

Contribution to the 7th Global Report on Local Democracy and Decentralization (GOLD VII) on the **Economies of Equality and Care**

Model of domiciliary care for elderly people in a situation of dependency in the Dominican Republic.

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1. Model of domiciliary care for elderly people in a situation of dependency in the Dominican Republic.

Care has emerged as an essential component in the Government of the Dominican Republic's strategy to combat poverty, foster economic reactivation and generate employment, particularly in the post-Covid-19 pandemic context. Since 2020, the Dominican Republic has advanced in the construction of a National Care System. The Intersectoral Care Panel was formed as a space for discussion, coordination and political and technical decision making, to generate a common vision and promote institutional synergy around the agenda for the formulation of the national care policy.

The Intersectoral Care Panel is made up of eleven (11) government institutions that work together to ensure the implementation of the National Care Policy. Representation in this space includes the Ministry of Economy, Planning and Development (MEPyD); the Ministry of Women, as coordinating entities; the Ministry of Labor; the Supérate Program; the Single System of Beneficiaries (SIUBEN); the National Institute for Comprehensive Early Childhood Care (INAIPI); the National Council for Children and Adolescents (CONANI); the National Council for the Elderly (CONAPE); the National Council on Disability (CONADIS) and the National Statistics Office (ONE).

As priority populations, and starting with a pilot program called "Communities of Care", people in need of care and people engaged in care work have been identified. Currently, its implementation has the financial support of the Inter-American Development Bank (IDB), and is being carried out in two prioritized territories: Santo Domingo East and Azua de Compostela.

As part of the diversification of services, the Intersectoral Care Panel has promoted the implementation of a domiciliary care offer focused on improving the quality of life of dependent elderly people, under the coordination and supervision of CONAPE. The domiciliary services will complement the existing institutional offer, prioritizing support to poor and vulnerable families in homes of the Supérate Program, with the purpose of preventing or delaying institutionalization and promoting autonomy.

The development of this care model alongside its organizational and management model has been supported by the support and experience of the

CSC Consulting and Management team – Consorci de Salut i Social de Catalunya, which works closely with government teams to promote the implementation of an efficient care system adapted to local needs in the provision of domiciliary services to the elderly.

The domiciliary care model contemplates three levels of dependency: mild, moderate and severe. In the initial stage, moderate and severe dependency levels are being addressed, with a focus on providing specialized care to enable a more autonomous and dignified life.

The main objective of this model is to ensure that the elderly receive dignified, timely and adequate care in their homes for as long as possible, while receiving personalized services that promote their well-being and respect their autonomy.

This model offers a wide range of services designed to meet the diverse needs of the elderly, including assistance with basic activities of daily living, accompaniment in medical and social procedures, emotional support, domiciliary medical care, and recreational activities to promote their overall wellbeing. The proposal is based on a human approach and focused on the individual needs of each person.

The main goals of the initiative include:

1. Promote permanence in the home: The aim is to minimize the need to transfer elderly people to institutions, promoting alternatives that allow them to continue in their family and community environment with adequate assistance.
2. Promote personal autonomy: Through various actions, we aim to strengthen the independence of the elderly so that they can function more safely and comfortably in their own homes and communities.
3. Establish a referral and counter-referral system: This is an agile and efficient mechanism that allows for the appropriate channeling of care services to ensure continuous and timely follow-up of each case.
4. Creating employment opportunities in the care sector: The initiative prioritizes training and formalization of care work, with special attention to women in vulnerable situations.

The role of the municipalities is key in the implementation of this model, strengthening local capacities in the areas where the strategy is implemented, providing the necessary resources, coordinating the work teams and favoring the logistics that allow effective and close attention to the elderly. Cooperation

between national and local authorities is essential to achieve the sustainability of this initiative and its possible extension to other regions of the country.

This policy, aligned with the country's planning and development instruments and the Sustainable Development Goals (SDGs), marks an important step towards building an inclusive and equitable care system in the Dominican Republic. The training and certification of caregivers ensures the provision of quality services, while generating formal employment in a sector of growing importance.

The experience gained through the implementation of this model in the selected territories represents a valuable reference for other countries in the region. It is a replicable approach, based on best practices and aimed at improving the quality of life of the elderly, providing effective solutions that promote their well-being and autonomy. The government's commitment to this initiative reflects its determination to build a sustainable, accessible and people-centered care system.