The CNSA (National Solidarity Fund for Autonomy) was created in France in 2004 following the events linked to the 2003 heat wave and in connection with the new disability bill, voted in 2005. These events highlighted the need for the elderly and disabled people for modern social and medical residential facilities and support services which require increased funding.

Some people need help with everyday activities such as eating, dressing, bathing... This loss of independence may be the effect of a disability (physical, psychic, intellectual ...) or of ageing. The loss of independence isn’t a disease but may be a consequence of one. Different answers exist to provide independence: human help, technological aids, residences, and so on.

The CNSA is responsible for providing financial support and funding of support services to persons who have lost their independence.

Services for persons who have lost their independence

These services, in addition to daily needs, provide specific solutions to different people:

- children: the provision of education and/or professional training;
- adults: assistance with professional and/or social integration (centres for professional re-education, social and medical support, care homes, etc.);
- the elderly: by providing care and health services.

Those services can be delivered at home or in specialized residences. Generally they provide care services; health services and residences offer accommodation and meal.

These different kinds of aids benefit from different fundings:

- health benefits are financed by the health insurance, who delegates the distribution of funding to the CNSA;
- for disabled people, the government or local authorities take care of all other charges;
- for elderly people, local authorities are in charge of care expenses, accommodation charges fall to the individual. However if they do not possess sufficient resources, local authorities will cover them and CNSA contributes partially to local authorities’ expenses.

Individual benefits

CNSA also finances two forms of benefits for elderly and disabled people.

The Personalised Autonomy Allocation (APA)

This allowance is for people over 60 to support expenses linked with their new loss of independence. It can be allowed when people decide to enter a residence, decide to remain at home or to assist them
with their daily lives. An individual’s level of dependence and their disposable income are used to determine the amount they receive. The APA is allocated and financed by local authorities. The CNSA contributes up to 32.4% (2014) of local authorities’ expenses for APA.

**The “Disability Compensation Benefit” (PCH)**

This allowance is dedicated to people whose disability occurred below the age of 60. It is allocated and financed by local authorities, following the decision of the MDPH (services for evaluation of loss of autonomy and special benefits allowance for disabled people). The amount awarded is determined by the level and nature of the assistance deemed necessary, agreed by the MDPH. 172 000 people received the PCH in 2014. The CNSA contributes to 34% (2014) of local authorities’ expenses for PCH.

**The CNSA budget**

Health Insurance resources for medical expenses related to assisted living. The funds come principally from employer social contributions but also from taxes and reached 17.5 billion euros in 2014. 0.058% of the “General Solidarity Contribution”: a tax similar to social contributions (= 725 million euros of the CNSA budget).

The “Solidarity & Autonomy Contribution”: this tax aims to contribute to the financing and modernisation of services and benefits for the elderly and disabled. It corresponds to 0.3% of a company’s total revenue (all employees in french companies donate a day’s wage “by working for free”), which represented 2.4 billion euros in 2014.

Another tax was created in 2013, the “Additional Solidarity & Autonomy Contribution”: this tax represents 684 million euros in 2014.

The total CNSA budget in 2015 was 22.8 billion euros.

**The role of the CNSA**

The CNSA has three major goals in leading social-care policies:

- funding services and residences for people with autonomy loss (19.2 billion euros) and contribute to local authorities’ expenses for special allowances (2.35 billion euros);
- equal treatment for everybody in the whole territory: the CNSA distributes its funds to reduce disparities between regions;
- a role of expertise and information towards its partners: in particular, the CNSA has a role of expertise towards MDPH network.

119 people work at CNSA to ensure its tasks.

The CNSA is led by a board, with a specific composition. It is composed not only of representatives of unions but also of elderly and disabled people associations, of local authorities, of the Parliament and of the government.

Its main role is to indicate CNSA’s priorities and to vote its budget.

The CNSA is assisted by its scientific council who plays an important role in the scientific and technical orientation allowing to define thematic priorities of the CNSA.