

2017 Commonwealth Fund International Health Policy Survey of Older Adults in 11 Countries

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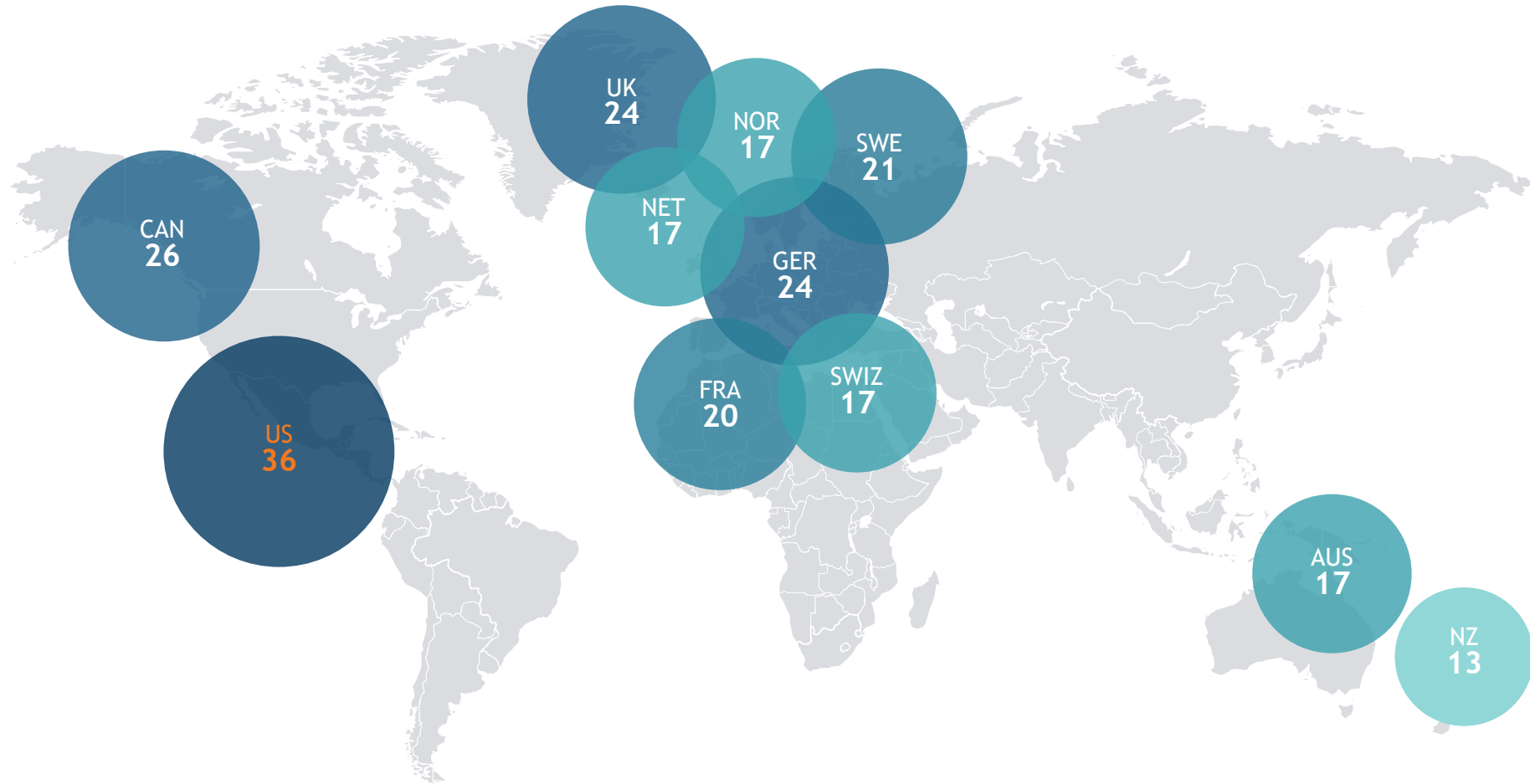
The
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Key Findings:

- Caring for aging citizens well is a challenge all nations face.
- Overall, U.S. seniors are worse off than their counterparts in the other 10 nations- they are the sickest, most likely not to be able to afford needed health care and to struggle to have basic needs, like food and housing, met
- In the other countries, which have universal coverage, seniors face lower cost sharing and have the benefit of a stronger social safety net.
- “High-need” older adults in the 11 countries were more likely not to have basic needs met, experienced more mental health problems and social isolation, were at greater risk of falls, and, often had more poorly coordinated care

Older Adults with Three or More Chronic Conditions*

Percent (%)



Older Adults who Experienced Economic Vulnerability in the Past Year*

NOR
SWE
NZ
UK
NET
FR
SWIZ

10%
OR LESS



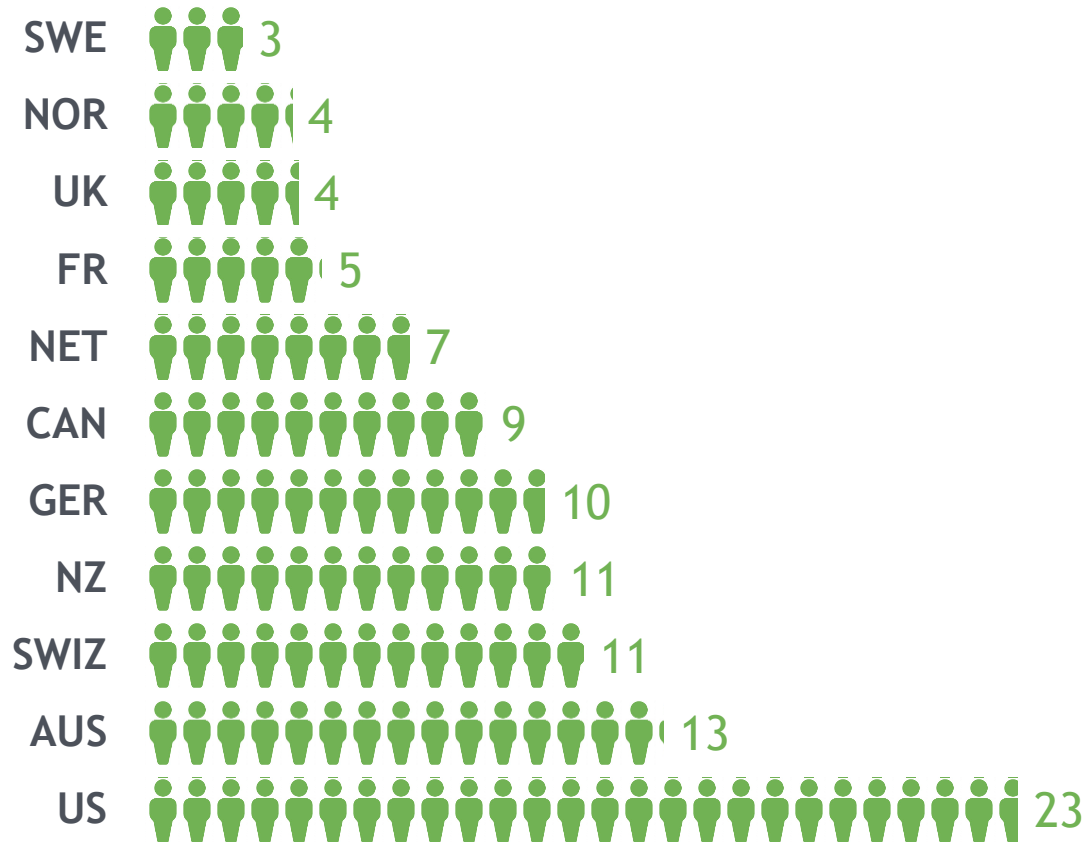
US

25%



Older Adults Who Experienced Cost-related Access Problems to Care in Past Year *

Percent (%) who had to forgo care because of cost



Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults

* Cost-related access problem in past year, including: 1) Did not see doctor when sick; 2) skipped medical test or treatment recommended by doctor; and/or 3) did not fill prescription or skipped doses because of the cost in past year.

Older Adults Who Did Not Receive Needed Help with Activities of Daily Living Because of Cost



SWE
FR
NET
UK
SWIZ

10%
OR LESS

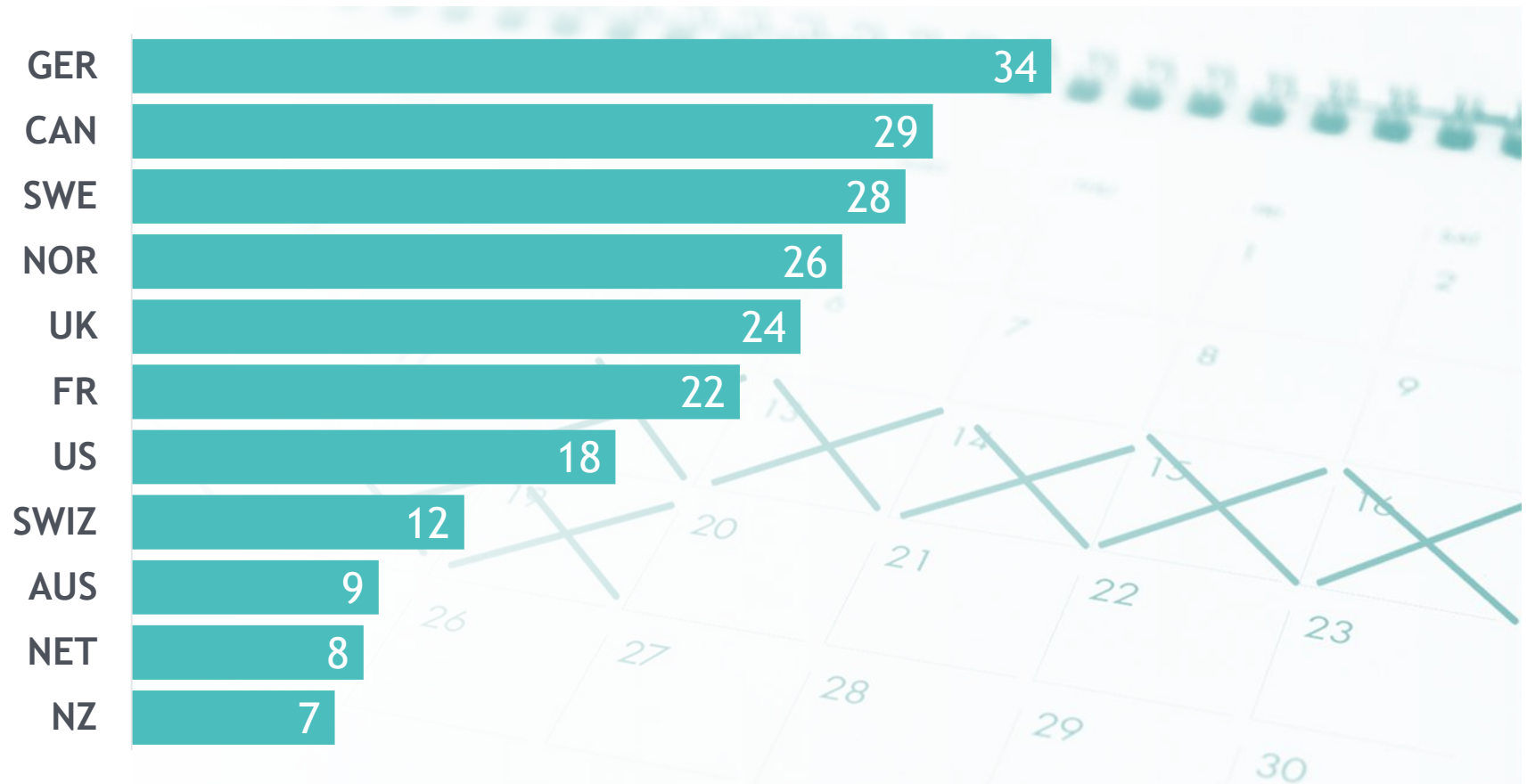
ABOUT
20%
OR MORE

*19%

CAN*
AUS
US

Older Adults Who Waited 6 days or More for an Appointment

Percent (%)



Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults
Long wait time: Waited six days or more for an appointment to see someone when sick.
Population: Excludes adults who did not need to make an appointment.

Older Adults Who Talked With Doctor About Health Promotion in Last 2 Years

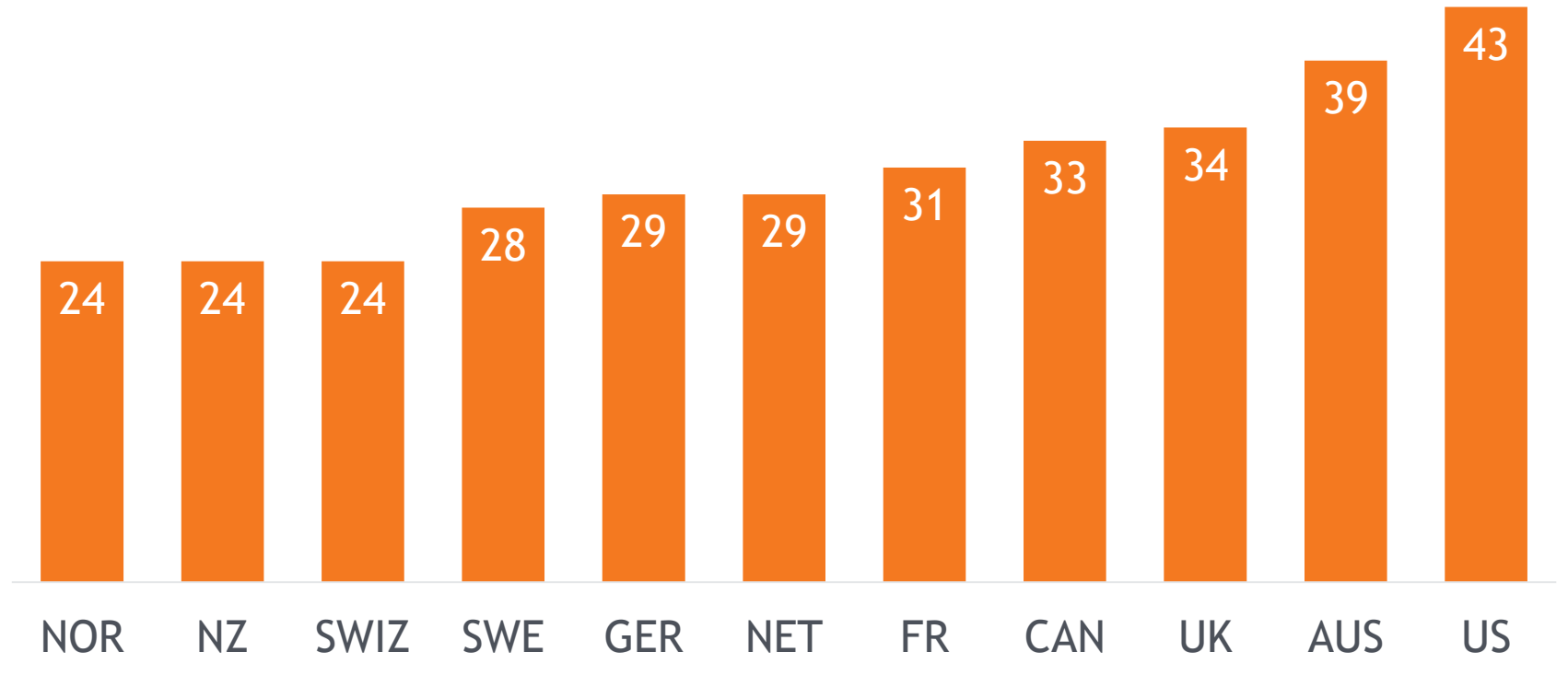
✓ = 50% or More Reported Talking With Doctor About Health Promotion

	Falls, among those at moderate or high risk of falls	Healthy diet and exercise and physical activity	Things in life that cause stress like depression and anxiety
AUS	✓		
CAN			
FR	✓		
GER			
NET			
NOR			
NZ	✓		
SWE			
SWIZ	✓		
UK			
US	✓	✓	

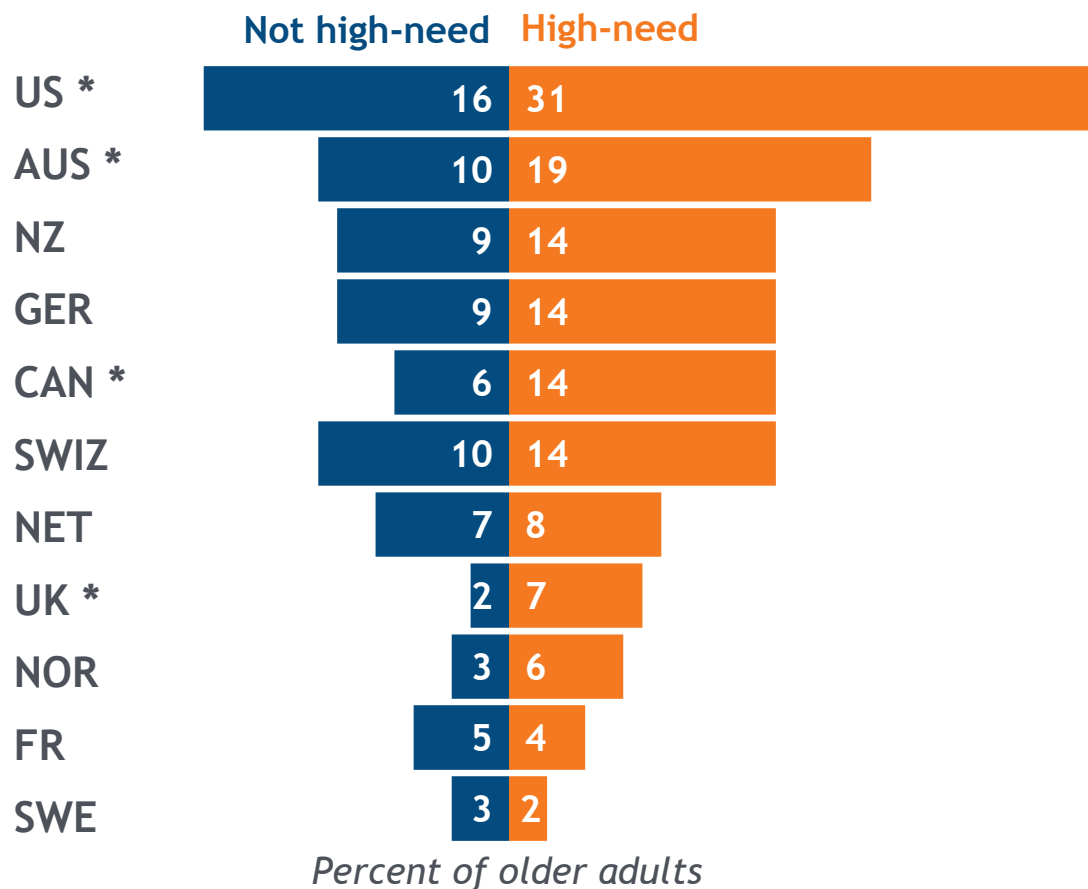
Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults

Definition: During past two years, talked with doctor or other clinical staff at regular place of care about healthy diet, exercise and physical activity; things in life that cause stress; or falls, among whose self-perceived risk of falling is high or moderate.

Percent of Older Adults with 'High-needs' (%)



High-need Older Adults Experience Greater Cost Barriers to Receiving Care*



Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults

Population: High-need older adults are defined as having three or more chronic conditions or a functional limitation.

* Cost-related access problem in past year, including: 1) Did not see doctor when sick; 2) skipped medical test or treatment recommended by doctor; and/or 3) did not fill prescription or skipped doses because of the cost in past year.

Asterisk(*) indicates that the differences between high need and not high need are significant below $p < 0.05$.

Lessons Learned from 2017 International Health Policy Survey

- U.S. seniors are sicker, more economically vulnerable, and face greater financial barriers to medical care and social care than older adults in the 10 other countries
- Older adults across countries face gaps in timely access to care
- Across countries, health promotion is a missed opportunity
- Strengthening the social safety net is critical for addressing the challenges facing high-need elderly
- Innovative programs are needed for high-need elderly that address both health and social care needs

Methods:

- 20th annual survey; 7th survey on older and/or sicker adults
- Views and experiences of adults 65 years and older in 11 countries
- Total sample included 22,913 older adults
- Samples sizes: Australia (2,500), Canada (4,549), France (750), Germany (751), Netherlands (750), New Zealand (500), Norway (750), Sweden (7,000), Switzerland (3,238), United Kingdom (753), United States (1,392)
- Telephone Survey (with online component in Switzerland) conducted March to June 2017

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