Population aging is one of the most important population processes, in particular in advanced economies. A steady increase in the percentage of older adults in the population results from improved average life expectancy and low fertility rates. According to World Health Organization, between 2015 and 2050, the proportion of the world's population over 60 years will nearly double. A longer life does not always mean a longer life in health, and people will increasingly report various functional limitations. This implies an increase in the number and proportion of people who will require health care, including long-term care.

Long-term care is provided informally (by family or friends) or formally (given at home or in the institution). Long-term care in Poland, as in other European countries, is most often provided by the family. However, the support capabilities in family networks may be shrinking due to reduced propensity to create a family (more and more people do not enter relationships, including marriages) and increased instability of relationships (separations or divorces). This leads to an increase in the number of people living in one-person households who cannot rely on the help of a partner. Such a situation puts pressure on public funds.

From a policy perspective, it is crucial to allocate the public resources for interventions for older adults such as long-term care in an effective and socially acceptable way. An economic evaluation of changes in quality of life may play an essential role in aiding such decisions. Traditionally economic analysis concerning intervention for older adults is focused on their health status. Recently, however, there has been an increasing recognition that other aspects such as, e.g., comfort, independence, or social interactions should also be considered in interventions concerning the elderly. In this project, we would like to focus on the quality of life of the elderly in a broader sense, including other wellbeing dimensions apart from health status.

In the proposed project, we would like to investigate the level of acceptance of the different forms of long-term care (formal and informal) depending on the older adult's health, social and financial status. We will investigate which forms of public support are perceived as fair from the individuals' perspectives. Additionally, we would like to check if people's attitudes towards different care forms vary depending on situations when people think about strangers and their relatives (potential differences between altruism in a private and a public domain). For this purpose, we will apply a Vignette study.

In the second survey, we are going to evaluate the benefits of the improvements in public care for the elderly. Changes in quality of life are not directly reflected in market prices, but economics has developed methods to assess the value of so-called nonmarket goods in monetary terms. In this project, we would like to use the Discrete Choice Experiments to investigate preferences regarding the proposed changes and to evaluate social benefits from such improvements. We will combine the results from both studies to examine how the perceived fairness of the analysed solution influences people's valuation.

Additionally, we intend to examine the role of emotions in people's choices concerning longterm care. The topic of elderly care is rarely discussed by people, indicating that it can be associated with negative emotions. The strength of emotions can have an impact on the rationality of peoples' decisions. Since most economic models are based on the assumption of rationality of choices, the proposed modes should be adjusted to consider different potential heuristics (different decision rules).