

# ***‘Changing Faces’***

**Study into the needs  
of older people living  
in County Longford**

## **Findings and recommendations**



**Longford Community  
Resources Ltd.**

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&  
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## SOCIAL & LEISURE

### *Clubs*

The many social clubs for older people in the county provide an extremely valuable source of contact, friendship, support, information and interaction. The importance of these clubs cannot be overstated.

The range of activities, events and levels of participation vary from club to club, with the most successful clubs being those in which the members have taken ownership. The creation of Longford OPN has provided clubs with an opportunity to network, share ideas and resources.

Clubs in rural areas are particularly important for more isolated, less physically mobile and single older people, especially those without access to transport.

In many instances, these clubs/groups represent the only social contact older persons have. Many of those interviewed were convinced that the benefits of attendance at clubs provided both physical and mental health benefits. In addition, interviewees who regularly attended clubs were confident and well-informed about their rights, entitlements, accessing services and sources of support.

Older people attending clubs offered a variety of reasons why others in their community did not participate in their activities. These reasons included a lack of suitable activities, poor health and access to transport. In addition to these reasons, the low level of attendance by men was often attributed to the lack of the other men, creating a 'vicious circle' effect.

There appear to be significant opportunities for some clubs to further develop activities, with a keen interest in the arts. Longford OPN could play a supporting role in this.

Longford clubs are virtually all in the voluntary sector. Most of the clubs run with little financial support and there appear to be inconsistencies about grants awarded for transport costs. For example in some villages, there are two clubs but only one receives financial support for transport.

Some organisations, e.g. Bridgeways Family Resource Centre (Ballymahon), run clubs which specialise in providing places for those who are housebound or infirm, and serve those whom day care facilities either cannot or will not facilitate. Their services provide important outreach to a very vulnerable group of older people. In particular, the provision of a hot meal and social interaction is crucial and for a number of interviewees we spoke to who attended such a club, it was their only social outlet. A significant number of these interviewees were men.

As far as current activities for older people in Granard are concerned, HSE funds Rath Mhuire Resource in Granard, which supports up to 100 older people in both Granard and the North Longford region. The new Granard Family Resource Centre will begin delivering activities in the very near future, as soon as its Management Committee has completed its governance training.

### ***Capacity of clubs & groups***

Many interviewees involved in running clubs and groups for older people felt under pressure to formalise their committee, structure, systems and procedures. Whilst it was acknowledged that for funders and good practice there needed to be transparency, there is a risk that bureaucracy is causing 'volunteer fatigue' for a number of committee members. Committee members are often very physically fit, motivate their peers and generate enthusiasm throughout the club; therefore, losing these members jeopardises the whole club and its activities.

That said, there is a need for capacity building within the clubs, particularly to develop leadership, basic management skills and encourage new and innovative activities. Funding for such activities is eligible through the new Rural Development Programme 2008 - 2013, which LCRL applied for in July 2008. The outcome will be known by October 2008.

There also appear to be incidents where clubs and groups involved in providing social &/or care activities for older people seem to compete against each other for funds.

### ***Longford OPN***

Longford OPN is active and has a wealth of talent amongst its committee members. The OPN brings issues to County and National Fora but information does not always reach Longford County Council, the County Development Board and other policy makers.

The OPN provides a great opportunity for older people to have a voice and is a useful vehicle for advocacy. At present, there is no formal link to care homes and nursing homes, and there is scope for the Longford OPN to be more inclusive in finding ways for these older people to have a voice.

Although virtually every group in the county is a member of the Longford OPN, there is a small number who are not. It would be useful to explore ways of bringing these unattached groups on board.

In Longford, there is a need for much more input and output of information, co-ordination and support amongst providers of services for older people. The Longford OPN has considerable scope to support this and is well-placed to play a leadership role in encouraging service providers to improve communication, share information & resources and provide a less fragmented, more 'joined up' service for its members and peers.

However, it should be noted that the capacity of the Longford OPN is relatively limited and as a voluntary committee will not currently be able to cope with a challenging schedule of actions or considerable responsibility without staffing support.

## ***Activities & events***

Between them, the clubs provide a wide range of activities from the very traditional (e.g. bingo and cards) through to more innovative ones such as intergenerational projects.

Interviewees expressed a desire for more arts-based activities but said that this needed funding and other resource support. This support is available under the Community Education Service of the VEC.

The annual Bealtaine (May) Festival - a national festival celebrating creativity in older age - is an invaluable social event for older persons living in rural and urban Longford and attracts both male and female participants. The Longford festival this year ran an excellent range of events from guided walks, tea dances to an arts talent showcase. However, most of those participating in the festival were already part of the network of older persons groups.

There was an identified need for an increase in the amount and variety of activities in nursing homes.

## ***Church / religion***

The church plays an important role in the lives of many older people of Longford, providing not only a religious context but a social one, too. Many interviewees regularly attended Mass &/or prayer groups. For many, being able to participate in religious activities was a key indicator of quality of life.

There is a disparity across Longford in terms of the amount of support and contact offered by parish priests. In some areas, e.g. Monaduff, the priest undertakes regular visits to housebound older people and is proactive in terms of pastoral care. In other areas, there are no home visits or other contact by the parish priest.

The declining number of Catholic priests in Ireland is having a detrimental affect on the social and religious interaction of isolated older people, particularly in rural communities.

## ***Sport***

The role of the GAA was a significant issue when talking to older people about social and leisure activities. The support and engagement with the older generation seems to vary greatly from club to club. Monaduff was cited as a good practice example where the GAA club plays an active role in supporting the [older persons] Social Club and contributes greatly to its sustainability through providing a venue and fundraising activities.

However, there was little outreach in some areas and many of our interviewees believed that the GAA could and should play a greater role in community development and engaging with older people. The GAA was felt to be particularly important to older men.

St. Joseph's have tried to develop a long-term relationship with the GAA County Board to provide regular transport from the centre to Pearse Park and other venues for matches.

There is further scope to develop this relationship beyond St. Joseph's, both for county and club matches and other GAA activities.

The GAA Social Initiative launched in May 2008 and backed by President Mary McAleese is a partnership between the GAA and the Irish Farmers Association (IFA) aimed at tackling rural isolation and loneliness of older single men. A full-time co-ordinator is currently being recruited. This initiative should go a considerable way to making a positive contribution to this issue.

### ***Libraries & education***

Longford libraries were praised as welcoming, safe spaces for older people. Many of the interviewees saw their local library as place for social contact, learning new skills (e.g. using the Internet) and a valuable source of information. There are no mobile libraries for the county but there is a good home service.

Longford VEC plays a key role in providing accessible educational opportunities and courses in local areas throughout the county. Our interviewees largely believe that the focus of educational courses should not be on accreditation, and that the social and personal development benefits of education should be emphasised.

Older men could be encouraged to become involved in informal training / education projects where they can tell their stories and draw on local or folk history. This has been instrumental in lifting very isolated men out of depression in Aughnacliffe and has the potential to be replicated in other rural areas in the county, through for example an oral history or reminiscence project.

In the cases of both the library service and VEC, interviewees advocated for the increase in current service provision and stressed its importance, particularly for maintaining positive mental health and social contact. Longford Library Service is developing new projects all the time, including a forthcoming county-wide project aimed at tackling the stigma of mental health issues.

### ***Visitation services***

One of the measures under the Department of Community Rural and Gaeltacht Affairs supported Rural Social Scheme provides social care and care for the elderly. LCRL under the RSS in County Longford currently operates in Newtowncashel, Granard and Dring at the request of, and agreed with local community groups. LCRL employs 3 RSS workers who visit approximately 6 older persons each every week. It has been very well received indicating that there is potential for service expansion in other areas of the county should further numbers be allocated to LCRL.

# HEALTH

## *General issues*

There were very mixed responses to health issues. Public Health Nurses were highly praised but there was concern about the HSE in general, and a belief that health services in Longford are fragmented and lack co-ordination.

Many of our interviewees had concerns about ‘joined up’ and holistic health care and there was a feeling that opportunities for a more efficient and effective health service delivery locally were being missed.

There are different HSE Local Health Office areas within the county and even within small towns. For example, in Ballymahon, those living just outside the town travel to a different hospital for outpatient appointments to those living in the town. This is causing confusion and frustration.

There were a number of comments about the need to make better use of the HSE funding programmes which are available for a wide range of health promotion activities; there is a belief that they remain largely untapped in County Longford. Opportunities appear to exist for partnership working between the HSE and the community and voluntary sector to deliver accessible outreach programmes in rural communities in Longford, e.g. mental health, health promotion and nutrition programme.

Carers, including older people, felt that they lacked support and that they often had to find out information for themselves. The lack of co-ordination between some HSE services was also an issue here.

The need for a patient advocate for older people was raised, particularly for more vulnerable older people.

## *Health & transport*

Transport to access health services was the biggest single issue arising from this research. When asked about health, the older people we interviewed immediately raised the issue of transport. The issue is discussed in greater detail in the *Transport* section.

The area that attracted most concern was getting to hospital appointments in Mullingar, Tullamore, Athlone and Dublin, and there are serious logistical difficulties in getting to and from hospital and clinics. The distance in itself was an issue for some. St. Joseph’s run a daily bus to Tullamore (subject to demand) and also a Dublin service. It feels able to manage demand.

Taxi services have been cut and whilst there is still a reasonable service, many of our interviewees found it difficult or impossible to get through on the phone line (some had been trying for months), resulting in either expensive private taxis, reliance on kind neighbours or in some cases them having to cancel or postpone the appointment.

With hospital transport, there is a number of issues: no one waits until a person gets into the house when brought back home; no one checks if everything is ok with the patient; there is no transport back home if a person is examined/treated and not admitted.

The de-centralisation of key and specialist services would reduce the need for transport outside of the county. St. Joseph's are currently working on getting a number of nurse-led clinics transferred from Mullingar to them, e.g. venesection (blood drawing).

### ***Day & Respite Care***

St. Joseph's Day Care Centre and Hospital in Longford Town is the county's biggest provider of day and respite care services. St. Joseph's currently provide services for 120 older people in day care, 104 in respite care and 163 residents. Despite wide-scale perceptions to the contrary, there is currently (July 2008) no waiting for these services. This perception exists not only with the wider public but also with politicians and HSE staff themselves.

For those who attend, St. Joseph's provide much-needed social contact as well as essential hygiene care; for some, this is the only time that they get a wash in the week.

St. Joseph's has an excellent service outreaching to rural communities throughout the county, offering transport to and from the centre. There is a wide range of activities available and they are keen to expand these. However, St. Joseph's is a medical model and they recognise that there is a substantial need for day care provision run on a social model. It should be noted that services for older people at St. Joseph's, led by the Director of Nursing, are providing innovative and stimulating activities. For example pet, gardening and art therapy are all available. Older people themselves are also empowered through the ward committees. These committees recently requested increased visits from the Legion of Mary, whose members now attend for daily rosaries with residents and day care clients. In 2007, the residents committees told staff that having a fireplace in the wards would make a huge difference to the atmosphere and make it feel like home. Fireplaces have now been installed on all wards - a radical move for a medical setting.

The annual closure of the centre from mid July for 3 weeks and for a time at Christmas is traditionally a cause for concern, as those attending have very little other social outlet and are isolated during these times. During closure, there is no back up service provided or alternative care sorted out, which puts increasing pressure on family carers. It is believed that these closures are because bus drivers who bring people into the centre from around the county need to take holidays.

Some interviewees preferred to get picked up and brought to the care provided in St. Joseph's, as they like the anonymity of it all and felt that "people knowing your business" were reasons that they do not access day care in many rural areas.

Feedback to the research team was that the quality of hospice care in Longford is very good, although demand exceeded supply.

## **General Practice**

The feedback on General Practitioner services in the county was almost exclusively positive, with no concerns over levels of access or quality of care. The outreach of GP services in rural communities was considered to be particularly good.

MIDOC were also praised for providing an excellent service.

## **Public Health Nurses**

Public Health Nurses (PHNs) were cited as hugely significant service providers, both in terms of their healthcare but also the social contact that they provided. There was very positive feedback received on PHNs - “a marvellous service” - and they go into everyone’s home once a month.

Many interviewees identified PHNs as a key motivator in influencing themselves and their peers. There was a good level of trust and their knowledge about other services is regarded as excellent. As such, PHNs play a key role in the lives of many older people of Longford.

Through the PHNs, a local prescription collection service for a small group of isolated older people was initiated through LCRL under the Rural Social Scheme whereby one worker in Ballinalee collects prescriptions for up to 16 older people who do not have transport. This is an innovative scheme and there is scope to develop it elsewhere in the county.

PHNs themselves have concerns about levels of isolation of older people, particularly in rural areas, and are aware that they are effectively providing a social contact service as much as a health one for many of their clients. PHNs have huge potential to act as both formal and informal advocates for individual older people and that section of society as a whole. They feel that levels of HSE bureaucracy hinder their role.

## **Chiropody**

Chiropody was a very common health issue throughout the research. Our interviewees deemed this a very important service - *“If you look after your feet then you stay mobile.”* There appears to be substantial provision for chiropody services across the county, although there are inconsistencies about the cost, with some older people being able to access free services with others only being offered subsidised rates. Chiropody was viewed as an expensive service by many.

### ***Mental health & specialist services***

Our research found high levels of concern about the lack of mental health services, information and awareness of and for older people. In particular, there is concern that there are high levels of depression amongst men living on their own.

There is no dementia unit in County Longford. If you are over 65 and need long-term care, you will have to go to St. Loman's in Mullingar. There is also no geriatrician in Longford, and the lack of this kind of a specialist is leading to late intervention with many age-related illnesses which, in turn, is leading to increased long-term care and heavy medication. St. Joseph's is keen to play a major role in keeping older people in their own homes, out of hospital and leading healthy, active lives for as long as possible. They do not believe that the current structure of health services for older people facilitates this.

### ***Meals on Wheels***

Longford Meals on Wheels (MOW) service was one that attracted almost unanimous praise and recognition. There appear to be high levels of awareness about the service both by older people themselves, their carers and the wider community. The service is run by Longford Social Services (LSS), a voluntary organisation.

Longford MOW provides good support and daily contact; this appears to be almost as important as the meal itself. The service provides 150 meals a day, 7 days a week throughout the county, with microwave meals for the weekends being delivered with the Friday meal. Demand for the service is increasing all the time.

The service is making a major contribution to reducing isolation for the most vulnerable older people, as well as helping people remain in their own homes as long as possible and maintaining good health through the provision of a hot meal. Feedback on the quality of food was excellent.

MOW volunteers are trained to make referrals to appropriate agencies if they feel that an older person needs support. The service offers good value at €10 for a three course meal, and although it is due to go up to €15, it is still considered very affordable.

There was a clear need articulated for increased outreach visits in the county. Longford Social Services has a visitation service but there are only two volunteers available to visit older persons living alone, and this is not enough to meet the high level of need. LSS intends to work with the new Volunteer Centre to try and access more volunteers to develop this service further.

It was felt that the MOW facility could be used to provide other services if co-ordinated with other health providers, as the service has ready made access to a wide pool of older people, particularly the most isolated. These other services include delivery of newspapers & magazines and distributing information on the Friendly Call Service.

## ***Home Help***

Home Help was another service seen as providing valuable support and a form of social contact, again particularly for the most vulnerable and isolated. There is wide perception about the lack of Home Help to meet the needs of older people in Longford.

Home Helps are limited in what they are allowed to do and have a very short time limit - sometimes only half an hour - and many of our interviewees who avail of the service would have liked longer. Insurance seems to prohibit a number of activities but the visits provide social contact and a sense of security and comfort, and again help prolong living at home.

The Home Help service is limited after 6pm and no over night support is available, which means that there are frail older people sent into hospital because they cannot be left alone at night. With support, they could stay in their own homes for longer.

The researchers were told about an embargo on Home Helps, and they are not replaced during holiday periods. The only Home Help service that is available during these periods is for personal care. There were concerns about cuts in funding for the Home Help service, and this is causing worry and anxiety.

## ***Disability***

The issues for older people with a disability are largely the same as for anyone with a disability but concern for isolated older people with a disability was particularly high.

Our interviewees told us that in many cases adapted transport is not available to take older disabled people to clubs or other social activities and so the risk of isolation and associated physical and mental health issues is compounded.

## ***Accident & Emergency***

St. Joseph's report a high percentage of older people through Accident & Emergency (A&E) as a result of falls in the home. Falls and risk management need to be proactively addressed, e.g. when the home assessment is carried out at 65 years.

There is concern amongst older people who have used A&E services. There is a fear of them being abandoned or overlooked.

# HOUSING

## *Social housing*

Many older persons are living in old houses that are not suitable for their needs. Many of our interviewees expressed a wish to live (either now or in the future) in a community of older people - not a 'home' but a retirement village or sheltered housing. They want purpose built accommodation with a warden on call if needed. Support facilities might include a nurse, recreation room, laundry facility, etc. This would greatly assist older people to maintain their independence and enjoy the associated physical and mental health benefits of this. There are many good practice examples of such schemes, e.g. Thomond Lodge in Ballymahon, Castlemanor Retirement Village in Co. Cavan and sheltered housing scheme in Tullow, Co. Carlow. Interestingly, Thomond Lodge was not mentioned by any interviewees and so there appears to be low levels of awareness of it.

There was a clearly articulated need to provide social housing in rural areas. Many older people feel that they are being forced into urban areas and removed from their own communities and familiar environment, just so that they can access appropriate housing.

The location of social housing is very important; houses need to be near to basic facilities, e.g. shops, post offices, bus stops, etc. There are instances in the south of the county where this has not been the case and older persons are left isolated.

There was concern about the lack of sheltered housing in Edgeworthstown and a general consensus that there is a shortage of suitable social housing for older people across County Longford.

This research acknowledges that progress appears to have been made by the County Council in terms of the design of social housing stock for older and disabled people. Downstairs bathrooms in particular were welcomed.

## *Nursing & Care Homes*

This research found a reasonable stock of nursing homes in the county, with five nursing homes in total - two in Ballymahon, two in Longford Town (including St. Joseph's), one in Roosky and one in Edgeworthstown. There were also groups of interviewees who believed that Longford has a good level of nursing home provision and others who felt the levels inadequate.

It should be recognised that nursing homes are not necessarily the first choice for older people and many of our interviewees felt that older people ended up in this type of accommodation unnecessarily. Poor co-ordination of health & support services and pressure from families were both cited as common reasons for this.

Private nursing homes are felt to be expensive for the level of care provided; the cost is between €600 - €800 per week, which is prohibitive to many older people in Longford. There are HSE beds in some nursing homes for people with medical cards but their number is not sufficient.

The misperceptions about St. Joseph's being oversubscribed have been addressed above; in July 2008, there was no waiting list.

There is a need for nursing homes to be retained in rural areas. Many older persons have been reared in the country and do not want to be 'forced' into the town. For those who have and others, there is a sense of isolation in nursing homes. This is possibly a common trait for older people who felt that they have lost their independence and some confidence by no longer living in their own home.

### ***Other issues***

There was an overwhelming desire from both older people and the full range of service providers to ensure that older people remained in their own homes for as long as possible, and that this should be supported at all costs.

Having to leave their own homes to move in with family or into residential care can be a very traumatic experience. Many of our interviewees live on their own in rural areas. They feel safe and enjoy it, as they have lived there all their lives and know their neighbours and the local community.

Access to Home Help services appears to be key to maintaining older persons' independence in their own homes.

Whilst the design of new social housing stock has improved, there are still access issues for older properties, both in the private and social housing sectors. Funding needs to be made available to improve this stock.

Many rural older persons, particularly men, are living alone without any central heating. There is scope to increase access to central heating and other forms of heating, including electric fans in the bathrooms. The 2004 Irish National Survey of Housing Quality identified that the total number of older persons' households in County Longford without central heating is 21.3% against a national average of 17.7%.

The Longford Warmer Homes fuel poverty project for older people led by the Rathcline Sustainable Projects Group (RSPG, based in Lanesboro) led to the establishment of Longford Warmer Homes Limited - a company with representatives from RSPG, Longford Community Resources Ltd, Longford Environmental Alliance, Longford Older Persons' Network and the EDI Centre for Unemployed. Longford Warmer Homes has been awarded a grant of €250,000 from the Department of Community, Rural & Gaeltacht Affairs under the Community Services Programme to provide 2 years' worth of labour for a fuel poverty initiative. However, the funding for materials for the project, which was applied for to Sustainable Energy Ireland (SEI), has not yet been forthcoming. This leaves the project in doubt. This project would be a major boost to housing, health and fuel poverty issues for older people of Longford and SEI will continue to be lobbied for their part of this funding.

There was an articulated need for two bedroom houses for older people. The lack of a second bedroom prevents visitors staying (and so increasing social contact), and specifically carers for sleep-overs. The provision of a second bedroom could contribute to more older people remaining in their own homes for longer.

There is concern that in a small number of cases, the children of older people encourage their parents to remain in their own homes so that they do not lose their inheritance, even though this may not be meeting their parents' care needs.

House maintenance is an issue for older persons in private housing. Help is needed to assist them to maintain their houses, as this can cause much stress and exacerbate feelings of isolation. Sheltered and supported housing schemes may go some way to addressing this issue.

There are currently 3 grant schemes available for maintenance. They are:

- Housing Aid for Older People Scheme (HSE, means-tested grant)
- Mobility Aids Grant Scheme (LCC, based on medical need & means tested)
- Housing Adaptation Grant for People with a Disability (LCC, means-tested grant)

Earlier this year, Longford County Council reported a low uptake of their two grant schemes and additional referrals were made from Longford Citizens Information Service.

Following an application made by LCRL in conjunction with Longford OPN, for funding for services to older people, €100,000 has been secured from the Dormant Accounts Fund. This funding will enable the appointment of a Project Co-ordinator for a programme of repair and maintenance for older peoples' homes using volunteer trades people. The aim of this programme will be to provide increased safety and security for older people, through the provision of minor repairs (installation of handrails and fire alarms, changing door locks, bulbs, and minor gardening, etc.) to enable them to remain independent and live in their own homes for as long as possible.

# SECURITY & SAFETY

## *Security systems & infrastructure*

There is a high awareness across the county of the availability of free security devices. However, there are still some gaps in provision and there is a need to identify who has and who has not received security / safety devices. For example, there is a group of (social housing) residents in Ballymahon who were advised they would receive smoke detectors, locks, etc., and applied for them but did not receive them despite others in the area having them installed.

Panic alarms are widely available and give older people peace of mind both from a health and security perspective. Some older people did not know how to go about getting a panic button and there is an information gap here.

The current procedure of getting security alarms and systems through community based groups and clubs puts excessive onus on groups to administer the scheme each year. Clubs felt that this needs to be restructured to take the responsibility away from them and onto the County Council.

There is a demand for burglar alarms and locking windows in urban areas. The issue of poor street lighting in some areas was raised, with concerns for both personal and property safety.

The recent funding award to LCRL / the Longford OPN through the Dormant Accounts Fund will have a significant impact on tackling some of these issues.

## *Crime & fear of crime*

The research found a disparity between the feelings of older people living in rural versus urban areas of County Longford. In urban areas, it was noted that there is anti-social behaviour targeted at older people, particularly those living on their own. Young people congregate on walls outside houses and are loud and intimidating for older residents. There is fear for personal safety and property amongst older people at night time.

In rural parts of the county, the research found relatively low level of crimes and fear of crime, and An Garda Síochána statistics support this. There is, however, concern by Gardaí that older people who have been victims of crime rarely take up the Victim Support services, and that this might be due to embarrassment and wanting to keep their business 'private'.

Vulnerable older people in some areas are being targeted by thieves and many older people worry about coming home to a locked house, as there is fear of being attacked while opening up. There is also concern by Gardaí that there might be a false sense of security, as some older people still go out leaving their house doors and windows unlocked.

Many interviewees - in both urban and rural areas - said that they would like to see more frequent and visible Garda patrols to promote peace of mind and keep a high profile. An Garda Síochána have introduced a bicycle patrol in Newtownforbes, Drumlish, Kenagh and Lanesboro. These patrols provide advice on home safety and personal security. This informal and low-tech ('old fashioned') approach has been very well received.

### ***Neighbourhood Watch***

Although there were high levels of awareness about Neighbourhood Watch schemes, most interviewees did not know what they involved and were not aware of any schemes in their own community.

There is a great reliance upon 'good' neighbours stimulating feelings of safety among older persons. Access to support and friendly neighbours increased levels of confidence for older people about living alone, particularly in rural areas. Conversely, those interviewees without 'good neighbours', felt more isolated and fearful of their own personal safety and security.

### ***Domestic violence & elder abuse***

Between 1% and 2% of women accessing Domestic Violence (DV) services in Longford are over the age of 65 years. Domestic violence cases involving these women are particularly shocking and remain taboo. Isolation and rural transport are significant issues for these women, many of whom cannot see freedom as a possibility. For the older generation who may never have worked outside the home, there are few opportunities to leave. They are often economically dependent upon their husbands and in some cases, where families have awareness of the violence, concern about inheritance takes precedence.

Sibling abuse of older people in the family homes is a form of domestic violence and does exist. Again, it is a very taboo subject and few cases are reported.

Financial abuse is more common and older people (particularly those in ill-health) are encouraged to sign over land, houses and other property with the older relatives then 'dumped' into homes. There is great concern about this trend amongst health workers. Making decisions during good health is seen as the key to solving this very difficult issue.

Older persons who experience abuse suffer a great sense of shame and embarrassment and this, coupled with the respect for the church and an onus on keeping the family together, makes it much harder for victims to come forward.

# FINANCE & INFORMATION

## *Sources of Information*

There were huge disparities in response to our research about sources of information. Those closely involved in clubs and groups for older people were confident and knowledgeable about their rights, entitlements, sources of information, help and support. More isolated or unattached older people did not have this knowledge.

Longford Citizens Information Service (CIS) was cited as an excellent source of information, and in particular their outreach and mobile services were seen as examples of good practice by service users and fellow providers alike.

Family members are a common source of information and advice, as are peers - again, most commonly accessed through clubs and groups.

Longford Social Services provide some information to older persons receiving Meals on Wheels. For example, volunteers have distributed information on the national Senior Help Line but this is on an informal basis. LSS are well placed to disseminate information to older people daily, with the delivery of 150 meals per day throughout the county. However, they need to be resourced to undertake this.

## *Longford CIS*

Longford CIS are currently developing a new strategic plan, and increasing services and provision to older people will be one of the priorities. The CIS's own research suggests that they are not reaching as many older people as they might be. In addition to their existing outreach activities, they launched an outreach service in Ballymahon in spring 2008, which has been very well received with high levels of local awareness. There is also a bookable mobile service, outreach service in St. Joseph's and a lo-call number. A lack of resources prevents the CIS from further expanding these services.

The most common issues that older people seek advice and information on are consumer-related issues, e.g. scam emails & callers, with safety and security also big issues. Poverty, housing, health, isolation, transport, welfare, tax and employment are also common areas for older people to seek advice on. The provision of assistance to complete forms is an important and well-used service.

CIS staff believe that there is generally quite good awareness of rights and welfare but also that rural communities are still struggling to access a range of services.

The CIS employ both a Disability Advocacy Worker and an Advocacy Support Worker, and all other members of staff are trained in advocacy services.

## ***Accessing information***

There is no doubt that service providers have improved the range and type of information available hugely over the last few years. Information is now available in large print, electronically (online), by phone and in different languages. However, there does seem to be a gap between this information being available and it getting to the people that need it.

Many older people are not aware of services available to them, and our research found a reliance on the voluntary sector to provide information and guidance, often in an informal capacity (e.g. through Meals on Wheels).

There are significant issues for unattached and more isolation older people accessing information, particularly those who live alone.

Increased bureaucracy across many services is a barrier to accessing the services. Many older people do not like or have difficulty with completing forms. Although Longford CIS provide a service assisting with form-filling, there are some people either not aware of this service or who do not have transport to access it. Many of our interviewees felt that forms can be lengthy and questions can be invasive. Some older people have literacy issues and may be too embarrassed to seek help completing forms. The language and jargon used by some service providers can be off-putting and there is a need to use 'plain English'.

Although access to IT by older people is constantly increasing, many still do not use the Internet and sometimes 'hard' copies of information can be difficult to get hold of.

Our research found that some older people felt that personal contact and information delivered by someone they trust is more likely to be retained.

There needs to be better referral for bereavement to the appropriate people - this is often overlooked and the research identified a need for this amongst widows and widowers.

## ***Finance***

The rising cost of fuel, food, transport and social activities was raised by many of the older people interviewed.

Fuel allowances currently run from September to April each year at €18 per week. With sharp increases in oil and other fuel prices, and the colder summers we have experienced over the last few years, many felt that this allowance should be extended to run all-year round.

The research identified cases where individuals' pensions have been cut when a part-time job has been taken on. Often, the reason for the job is to supplement pension income. This is a real deterrent to encouraging older persons to remain economically active and independent; it can also contribute to increased isolation and reduced social contact.

The lack of a medical card for lower income families can cause significant problems, particularly those in ill-health.

Unemployed people can claim an allowance for the full-time care of two people. These do not have to be relatives. However, there are low levels of awareness about this and therefore low levels of take-up. It could help relieve the shortage of services for elderly people. A Carer's Allowance of €107 per week was introduced last September, and can be claimed on top of the pension by a husband or wife that is caring for their spouse.

Many of our interviewees felt that financially things have improved over the past 10 years, e.g. bus passes, TV licenses, increased pensions, etc., although again this tended to be older people actively involved in clubs who had high levels of knowledge about their entitlements.

The issue of financial abuse is addressed above in the *Security & Safety* section.

# TRANSPORT

## *Transport & clubs / groups*

The lack of flexible community transport is hindering the development of a wide range of innovative social activities and outings for older people's clubs in County Longford. There is a need for buses to and from social clubs for outings and events, and a strong feeling that this should be free and accessible to all. Rented transport often depends on the availability of the rural bus scheme, which many say is usually not available when they need it.

Due to the shortage of transport, volunteers for the clubs use their own transport. This puts more pressure on younger older people to ensure that their older peers can get to the club. As petrol and diesel prices rise, this may cause financial issues for some volunteers. It also means that the clubs are becoming reliant on car-owning younger older people. In addition, most of these cars are not wheelchair accessible, which means an extremely vulnerable section of the clubs' members / potential members are being left out.

The running cost of owning transport, e.g. diesel, tax, repair and insurance, prohibits clubs from considering purchasing their own transport; it is simply not affordable.

There also seems to be an inconsistency of funded transport to clubs and day centres. For example in Ballymahon, Bridgeways does not get funding for a bus but the Convent Lunch Club does.

The County Longford Rural Transport provided by Longford Community Resources has worked well but there is a need for flexible, wheelchair accessible transport/buses, which can be co-ordinated and availed of by the many groups in Longford, so as to extend the boundaries of social activity that can be organised for older persons.

## *Public & community transport*

The Longford Rural Transport project (which LCRL began in March 2003) has had a very positive impact on older people and has given the county's many rural communities a new lease of life. The scheme now runs 17 routes on a weekly basis, including 3 link routes to connect to public and private services to Longford and Cavan.

There are around 1,100 passenger journeys made every month, with 92% of service users aged 65 or over. Currently 81% of those using the service are female, with 19% male use. The service is free to Travel Pass holders and heavily subsidised for everyone under the age of 65, although there is pressure to increase fares.

There was a general consensus that there were not enough buses to meet local need for older people in Longford.

The timing of rural buses means that transport is only provided on particular days, e.g. swim bus only on a Tuesday, or that the time before the bus returns is insufficient.

A number of older people in Longford Town reported that public transport does not cover the whole town. LCRL, under its Rural Transport project, is precluded from providing transport services in the town under the national rules of the Rural Transport Programme funding.

Transport is provided by Longford Social Services to bring people to mass on a Sunday in Longford Town. There is a demand for more mass buses elsewhere in the county.

### ***Transport & isolation***

Most of our interviewees felt that their lives were limited by the lack of transport; none of these people still drove cars. Many older people - almost exclusively women - were dependent on someone who has a car, particularly their husbands. There are potentially isolation issues for these women in later life.

There was a number of older people who had access to their own transport but only used it for local errands and short journeys, not for example for hospital appointments.

Drink driving laws are causing further social exclusion for many isolated older men. The research found a number of examples where pub owners are going out to pick up these customers and dropping them home after an hour or two. Often, this is the only social contact for these men.

There is a need for more footpaths in rural areas on the outskirts of villages into their centre. The increased traffic volume and speed make it too dangerous for older people to walk into the village and many stop going out as a result.

There are also physical access issues around transport; in some cases people's own cars are not adapted or suitable for a person with a disability.

Many older persons are totally taxi dependent even to get into their village or to access rural transport/buses. Although the Rural Transport offers a door-to-door service, a considerable number of older people are unaware of this.

### ***Transport & health***

As stated in the *Health* section above, transport to access health services is a major issue and the most commonly stated one during this research.

We understand that the hospital taxi service is being cut back and in many cases people ring for public taxis but often cannot get through to access this service at present.

There is no co-ordination of transport by the HSE - this means that 3 taxis could be used and paid for to take 3 people to the same hospital on the same day.

There is no transport available at all if sent outside the Dublin Mid Leinster (HSE) region. An example was given of a man having to travel to Galway to have his plaster off a broken arm. He did not have the money to pay for a taxi and the public transport times did not suit, so he took the plaster off himself.

The ambulance service to attend hospital appointments is inflexible and inadequate to meet the needs of older persons, as it leaves too early. There are centralised pick up points, e.g. Edgeworthstown, but no transport from the home to the pick up area. Older people told us that they often have to travel to hospitals in Dublin. They may arrive home late at night (in several instances around 10.00 pm), and are left off at the centralised pick up / drop off points to make their own way home. This includes after treatments that may have left them feeling frail, vulnerable and unwell. Our research came across one man in the county who was found the next morning lying outside near his house because he had not managed to get home from the bus.

There appears to be no transport to Tullamore for chemotherapy, which is an issue.

Transport is means tested and we came across a number of people who, if they are not offered free transport, often do not go to appointments at GP's or hospitals.

Many older persons felt that the lack of access to transport hindered them picking up prescriptions as quickly as they would like.

There is an excellent bus service from Longford Town to the rural parts of Longford to bring senior citizens into St. Joseph's Day Care Centre. Longford Social Services have five mini buses, all with wheelchair access, and these are used by the Health Service Executive for this service. These buses, however, are used to full capacity.

It is believed that there is a significant amount of unused vehicle capacity in the county, particularly at weekends. This includes vehicles belonging to St. Christopher's, Irish Wheelchair Association and Disabled People of Longford.

It was felt that the development of a volunteering culture needs to be encouraged with regard to providing services to older persons and transport - particularly to access health services - as the HSE is not going to provide what is required to meet individual needs.

On a very positive note, LCRL have received several letters from local GPs who have written to thank them for the Rural Transport project. These doctors have stated that as a result of the transport scheme they are prescribing less medicine, experiencing lower levels of isolation and loneliness amongst patients using the service and seeing new and renewed friendships.

## CROSS CUTTING ISSUES

### *Having a voice*

Many of the older people we interviewed were absolutely delighted to be asked what their issues were - this was the first time that most had ever been asked. Although levels of public consultation have increased dramatically over the last few years, most older people do not feel that their voices are heard.

The Longford OPN has made great strides in advocating on behalf of its members / network groups. Reaching more isolated individuals is difficult and time-consuming but not impossible, and the Longford OPN can perhaps ensure that service providers are directed towards engaging with this group to a greater extent.

Providers of services for older people need to involve them more actively, increase levels of proper consultation and most importantly, take older people seriously rather than listening as a gesture.

The Longford OPN need to be proactive and show leadership in terms of ensuring that the voice of older people is heard. The best opportunity is through the planning and review processes of Longford County Development Board.

### *Isolation & rural issues*

Isolation is a huge issue and came up time and time again. The greatest concern about isolated older people came from their peers - younger and/or healthier older people - and there was most concern about isolation in rural areas of Longford. In some cases, hospital appointments are the only form of social activity, which is a very sad reality.

There is a need for a pro-active, co-ordinated outreach programme to target unattached older people living in rural communities throughout Longford, to ensure their social, recreational, physical and mental health and other needs are being met, and that these people are not 'abandoned' or 'forgotten'.

There was a very strong feeling amongst interviewees that churches, pubs, post offices, libraries and other community meeting places are essential to the physical, mental and social well-being of all older people, and particularly key to preventing isolation. They offer a great source of information and security for older people, as well as social contact.

The outreach of services to rural communities is very important, as it reduces isolation and there is a need to continually bring the services (e.g. education, social, health, information, etc.) to the people, if their needs are to be met. A number of service providers have made great efforts to increase their outreach, e.g. CIS services in Ballymahon and at agricultural markets, and the EDI, HSE and VEC's recent involvement in the Aughnacliffe men's group.

### ***The Friendly Call Service***

The Friendly Call Service, which began operating in 2007 - a free weekly 'comfort' call by a trained volunteer - aims to make a contribution towards reducing isolation, particularly in rural areas. This is a partnership project between the Longford OPN and LCRL under the Rural Social Scheme. However, despite huge attempts to publicise the service, there has been a low uptake so far (12 clients availing of the service at the moment). This service operates from 10.00 am to 4.00 pm, 3 days per week.

### ***Service co-ordination & information***

There remains a lack of co-ordination amongst the many statutory, voluntary and community services for older people in County Longford. This is causing unnecessary duplication of activities and services, and thus wasted resources.

There also appears to be a significant gap in the flow of information. Whilst Longford CIS and others are clearly doing an excellent job in helping this, there are still a number of older people who are not aware of services, rights, entitlements, support and social resources for themselves.

The capacity of the local community groups, and in particularly the clubs for older people, needs to be built up, so they are better placed to deal with local issues across all sectors and effectively disseminate information.

There are two phone-based services: the new (national) Senior Help Line operates every day of the year, and the new (local) Longford Friendly Call service operates 3 days per week. Both these services need to be promoted more widely to older people, as there is a low level of awareness about them at present.

### ***Older men***

The risk of serious isolation of older men - particularly those living alone - is a major concern. The level of participation by men in local clubs and groups is very low; it has traditionally been difficult to get men involved in their activities.

Many of our interviewees (including women) felt that many clubs have inappropriate activities to meet the needs of older men, and that the small numbers attending put other men off, thus creating a 'vicious circle' effect.

There also seems to be some embarrassment from older men about being part of a group, and that it is not 'for them'. Many married men would rather either stay at home and watch television or go to the pub than attend the clubs with their wives. However, there is serious concern amongst the wider community - particularly women - for the men's physical and mental health later in life if their partner dies first.

In urban and small town areas, the status division between the working class and professional men represents a key barrier to involving men in clubs and group. This is proving to be a hard barrier to overcome for those working to engage with men.

In rural areas, e.g. Aughnacliffe, men have come together, as they share the same background - farming / rural - and there is no differentiation in class. Also the PHNs, community representatives, DSFA, HSE and the VEC, have played a key role in bringing these men together. Local history and storytelling have proven to be a valuable tool in getting isolated rural men involved in the group. Many men also travel together to the group and are making friends on the journey, and a number travel independently on their tractors.

There is a men's group in Ardagh in the early stages of development and this needs continued development support from the Longford OPN, service providers and its local community. There is also one men's group active in Granard.

### ***Traveller community***

Longford has the 2<sup>nd</sup> highest percentage (per head of population) of Travellers in Ireland.

Many of the issues faced by older people in the Traveller community are the same as those for settled people. However, our research identified a number of key differences.

The Travelling community is acknowledged as being one of the most marginalised and disadvantaged groups in Ireland; many of these issues are compounded for its older people.

The issue of life expectancy is a major issue: 4 in 10 people from the Travelling community do not reach their 39<sup>th</sup> birthday, and 7 out of 10 do not reach their 59<sup>th</sup> birthday. The percentage of older people within this community is, therefore, shockingly low.

Unlike the settled community, there are very few isolated older Travellers, as the sense of family and close-knit community is very strong. In some cases this might stifle a sense of independence, but this is at the benefit of a total lack of isolation.

Older men in the Travelling community generally find it easier to socialise than women, most of whom have spent their lives at home rearing their families. There is a positive feeling that this will change for the next generation, as Traveller women are not getting married or having children so young, education levels rise and there is more mixing with the settled community.

Many older people in the Traveller Community are afraid to join clubs and groups for fear of racism and discrimination, and even when they do not have this fear, these older people do not know how to access information about social activities and rely upon their family to find this out.

Literacy issues are a problem for some older Travellers in terms of accessing services, and also their isolation from the settled community means that basic activities like using a telephone can be a challenge.

Hospital stays can be particularly frightening experiences for many older people, but even more so for the Travelling community and there appears to be a number of examples where people have discharged themselves early.

Although a few older members of the Traveller community access the Meals on Wheels service, we were unable to find anyone who had Home Help. We understand that the uptake of these services is much higher in Mullingar, and it may be useful to look at what they have done in that area to promote services to the Traveller community.

The Traveller Primary Health Care Project in County Longford provides an excellent source of information, advice and signposting for the community's older people, across all areas not just health. They are undertaking ongoing health needs assessment, working closely with the PHN dedicated to the Traveller community. The Primary Health Care Project is a Traveller health project and is a partnership between LCRL, Longford Traveller Movement and the HSE.

### ***Migrant communities***

Whilst the research team did not manage to make direct contact with older people from migrant communities, we drew on other recent research in the county through its Intercultural Strategy development process.

The Longford OPN is not aware of any older people from any migrant or minority ethnic communities belonging to any of its network groups. Whilst there are no doubt issues of confidence, acceptance, information gaps and cultural differences, the main issue appears to be that migrant communities in Longford (as elsewhere in the country) are relatively young.

However, the county has experienced an increase in the number of migrant grandparents coming to Longford to stay with their (grown up) children and grandchildren. It is thought that they might be isolated, as generally they have low levels of English language skills. This may be an issue for the future.

# RECOMMENDATIONS FOR SERVICE PROVIDERS

## *Social & Leisure*

Action	Possible partners
Investigate feasibility of establishing a county-wide befriending / buddy scheme to provide regular face-to-face contact for isolated older people	Longford Volunteer Centre OPN
Continue to support and encourage new and existing men's groups in the county	Bridgeways Family Resource Rath Mhuire Resource Centre Ardagh group DSFA VEC HSE LCRL Longford EDI Centre
Develop link with Positive Age and their Older Men's Network	OPN Positive Age
Undertake exchange visits between older persons' groups in the county to share experiences, exchange ideas, promote networking & encourage development	OPN LCRL
Work with local churches to encourage them to play a more active role in the dissemination of information including notices at services, provision of transport & home visits	OPN Local churches
Increase levels of arts activities available through clubs & groups	Arts & Library Service
Encourage intergenerational projects	Schools & colleges St. Joseph's Arts & Library Service
Increase range and amount of social activities for nursing home residents	St. Joseph's Nursing homes OPN
Encourage GAA, ICA and other locally-based national organisations to more involved with connecting with isolated older people, particularly through the GAA Social Initiative	Longford GAA Longford ICA OPN IFA

## *Health*

Action	Possible partners
Ensure PHNs have a key role on the proposed Older Persons' Partnership Forum (see Cross Cutting actions, p 60)	PHNs Key service providers
Research HSE funding programmes for health promotion activities for rural & outreach programmes on key health issues, e.g. mental health, nutrition	HSE
Increase co-ordination of HSE transport services including hospital transport & exploit unused vehicle capacity	HSE Longford Social Services LCRL under the Rural Transport Programme

Investigate falls management programme which could be linked to the pension home assessment	HSE Local GP's
Lobby for a Patient Advocate for older people	HSE OPN
Work with Home Help services to instigate sleepover & night time as a home option to respite care or hospital	HSE LCVF
Campaign for a dementia unit, geriatrician & other specialist services to be available in Longford	OPN HSE
Investigate the feasibility of a one-stop shop in Granard to provide holistic health service, e.g. chiropody, prescriptions, blood pressure check.	HSE Rath Mhuire Resource Centre Granard Family Resource Centre

### **Housing**

<b>Action</b>	<b>Possible partners</b>
Ensure that the findings from the Housing Needs Study relating to Older Persons' Dwellings (OPDs) are considered and the recommendations implemented	LCC OPN
Increase availability of social housing in rural communities	LCC Housing Associations
Lobby to ensure continued funding & support for Helplink South for their panic button scheme which covers Longford	OPN LCRL
Establish a pool of reliable & trustworthy workmen to carry out maintenance & odd jobs, e.g. grass cutting, painting and decorating, roof repairs (through OPN / LCRL Dormant Accounts Fund award)	LCRL OPN LCC
Increase amount of sheltered housing accommodation including feasibility study of locating this at St. Joseph's	LCC HSE St. Joseph's

### **Security & Safety**

<b>Action</b>	<b>Possible partners</b>
Initiate volunteer Good Neighbour Scheme	OPN Longford Volunteer Centre An Garda Síochána
Undertake an audit of security & safety systems to identify gaps	LCC An Garda Síochána
Launch promotional information campaign to ensure that everyone knows that security and safety devices are available	LCC An Garda Síochána Longford CIS OPN Home service providers Library Service
Lobby LCC & government to ensure that security & safety systems are automatically processed when a person becomes pension age and linked to home assessment	OPN National Fora An Garda Síochána HSE

**Finance & Information**

<b>Action</b>	<b>Possible partners</b>
Increase access to IT training specifically for older people ('Silver Surfers')	Longford VEC Library Service
Update the existing CIS directory with a detailed list of services for older people	Longford CIS OPN
Ensure that the CIS's outreach service is supported & promoted as widely as possible	Longford CIS OPN St. Joseph's Key service providers
Lobby National Fora to get all-year round fuel allowance introduced &/or current levels increased	OPN National Fora
Exploit the Meals on Wheels & other networks (possibly utilising a mobile library service &/or LCRL Rural Transport project) to disseminate the widest range of information, ensuring resources to do this	Longford Social Services HSE LCRL OPN Library Service
Investigate how 'financial abuse' by family members can be tackled to encourage 'Will before you're ill'	OPN Longford CIS HSE Social Services

**Transport**

<b>Action</b>	<b>Possible partners</b>
Initiate volunteer driver transport scheme - particularly for hospital, GP, chiropody & collection of prescriptions	LCRL Longford Volunteer Centre HSE
Undertake a promotional campaign for the Longford Rural Bus scheme to increase knowledge & awareness	LCRL OPN

**Cross cutting**

<b>Action</b>	<b>Possible partners</b>
Establish Older Persons' Partnership Forum across sectors - for information exchange, sharing ideas & resources, promoting best practice & professional support	Longford CDB HSE LCC OPN LCRL Longford CIC Library Service Longford VEC Other key service providers
Develop a strategy for the involvement of & provision of services to older people in Longford	Longford CDB LCRL OPN
Develop an integrated promotional campaign for the Friendly Call Service including its referral by GPs, PHNs & others	LCRL HSE OPN

Design & develop training programme for committee members of the Longford OPN to build capacity, confidence & leadership skills	LCRL OPN Longford VEC
Promote & develop links between service providers & older people within the Traveller community, using the Primary Health Care Group as a key link	LCRL LTM Library Service
Share, celebrate & recognise local good practice	HSE LCRL OPN Library Service All Key service providers
Ensure that issues identified in this research are fed into local strategy development process, particularly CDB's new 3 year Action Plan & Social Inclusion Strategy	OPN CDB LCC

## RECOMMENDATIONS FOR LONGFORD OPN

It is recognised that the Longford OPN provides an excellent opportunity for older people to be actively involved with and have a voice on a range of issues at county level. However, there is a need for better leadership and co-ordination, to have some degree of professional input & support, encourage fresh thinking & new ideas, and have the enhanced support from and better representation on a range of organisations to ensure services meet the needs of older people.

There is also a need to build the capacity of the Longford OPN as much as possible, but also to understand and appreciate its limits as a voluntary organisation. There will be a fine balance between utilising the many talents and experiences of the Longford OPN members and not placing too heavy a burden on them.

These factors will be instrumental in keeping members involved and sustaining the Network in the future.

Recommendations for the Longford OPN are:

- Increase representation on the committee by men
- Build links with non-member groups & try to encourage membership of the Longford OPN, so that the network has 100% coverage
- Undertake lobbying activities on key issues on behalf of older people in the county
- Consider how the Traveller & migrant communities might be reached
- Encourage & support expansion of activities in some clubs (e.g. Edgeworthstown)
- Consider involving representation from care and/or nursing homes
- Promote the Longford OPN to service providers and encourage them to share their information, particularly on new or changes to services
- Launch a newsletter for older people containing a wealth of information on services, activities & events
- Play a lead role in the formation of the proposed Older Persons' Partnership Forum
- Ensure that the voice & needs of older people are represented at service planning and review activities, particularly the CDB
- Identify potential funding sources for a dedicated staffing resource for older people

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If you would like a full version of the study please contact LCRL at:



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