linear effect in three groups of care hours:

- weekly average provided in last year, additionally
- medium care hours (between 10 and 30/week) and
- high carehours: over 30/week
- additional binary variable indicating generation the carer and care recipient belong to
- most common are children caring for their parents (over 30% of regular carers)



Model (4/4) - Summary Statistics

		carers			non-carers		
		Q1	Q2	Q3	Q1	Q2	Q3
Yearly net HH-income	in Euros	16,975	31,375	116,650	22,115	49,900	244,400
		Mean (sd)	min	max	Mean (sd)	min	max
grip strength	health status proxy	34.9	1	86	34.5	1	84
		(11.1)			(12.1)		
Gender	(1=female)	0.64	0	1	0.54	0	1
N		5,288			24,255		



5. Results (1/4) – whole sample

Dependent Variable: Life Satisfaction

Regressor	Coefficient		
Carehours	0.044**		
Carehours (10-30)	-0.034**		
Carehours (>30)	-0.044**		
Health	0.014***		
Carehours*Health	-0.001**		
Carehours (10-30) *Health	0.0009***		
Carehours (>30) *Health	0.001**		
Log income	0.112***		

Note: Other sign. regressors include: female***

unemployed***, disabled***
(ref. category: employed)

married***, divorced***,
widowed*** (ref. category: single)

Coefficients are positive/negative and significant at 10% level*, 5% level**, 1% level***



n=29.471

5. (2/4) Results – carers only

Dependent Variable: Life Satisfaction

Regressor	Coefficient		
Carehours	0.003		
Carehours (10-30)	-0.002		
Carehours (>30)	-0.003		
Health	0.012***		
Log income	0.136***		
Care recipient younger	-0.053*		
Care recipient from same generation	-0.069***		

Note:

Other regressors include: female***

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unemployed***, disabled***
(ref. category: employed)
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married***, divorced***,
widowed*** (ref. category: single)
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Coefficients are positive/negative and significant at 10% level*, 5% level**, 1% level***



n=5,288

5. Results (3/4) – Shadow cost calculations

- Median low-intensity carer: values care at €2.60/hour (€137 for an extra hour each week over a year)
- Similar carer with three units lower grip strength is expected to derive an additional €1/hour
- For median carer providing 25 hours a week care is valued at about €1.50 / hour



5. Results (4/4) – Shadow cost calculations

Examining carers only ...

- implied shadow values are smaller, but still positive;
- care (for someone providing less than ten hours a week) valued at about € 1.20/hour
- Relative to caring for someone older (e.g. a parent) carers in the same generation as care recipients have much lower life satisfaction - about €1.600/year



6. Discussion

- Strong indication of net benefits of providing informal care to many in this group of out-of-home carers
- In the model for the carer subsample, carehours show a tendency to significance; no change in the patterns observed for the full sample.
- Health status may interact with care-giving in complex ways. Certainly an issue for further study.

- Crucial limitation: no data on care recipient characteristics (especially health status)
- issue of missings in income
- issue of intra-household carers to complete the picture



Thanks for listening!

If you have further questions, please contact

ulrike.schneider@wu.ac.at

Vienna University of Economics and Business Research Institute for Economics of Aging

